

2017

HUMANITARIAN NEEDS OVERVIEW

DEC 2016

A woman in a bright pink shirt is shown from the chest down, leaning over a large, shallow, woven basket filled with golden-brown grain. She is sorting through the grain with her hands. In the background, other people are visible, some also working with grain, suggesting a busy outdoor market or processing area. The ground is covered with more grain.

SUDAN

This document is produced on behalf of the Humanitarian Country Team and partners.

This document provides the Humanitarian Country Team's shared understanding of the crisis, including the most pressing humanitarian needs and the estimated number of people who need assistance. It represents a consolidated evidence base and helps inform joint humanitarian response planning.

The designations used and the presentation of material in the report do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.



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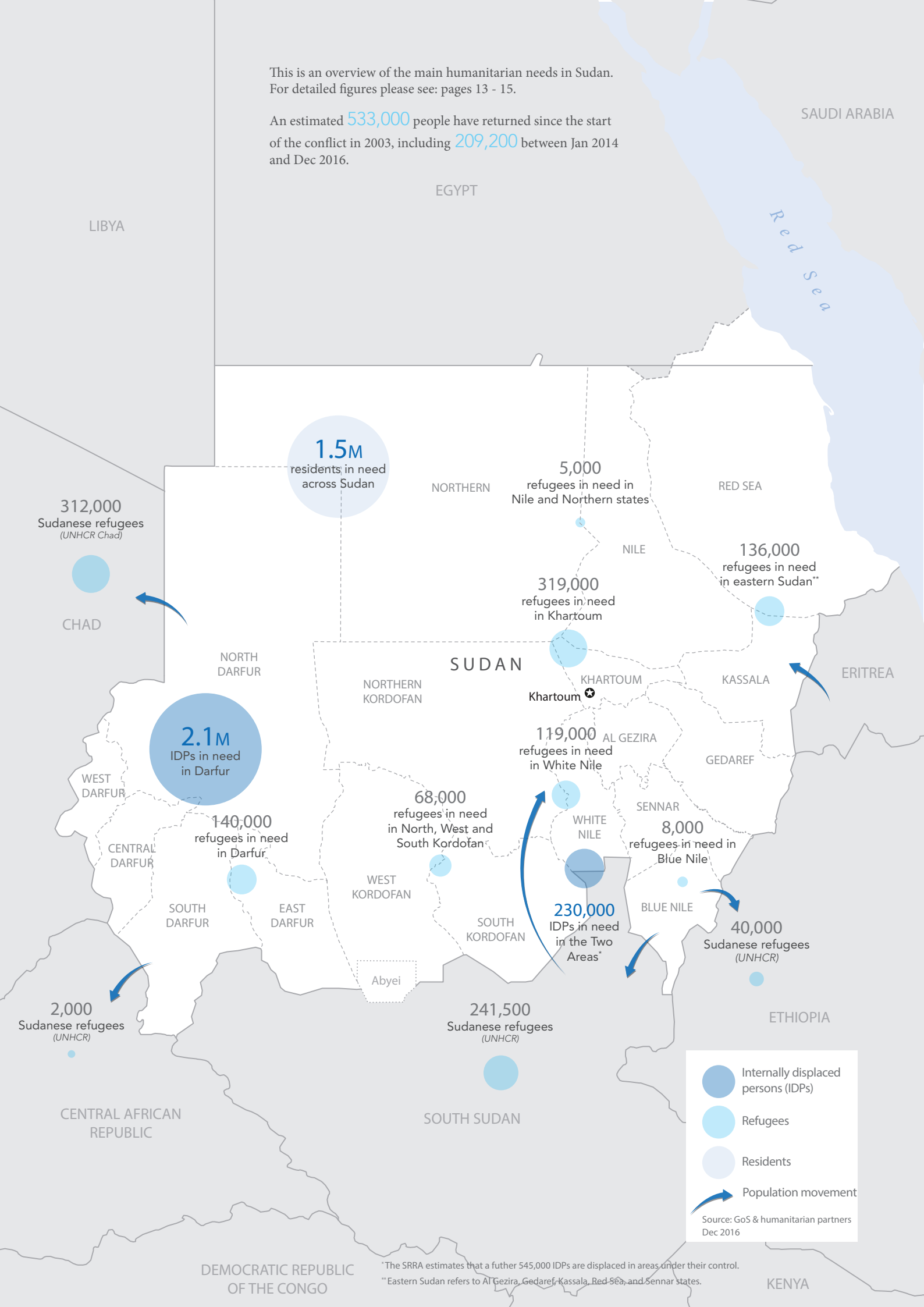
@UN OCHA Sudan

PART I: SUMMARY

- 
-  Humanitarian needs & key figures
 -  Humanitarian impact
 -  Breakdown of people in need
 -  Severity of need

This is an overview of the main humanitarian needs in Sudan. For detailed figures please see: pages 13 - 15.

An estimated **533,000** people have returned since the start of the conflict in 2003, including **209,200** between Jan 2014 and Dec 2016.



*The SRRA estimates that a further 545,000 IDPs are displaced in areas under their control.

** Eastern Sudan refers to Al Gezira, Gedaref, Kassala, Red Sea, and Sennar states.

Source: GoS & humanitarian partners Dec 2016

HUMANITARIAN

NEEDS & KEY FIGURES

This document identifies the needs of people based on their vulnerabilities. Rather than assuming that all Internally Displaced Persons (IDPs) are in need because they are displaced, only vulnerable IDPs have been considered. The main humanitarian needs in Sudan result from several factors. New and protracted displacement due to conflict affects access to basic services and disrupts the livelihoods and food security of many people. Acute malnutrition in children under the age of 5 is above emergency thresholds in different areas across the country. Refugees and asylum seekers continue to arrive in Sudan seeking protection and humanitarian assistance. Returnees (both refugee and IDP returnees) are also vulnerable. Natural hazards in Sudan (in particular floods and droughts) impact food security and livelihoods of vulnerable people. The total number of people estimated to be in need of humanitarian assistance in 2017 is 4.8 million, a reduction of 1 million compared to 2016. This is attributed to food security being severely affected by El Niño and other factors in 2015, but in 2016 agricultural performance was better due to improved rainfall, reducing the number of people in need of food and livelihoods assistance to 3.6 million.

HUMANITARIAN NEEDS



1 Basic services for internally displaced people

Darfur remains an epicenter of large scale protracted displacement, and also witnessed new displacement in 2016. Most IDPs are unable to meet their basic needs independently. The Government of Sudan (GoS) estimates that 2.3 million people are displaced in conflict-affected areas. The UN and partners estimate that a further half a million displaced people live in host communities and settlements in Darfur.

Armed movements in the Two Areas estimate that an additional 545,000 people are displaced in areas under their control.



2 Food insecurity

In 2016, some 3.6 million people are living at crisis or emergency levels of food insecurity, according to government Food Security Technical Secretariat (FSTS) estimates. Arable lands in some food-producing areas are difficult to access and even when crops can be grown, inadequate transport infrastructure has prevented access to markets.



3 Acute malnutrition in children

According to the Ministry of Health, of the 2.2 million children suffering from wasting (Global Acute Malnutrition, GAM) annually in Sudan, some 573,000 suffer from Severe Acute Malnutrition (SAM). In 2016, 11 out of the 18 states have a malnutrition prevalence of above 15 per cent, which is above the emergency threshold as per WHO standards.



4 Influx of refugees

There are nearly 800,000 refugees and asylum seekers living in Sudan who are in need of humanitarian assistance. This includes over 135,000 refugees in five states in eastern Sudan living in a protracted situation and nearly 300,000 South Sudanese refugees who have arrived in Sudan since the emergency began in December 2013 (including over 131,000 who arrived in 2016).

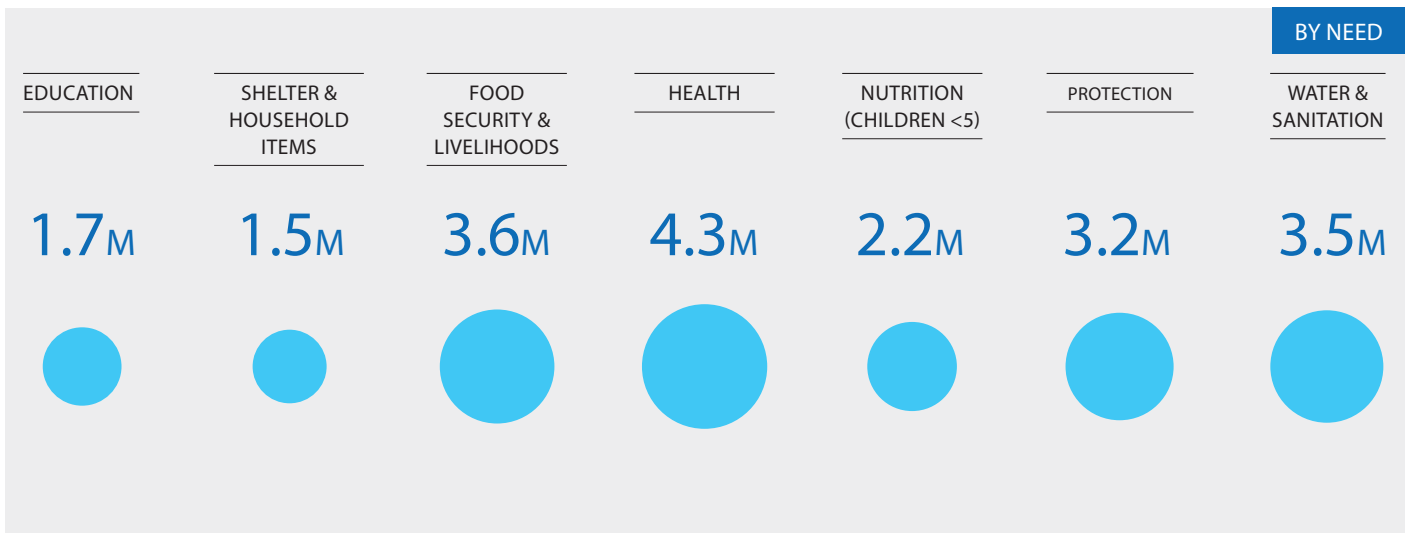
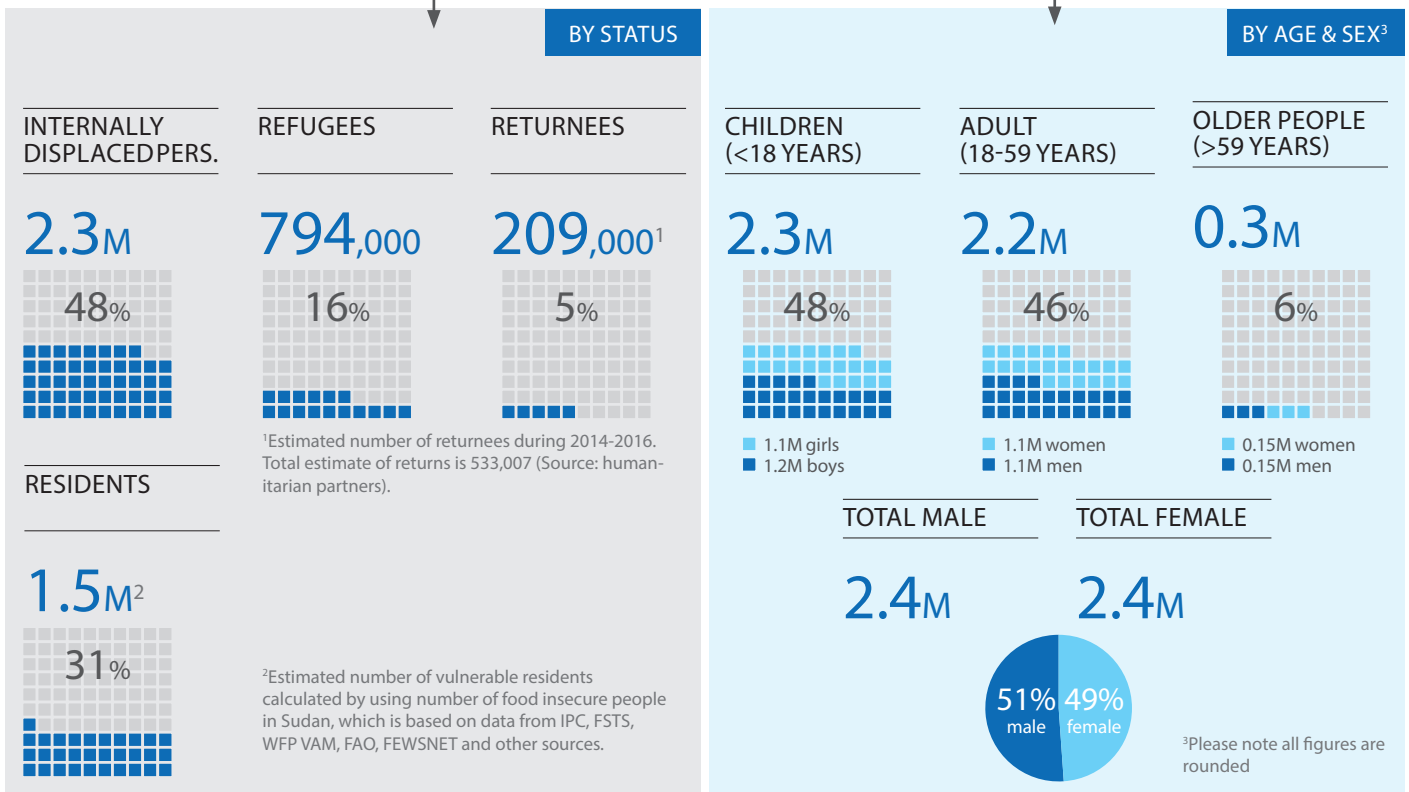
TOTAL POPULATION

39.60M



NUMBER OF PEOPLE WHO NEED HUMANITARIAN ASSISTANCE

4.8M



HUMANITARIAN

IMPACT

Sudan faces two major overlapping humanitarian challenges: one triggered by conflict leading to wide-scale population displacement and another due to climatic and socio-cultural conditions leading to crisis levels of food insecurity and malnutrition. The scale and long-term nature of displacement, especially in Darfur, which has not been matched by economic opportunities, has exposed displaced people to hardship and uncertainty about their future. This is putting an additional strain on the 3.6 million people currently suffering from food insecurity, and the 2.2 million children suffering from acute malnutrition. Refugees and asylum seekers living in both emergency and protracted situations remain largely dependent on humanitarian assistance, with very limited access to livelihood opportunities.

Large scale and protracted internal displacement

In 2016, considerable new displacement occurred and a large number of those who have fled their homes since 2004 remain displaced.

In Darfur some 1.6 million displaced people are registered as living in camps. For unregistered IDPs i.e. displaced people living in rural settlements and urban areas, estimates vary considerably, especially as there is no systematic registration of displacement outside camps. The official government estimate is that an additional 0.5 million internally displaced persons live outside camps in Darfur and a further 0.2 million internally displaced people live in South Kordofan and Blue Nile. According to the government, the overall total number of IDPs across Sudan is 2.3 million in government-controlled conflict-affected areas.

The UN and partners estimate that a further half a million displaced people live in host communities and settlements in Darfur.

In many parts of Darfur, inter-communal conflict is another main cause of insecurity and recurrently causes substantial civilian displacement. Such localised armed violence takes place most frequently between sedentary-farming and nomadic-pastoral communities, as well as between nomadic communities, clashing over access to, use of and management of resources, especially land.

Armed movements in South Kordofan and Blue Nile estimate that an additional 545,000 people are displaced in areas under their control.

Nearly every community in conflict-affected areas, whether sedentary rural farmers, nomadic pastoralists, public sector workers or urban dwellers, has been impacted, further undermining their capacity to host displaced people.

Protracted displacement has disrupted traditional livelihood activities and eroded community resilience to withstand shocks. Displaced people are more vulnerable due to their

FOOD INSECURITY

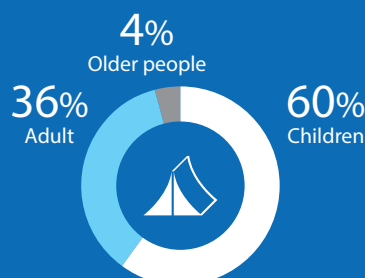
1 in 10
people in Sudan estimated
to be food insecure



Source: IPC, FSTS, WFP VAM, FAO, FEWSNET and other sources

IDPs IN CAMPS BY AGE

Of 1.6M IDPs living in camps



Source: IOM

SOUTH SUDANESE NEW ARRIVALS

Over 297,000
South Sudanese refugees have arrived
in Sudan since Dec 2013



Source: UNHCR

reduced access to natural resources such as land and water, and a chronic shortage of basic services. Conflict impacts pastoralists' traditional migration routes and farmers' capacity to transport their crops. Newly displaced people lose their livelihood opportunities. As a result they seek safety, food, water, shelter, healthcare, education for their children and new livelihoods.

Children represent about 60 per cent of people displaced in camps.

Among displaced people, women and children are the most vulnerable and at the greatest risk of being exposed to violence during movements to markets, for water and wood collection and farming. Breakdown of the rule of law and economic hardship further compounds vulnerabilities.

Older people and people with disabilities, who may not have easy access to assistance, are also vulnerable and are exposed to risks of neglect, violence and exploitation. Limited basic services, such as social services and education, can further impact the aforementioned groups.

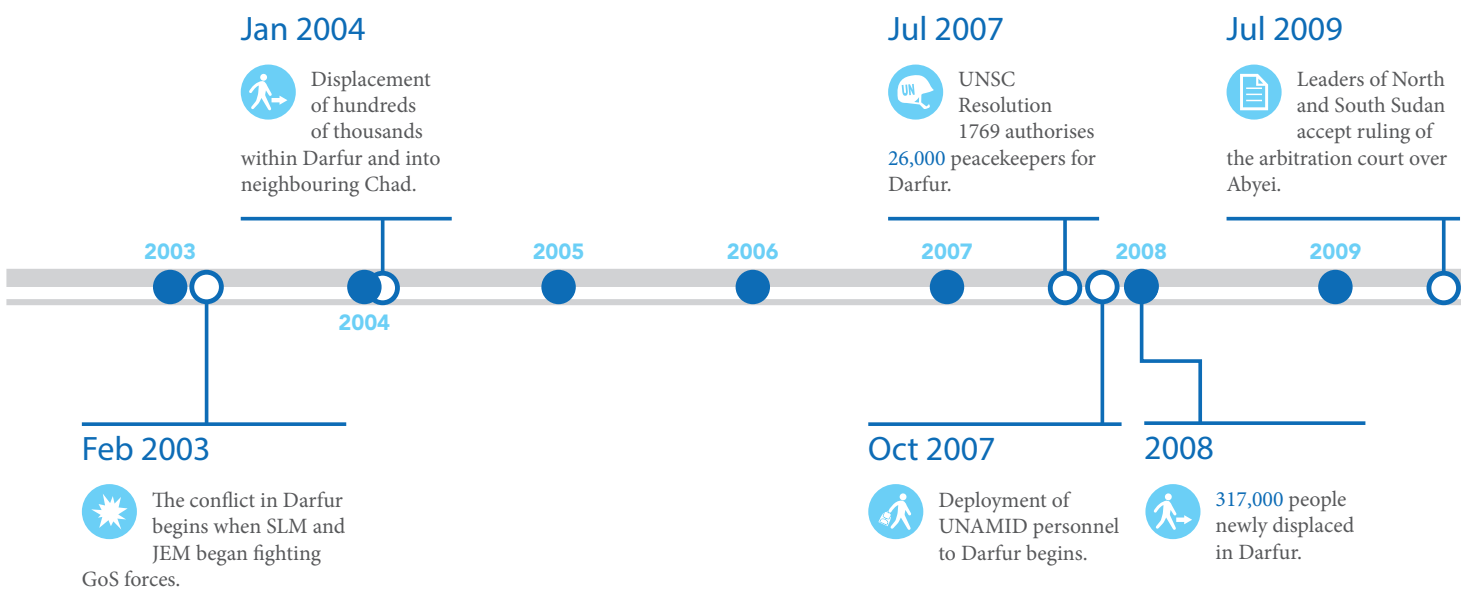
That is not to say that all displaced people suffer from the same levels of vulnerability, but common to all displaced people is a need for access to basic public services. Especially

in camps and informal settlements, access to water, sanitation, health and education would, in the absence of humanitarian assistance, be scarce or not available at all. Access to documentation and proof of identity is another challenge for displaced people who have lost personal identification documents.

Large scale humanitarian assistance over the last decade has prevented excess mortality and morbidity among the displaced. Assistance, however, remains basic.

For example, in 18 of the 60 IDP camps in Darfur people have access to less than 7.5 litres of water per person per day, which is well below the minimum emergency standards. The absence of socio-economic opportunities to rebuild their lives means that, even after years of displacement, two thirds of displaced people struggle to fully sustain their food needs by themselves. The long-term nature of displacement and people's continued reliance on assistance to meet basic requirements calls for renewed, stronger, initiatives to create the conditions for durable solutions. In the meantime, people remain eager to be able to support themselves better. More early recovery activities are needed to strengthen their self-reliance and increase their resilience.

IDP TIMELINE



Although many displaced people commute seasonally to their areas of origin to check on property and in some cases tend their land, large scale durable returns have, for the most part, not taken place. The reality is that population growth and displacement have altered the human geography and exerted stress on available natural and economic resources. This means that when prospects for return remain elusive, some IDPs may actually choose to integrate locally if given the opportunity.

While some displaced people return to their homes, many have chosen to remain in camps or in settlements and urban areas, seeking opportunities for a safer future. Safety and security, land ownership and access to basic social services are most frequently cited by displaced people as the primary conditions required for their return.

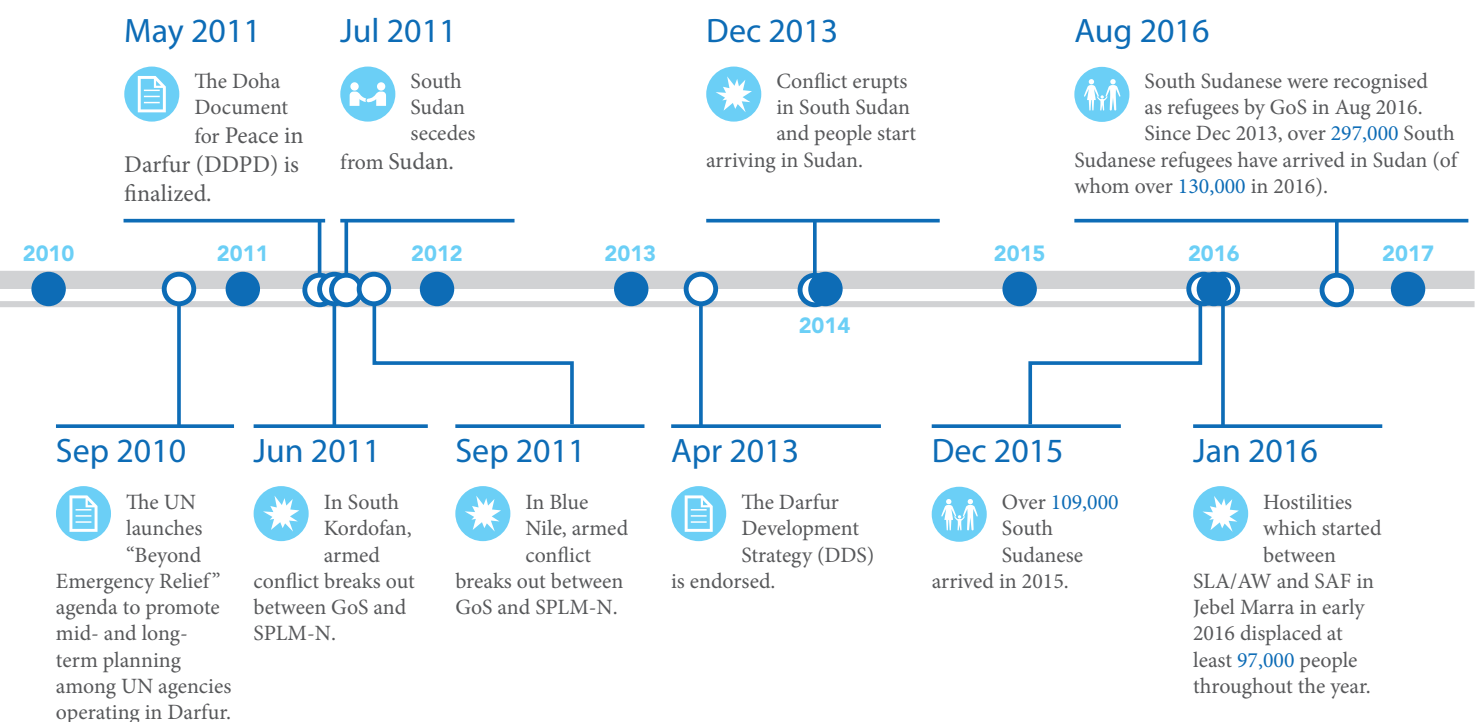
At least 533,000 people have returned to their place of origin since the onset of the crisis, including 209,000 from the beginning of 2014 to the end of 2016. Returnees often need some support to settle in their former place of origin, be it in the form of temporary humanitarian assistance until their traditional livelihoods are restored, or in terms of available public services. The delivery of aid to returnees will require careful coordination between all the stakeholders providing short-term aid and those building and developing the capacities of communities over the long-term.

The government and development actors are working to ensure that IDPs have the ability to make informed decisions about their voluntary return to areas of origin, and that the necessary conditions and support are in place to help them do so in a safe and dignified manner.

Asylum seekers and refugees

Sudan has a longstanding tradition of hospitality towards refugees and asylum seekers, and is currently hosting refugees from the Central African Republic (CAR), Chad, Eritrea, Ethiopia, South Sudan, Syria and Yemen.

As of December 2016, over 793,700 asylum seekers and refugees are being hosted across Sudan. Voluntary return is not an option for the vast majority of these people due to the situation in their countries of origin, and resettlement remains limited to only specific cases. A large number of refugees and asylum seekers are as yet unregistered, including Syrian and Yemeni people who are not obligated to register as refugees upon arrival in country. With this unregistered population in mind, the Commission for Refugees (COR) estimates that there are approximately 1.3 million refugees and asylum seekers living in Sudan. Of these, a large population are estimated to be residing in urban areas, often with limited access to assistance and services.



Fresh violence in 2016, compounded by critical food insecurity in the border states of South Sudan, has further fueled an ongoing influx of South Sudanese refugees into Sudan. There are over 297,000 South Sudanese refugees who have sought safety and protection in Sudan since December 2013 due to the progressive deterioration of the security situation in South Sudan.

Until there is a political solution in South Sudan, this number is likely to continue to grow. Among the South Sudanese refugees arriving in Sudan, 84 per cent are women and children. Having usually travelled long distances to seek safety and protection, these people need food, water, shelter and health assistance as well as livelihood opportunities. Additionally, approximately 350,000 individuals from South Sudan are estimated to have been living in Sudan prior to secession.

The influx of South Sudanese refugees places additional pressure on the resources of the host communities, as well as on the capacity of the government and humanitarian partners to respond. Nevertheless, the Government of Sudan has maintained its open-border policy and in August 2016 recognized their status as refugees, enabling them to enjoy the rights prescribed in the 1951 Refugee Convention. The emergency response to South Sudanese refugees has concentrated on expanding reception capacity and improving site-based and community-based refugee assistance, including enhancing host community capacity to manage sudden increases in the refugee population.

Refugees living in protracted situations in Darfur and eastern Sudan remain largely dependent on humanitarian aid, with a very small percentage having access to livelihood opportunities. Approximately 8,500 refugees from Chad live in two sites in Central Darfur. Spontaneous returns continue to be supported; however, the residual Chadian refugee population remains dependent on humanitarian assistance while they await the finalization of a formal repatriation agreement. More than 1,450 refugees from CAR are also living in the Darfur region, mostly in urban settlements around Nyala. Access to education, medical referrals and livelihood opportunities are among the key needs to be addressed.

In eastern Sudan, the humanitarian response for over 135,000 refugees and asylum seekers, including new arrivals and protracted refugees from Eritrea and Ethiopia in Al Gezira, Gedaref, Kassala, Red Sea and Sennar states, has stretched local resources. Both populations are living in one of the poorest regions of Sudan and face similar challenges, including high levels of poverty, limited access to livelihood opportunities, and restrictions on freedom of movement.

Sudan is situated within the Horn of Africa's large, complex and constantly evolving migration routes, and serves as both a temporary and long-term host to a diverse population of refugees, asylum-seekers and other persons of concern. Socioeconomic challenges, such as the lack of education,

health, water services and livelihood opportunities, as well as protection concerns are often cited by refugees to be the primary factors in their choice to move onwards to North Africa and Europe. Increasing numbers of refugees in eastern Sudan are turning to smuggling networks in order to facilitate their movement onward. Along these migratory routes, refugees and asylum-seekers can be exposed to various forms of exploitation that can result in human rights violations, including human trafficking.

Movement drivers also fall within a broader development context within Sudan. There is a need for more durable solutions that support the development of opportunities for refugees to gain greater self-reliance and enhanced protection. Greater engagement of development actors within the refugee response in Sudan will also benefit host communities, especially as it relates to improved access to basic services and livelihood opportunities for both refugees and host community members.

Food insecurity

While conflict has been the main driver of humanitarian needs in Sudan, poverty, floods, drought and environmental degradation have also significantly affected the livelihoods of vulnerable people, particularly children. Conflict and insecurity has meant that arable lands in some food-producing areas cannot be accessed and that, even when crops can be grown, an inadequate transportation infrastructure prevents efficient access to markets. The high prices of agriculture inputs and products have reduced purchasing power at the household level. This has reinforced and exacerbated chronic vulnerabilities such as poverty and unemployment among significant segments of the population. This is particularly relevant in rural areas.

The government's Food Security Technical Secretariat (FSTS) estimates the level of food insecurity for 3.6 million people has reached crisis or emergency levels.

High levels of malnutrition

Socio-cultural and poor feeding practices have a major impact on the nutrition levels of pregnant women and their children. Both acute and chronic forms of undernutrition affect the growth, development and survival of the children of Sudan. Undernutrition results in short and long-term consequences: while increased risk of mortality and morbidity are the short-term consequences of child malnutrition, about 45 per cent of all deaths in children under five are directly related with malnutrition, mostly due to the increased impact of disease. In Sudan, over one in three children under five are too short for their age (stunted) and more than one in six are too thin for their height (wasted).

According to the Ministry of Health, some 2.2 million children suffer from wasting annually (Global Acute Malnutrition, GAM) out of which over 573,000 suffer from Severe Acute Malnutrition (SAM). 11 out of the 18 states have a malnutrition prevalence of above 15 per cent, which is above the emergency threshold as per the WHO standards. Some states have much higher rates, such as North Darfur where GAM prevalence is at 27.9 per cent (Source: MICS 2014).

Malnutrition is also chronic in many parts of Sudan, with high levels of malnutrition remaining unchanged for decades. This is particularly significant in the east of Sudan, where this chronic development problem often results in acute humanitarian needs. The main contributing factors to these high levels of malnutrition are food insecurity, disease, lack of access to primary healthcare, a lack of clean drinking water, inadequate sanitation facilities and poor infant feeding practices.

Both chronic and acute malnutrition are a key concern and priority for the government, which has joined the international Scaling Up Nutrition (SUN) initiative. The Sudan Nutrition Case for Investment on Nutrition was launched in 2016 by the government. This multi-sector initiative aims to tackle malnutrition by addressing the underlying factors. The government, supported by development and humanitarian actors, has scaled up response in line with the National Nutrition Strategic Plan. As a result, the number of children who have access to treatment of SAM has doubled over the last five years, but current nutrition programmes need to be significantly scaled up to achieve a meaningful impact and visibly reduce malnutrition rates in the coming years.

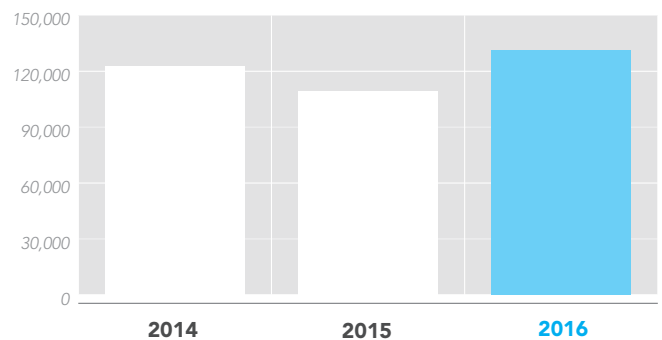
Natural Disasters

Sudan is at high risk from certain natural hazards in particular floods and drought. Floods and flash floods are grave natural hazards in terms of extent and frequency; the Nile River and its tributaries pose a particular risk. On average, floods affect some 200,000 people every year. In 2016, over 200,000 people were affected and over 22,000 houses

destroyed. Damage to crops and arable land poses a serious risk of long-term food insecurity in many parts of the country and heightens the vulnerability of people who were already food insecure.

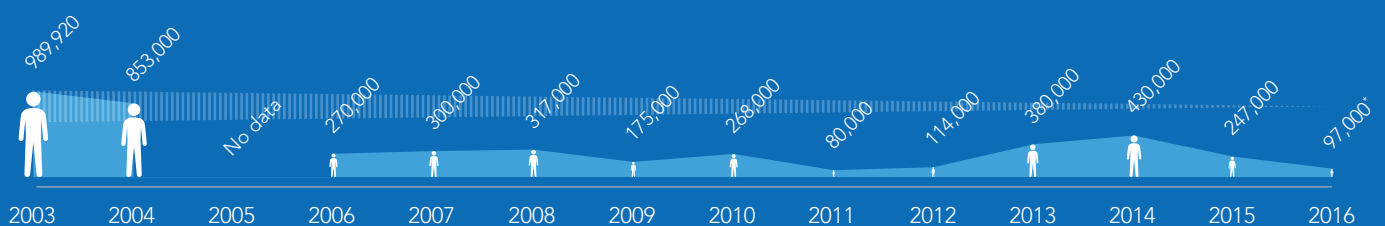
In 2015 and 2016, Sudan experienced unpredictable rainfall patterns due to El Niño and La Niña which has negatively affected harvests, water availability and food supplies, altered transhumance routes, and led to environmental migration.

South Sudanese refugee arrivals in Sudan (2014 - 2016)



Source: UNHCR

NO. OF PEOPLE NEWLY DISPLACED IN DARFUR PER YEAR (2003 - 2016) including returns



* Verified IDPs in 2016 (not including reported returns)

BREAKDOWN OF

PEOPLE IN NEED

Humanitarian needs in Sudan are diverse and complex. The various needs have multiple origins and often result from a combination of structural and circumstantial factors. This overview uses vulnerability rather than status as a basis for humanitarian needs identification. Vulnerability assessments have however been applied in different ways to various groups.

First, with regards to IDPs, small and large scale displacement has taken place for over a decade in Sudan. Population movements are fluid and complex, with people being displaced for a few days, weeks, or months and then returning to their homes, while others settle more permanently in new areas. The reality is even more complex among long-term displaced people as many IDPs return seasonally to their former place of residence. Total displacement estimates thus represent estimates at a given point in time, in a constantly fluctuating environment.

The 2017 Humanitarian Needs Overview identifies 4.8 million people in need of humanitarian assistance across Sudan including 2.1 million IDPs in need in Darfur. Recognizing that over the last decade some IDPs have managed to re-establish their lives, the humanitarian community has attempted to better identify the most vulnerable IDPs. Needs assessments are therefore now focused on identifying specific vulnerabilities, rather than assuming that all IDPs are automatically in need because they are displaced. For the purpose of estimating numbers of IDPs in need of humanitarian assistance, the approach has been to prioritize access to basic public services, therefore mainly prioritizing displaced people living in camps and settlements. At the end of 2016 there are estimated to be 2.3 million IDPs in need in Sudan, of whom approximately 97,000 were displaced during 2016. The following tables reflect “IDPs in need” rather than total IDP populations.

Second, for vulnerable resident populations, different benchmarks have been used. Although food insecurity is widespread across Sudan, only those people who fall within the Integrated Food Security Phase Classification (IPC) categories 3 (Crisis) and 4 (Emergency) are regarded as being in humanitarian need. 3.6 million food insecure people, including IDPs and refugees, are thus considered in need of humanitarian aid.

Third, all 2.2 million children under five suffering from Global Acute Malnutrition (GAM) are considered in need of humanitarian aid. Although malnutrition in Sudan is primarily driven by development factors and requires a




development response, wasting among children under 5 is a life-threatening condition and GAM levels in Sudan have surpassed the internationally accepted emergency thresholds.

Fourth, all refugees have also been considered in need of humanitarian assistance. While their types of needs vary widely, the fact that they have crossed an international border to seek assistance translates into an immediate need for legal protection at the least, and possibly material assistance. Whether they are in an emergency situation or not, all refugees and asylum seekers in Sudan are thus considered in this overview as having some humanitarian needs.

Abyei PCA Area

There are still humanitarian needs in the Abyei Area, as a result of population movements, intercommunal tensions, and a lack of basic public services. The United Nations and partners have identified about 160,000 vulnerable people in the Abyei Area in need of humanitarian assistance, including 72,000 people from the Ngok Dinka communities and returnees; 20,000 Ngok Dinka displaced within the Abyei Area; 8,000 people displaced from neighboring Unity and Warrap States in South Sudan; 25,000 Misseriya communities; and 35,000 seasonal Misseriya migrants who entered the area late 2016 and are expected to return mid-2017.

NUMBER OF PEOPLE IN NEED BY TYPE OF NEED

	BY STATUS				Total	BY SEX & AGE*	
	IDPs	Refugees	Returnees	Residents		% female	% children, adult, older people ¹
 Education	948,141	121,839	85,758	548,257*	1,703,995	50%	100 0 0%
 Shelter & household items	932,326	341,062	209,231	0	1,482,619	60%	60 33 7%
 Food Security & Livelihoods	1,618,777	341,062	156,923	1,473,258	3,590,020	51%	40 55 5%
 Health	2,312,539	341,062	209,231	1,400,000	4,262,832	51%	53 42 5%
 Nutrition (Children < 5)	-	-	-	-	2,232,863	51%	100 0 0%
 Protection	1,618,777	793,738	209,231	612,156	3,233,902	55%	60 33 7%
 Water & Sanitation	2,162,769	341,062	209,231	828,000	3,541,062	51%	60 33 7%

¹Children (<18 years old), adult (18-59 years), older people (>59 years)

* this includes under 5 GAM children (364,215) and 30% school age children (184,042)

1 in 6

children in Sudan estimated to be acutely malnourished (Global Acute Malnutrition)



Source: MICS 2014

62%

of refugees in Sudan are children

60%

of IDPs in camps are children

Source: IOM

49%

of children in the eight conflict-affected states are out of school; 41% of children nationally are out of school

Source: 2015 Education Sector Needs Assessment

PEOPLE IN NEED

(DEC 2016)

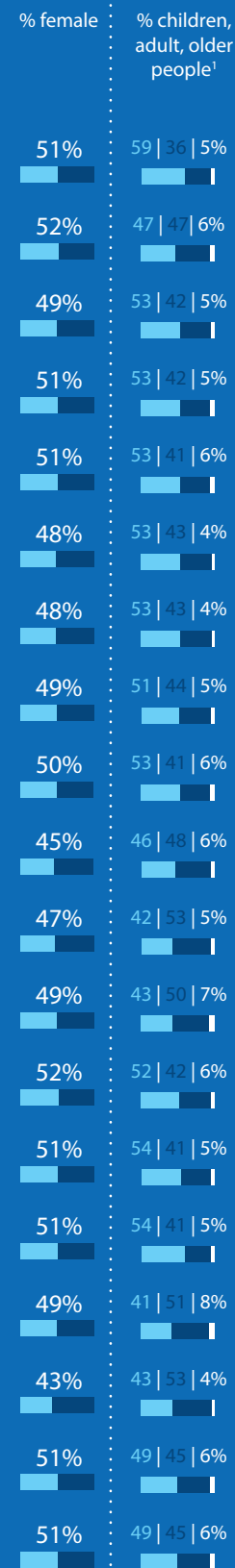


ABYEI PCA AREA²
 AL GEZIRA
 BLUE NILE
 C. DARFUR²
 W. DARFUR
 E. DARFUR²
 S. DARFUR
 N. DARFUR
 GEDAREF
 KASSALA
 KHARTOUM
 NILE
 N. KORDOFAN
 S. KORDOFAN
 W. KORDOFAN²
 NORTHERN
 RED SEA
 SENNAR
 WHITE NILE

BY STATUS

	IDPs	Returnees	Residents	Refugees & asylum seekers	Breakdown of refugees, asylum seekers & South Sudanese		
					Pre Dec 2013 South Sudanese	Post Dec 2013 South Sudanese	Refugees and Asylum Seekers
ABYEI PCA AREA ²	-	-	-	-	-	-	-
AL GEZIRA	0	0	0	3,901	2,500	0	1,401
BLUE NILE	47,392	1,056	94,212	7,660	3,999	3,661	0
C. DARFUR ²	418,608	72,445	83,159	9,939	1,435	0	8,504
W. DARFUR	266,923	12,943	117,093	425	385	0	40
E. DARFUR ²	184,385	7,801	117,560	100,048	36,855	63,193	0
S. DARFUR	671,607	811	124,339	12,480	5,365	5,710	1,405
N. DARFUR	522,647	101,499	201,020	17,089	2,000	15,089	0
GEDAREF	0	0	109,013	27,616	12,450	0	15,166
KASSALA	0	0	167,814	87,162	7,600	0	79,562
KHARTOUM	0	0	0	319,163	249,998	35,707	33,458
NILE	0	0	0	2,500	2,500	0	0
N. KORDOFAN	0	0	0	4,189	2,500	1,689	0
S. KORDOFAN	184,000	12,676	154,363	34,554	5,804	28,750	0
W. KORDOFAN ²	8,300	0	56,679	28,905	1,571	27,334	0
NORTHERN	0	0	0	2,500	2,500	0	0
RED SEA	1,600	0	204,761	13,489	10,000	0	3,489
SENNAR	1,559	0	0	3,583	2,500	0	1,083
WHITE NILE	318	0	43,245	118,535	2,500	116,035	0
TOTAL	2,307,339	209,231	1,473,258	793,738	352,462	297,168	144,108

BY AGE



² Gender and age disaggregated data for Abyei, E. Darfur, S. Darfur and W. Kordofan based on 2008 census projections for bordering states

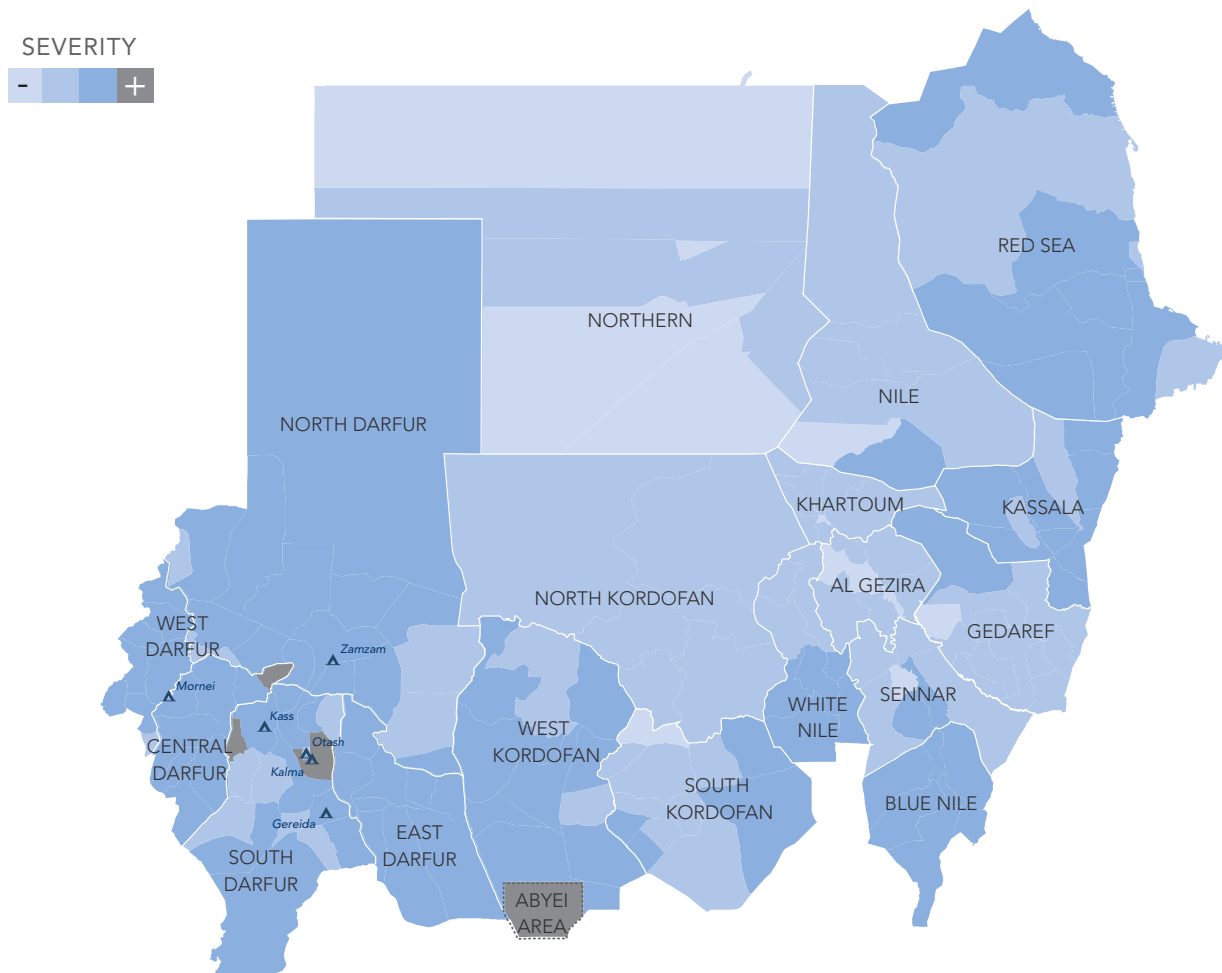
¹ Children (<18 years old), adult (18-59 years), older people (>59 years)

SEVERITY OF

NEED

The pattern of needs severity in Sudan closely mirrors patterns of conflict, as the majority of humanitarian needs stem from conflict-induced displacement. Darfur remains the most conflict-affected region in the country, with some people having been living in protracted displacement for over 14 years. Vulnerable refugees and asylum seekers are in need of humanitarian assistance and host communities in many areas also lack access to services and support. The humanitarian consequences of violence and livelihood loss are seen in the high levels of food insecurity, low levels of access to potable water, and a lack of access to livelihood opportunities. Natural hazards are expected to exacerbate food insecurity and acute malnutrition, which are also predominantly prevalent in, but are not limited to, conflict areas.

The severity of humanitarian need depicted in the map is determined by the concentration of people in need across sectors.





PART II: NEEDS OVERVIEWS BY SECTOR

INFORMATION BY SECTOR

-  Education
-  Emergency Shelter/Non-Food Items
-  Food Security & Livelihoods
-  Water, Sanitation & Hygiene
-  Health
-  Protection
-  Nutrition
-  Recovery, Return & Reintegration

EDUCATION

OVERVIEW



Displaced school-aged children are at high risk of being out-of-school which in turn puts them at higher risk of violence, abuse and other protection-related issues. Providing education for IDPs, refugees, returnees and affected host communities is essential to mitigating these risks and ensuring the right to education.

The majority of children in need of emergency education are in IDP camps, mainly in the Darfur states. Due to the mass influx of IDPs into host communities there is a strain on the precarious education capacity in these communities; they too are in need of emergency education support.

AFFECTED POPULATION

There are 4 million school-aged children (4-16 years) living in the eight conflict-affected states in Sudan (the 5 Darfur states, South/West Kordofan and Blue Nile); an estimated 1.6 million of these children are affected and in need of Education in Emergencies (EiE) support. The school enrollment rate in these states currently stands at 51 per cent, which is lower than the 59 per cent average enrollment rate recorded in the rest of the country. Many school-age refugees require education assistance.

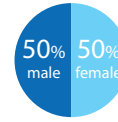
HUMANITARIAN NEEDS

The 2015 the Education Sector Needs Assessment which assessed 129 schools revealed that schools are overcrowded and under-resourced. The assessment showed that in 30 out of 60 IDP camps in Darfur, there are 90-120 pupils per classroom, 64 per cent of IDP schools are not connected to water sources, 46 per cent of schools have no access to essential education supplies, and there is one latrine for every 358 boys and one for every 300 girls. Poor water and sanitation facilities in schools have a negative impact on education, contributing to higher drop-out and lower completion rates for girls, who lose access to information

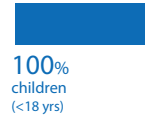
NO. OF PEOPLE IN NEED

1.7M

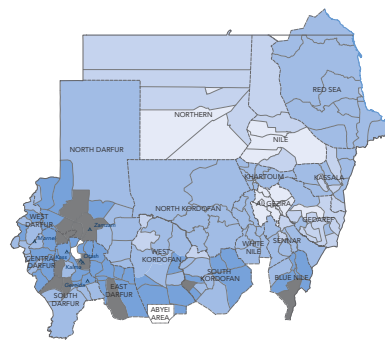
BY SEX



BY AGE



SEVERITY MAP

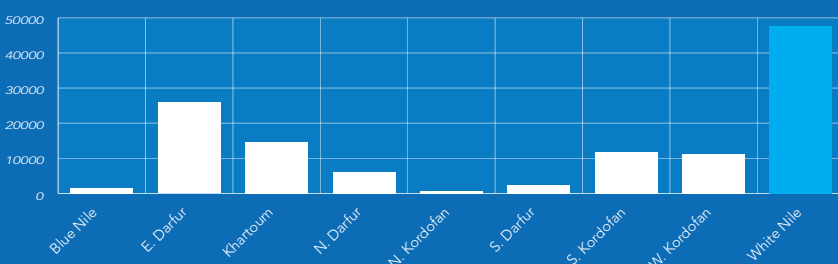


about health, protection and rights as a result. Education partners will continue to assess gaps in remaining camps.

The need for EiE support is very high as existing capacities and resources are unable to meet the current requirements. Further support is needed to ensure the provision of access to inclusive and protective life-saving education for children affected by the crisis, whether IDPs, refugees, returnees or host communities. This includes safe learning spaces, psychosocial interventions, life-skills, school feeding, health and hygiene, protection, peace education, awareness sessions on early marriages, and learning and recreational opportunities.

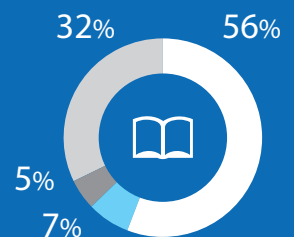
Restoring access to education during and after displacement is a life-saving intervention. The provision of a safe and structured learning environment mitigates and often averts the occurrence of physical and psychological harm to children. This safe space is especially important for girls who are often at an increased risk of being exposed to violence, abuse and exploitation during crises.

PEOPLE IN NEED BY STATE



PEOPLE IN NEED

- IDPs
- Refugees
- Returnees
- Residents



For information on refugees in need see pages 9 and 10

EMERGENCY SHELTER/NON-FOOD ITEMS

OVERVIEW



Some 1.5 million people in Sudan are estimated to be in need of life-saving emergency shelter and household items, including people newly displaced by conflict and disaster; refugees; returnees/IDPs integrated into host communities;

and vulnerable people with specific needs (PSNs) such as those living with disabilities and older people among protracted IDPs. Additionally, some 20,000 returnee and vulnerable protracted IDP families in rural areas are estimated to be in need of transitional shelter and livelihood opportunities.

AFFECTED POPULATION

IDPs have often moved multiple times, leaving belongings behind. The sector assists new IDPs with a one-time provision of ES/NFIs at the time of displacement. Since the items provided are not durable, annual renewal of key items to the most vulnerable IDPs with specific needs in Darfur is necessary.

Women, children and people with specific needs are particularly vulnerable without shelter to protect them from the elements and avoid exposing them to further health risks. Assistance is also required for returnees and integrated IDPs.

Of the 1.5 million people estimated to be in need of ES/NFI assistance, 375,000 are likely to be newly displaced; 200,000 are returnees/integrated IDPs; 340,000 are refugees; and 550,000 are PSNs among protracted IDPs in Darfur. An additional 20,000 families are returnees or vulnerable protracted IDPs in rural areas that are in need of transitional shelter assistance.

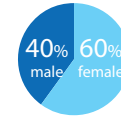
HUMANITARIAN NEEDS

Protracted displacement and new displacements due to conflict and disaster remain a defining feature of the crisis in Sudan. IDPs will continue to be in dire need of basic ES/NFIs

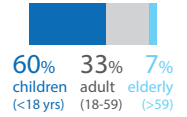
NO. OF PEOPLE IN NEED

1.5M

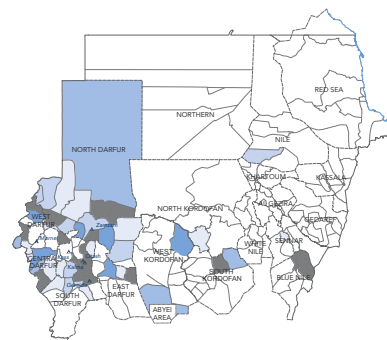
BY SEX



BY AGE



SEVERITY MAP



such as plastic sheeting, plastic mats, jerry cans, blankets and cooking sets, which help restore a minimal sense of dignity and protection against exposure to the elements, mitigate health risks and provide some privacy and security to those in need.

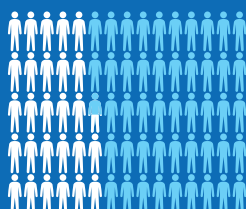
IDPs returning to their places of origin, resettling in stable areas or integrating within host communities are also in need of ES/NFI assistance to facilitate and stabilize the return process and support host families.

There continues to be a need for durable solutions (return and urban integration) for IDPs in Darfur. There is a need to provide environmentally friendly transitional shelters and community training on building techniques and livelihood opportunities to promote self-reliance and resilience.

Assistance is based on assessed needs and particular attention is paid to female-headed households, child-headed households and other vulnerable groups.

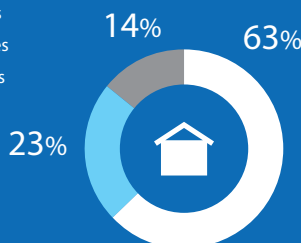
of 1.5 million in need

550,000 protracted displaced persons with specific needs*



PEOPLE IN NEED

- IDPs
- Refugees
- Returnees
- Residents



932,000 number of IDPs in need of shelter and household items

*Including older people, people with disabilities, unaccompanied or separated children, women at risk etc.

For information on refugees in need see pages 9 and 10

FOOD SECURITY & LIVELIHOODS

OVERVIEW



In Sudan, food insecurity and loss of livelihood opportunities have been induced by new and protracted conflict and related displacement coupled with climate change and natural hazards including environmental degradation, droughts

and flooding. Rising staple food prices, inflation, and infrastructure limitations exacerbate the situation. In some areas of Darfur, South Kordofan and Blue Nile, displaced communities have left their homes and livelihoods, disrupting their food production and supply systems. People seeking refuge in Sudan also need food and livelihoods assistance. According to mid-season assessment findings, the 2016 rainy season in Sudan's traditional rain-fed agricultural areas has been characterised by an early start of the rainy season, above-average to average rains and dry spells in some areas.

AFFECTED POPULATION

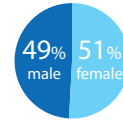
An estimated 3.6 million people are food and livelihoods insecure, according to results from the most recent integrated phase classification (IPC) analysis by the National Food Security Technical Secretariat (FSTS), and reports from WFP Vulnerability Analysis and Mapping (VAM), FAO, FEWSNET and others. The number of people who are food and livelihoods insecure has decreased by one million since the 2016 HNO. This is because in late 2015 and early 2016, food security was severely affected by El Niño and other factors, but in 2016 agricultural performance was better due to improved rainfall, reducing the number of people in need of food and livelihoods assistance. The food security of over one million residents has improved, meaning they are no longer considered in need of humanitarian FSL assistance.

Household food security is closely linked to the performance of the agricultural sector, which provides household level food and wage labour opportunities. Households affected by food security shocks (e.g. failure of agricultural production, high food prices) are also a priority. The number of food insecure

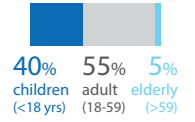
NO. OF PEOPLE IN NEED

3.6M

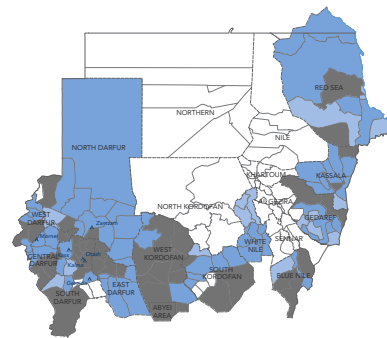
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BY AGE



SEVERITY MAP

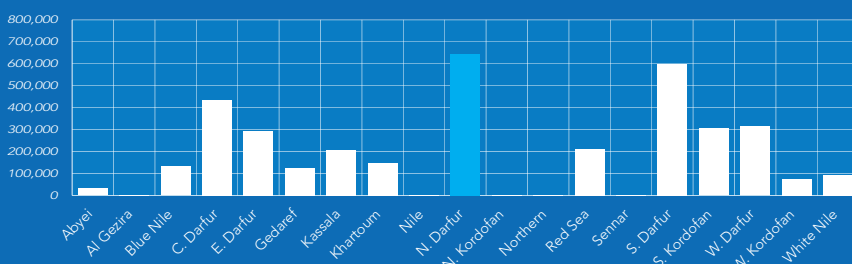


people may increase substantially during the lean season if forecasts on harvest outcomes are maintained. Vulnerable and food insecure groups in areas where humanitarian access is constrained are of particular concern.

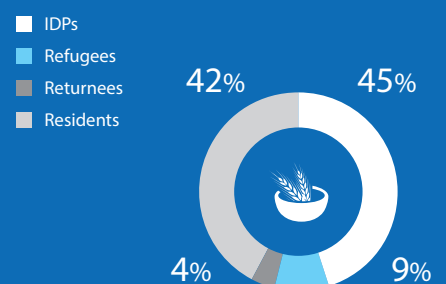
HUMANITARIAN NEEDS

The most vulnerable people including IDPs, vulnerable residents, refugees and returnees need emergency food and agriculture-based livelihoods assistance to meet immediate food requirements. There is also a serious need to restore and safeguard livelihoods and build resilience and long-term solutions for protracted IDPs. FSL partners will maintain a high degree of flexibility to respond to emergencies and work to restore/sustain livelihoods and build resilience. Lack of humanitarian access and insecurity continue to constrain timely and efficient interventions to address food insecurity.

PEOPLE IN NEED BY STATE



PEOPLE IN NEED



For information on refugees in need see pages 9 and 10

WATER, SANITATION & HYGIENE

OVERVIEW



Almost 3.5 million people in need in Sudan require some form of Water, Sanitation and Hygiene (WASH) assistance, including access to improved drinking water, access to safe means of excreta disposal and hygiene sensitisation.

Specifically, WASH services in 18 of the 60 IDP camps in Sudan are at a critical sub-standard level (water supply is less than 7.5 litres per person per day in camps in South, West, Central and North Darfur states).

In emergency-affected states and in eastern Sudan, poor WASH coverage increases dependency on humanitarian aid.

AFFECTED POPULATION

Of the 3.5 million people in need of WASH assistance, 2.1 million are IDPs in Darfur and the remainder are residents in areas with poor access to WASH facilities such as in eastern Sudan, conflict-affected people from the Kordofan region, White and Blue Nile States, Darfur, refugees or returnees.

Over one third of Sudan's population is considered vulnerable to the impact of climate shocks. The anticipated continued impact of climatic shocks on WASH includes water resource depletion, disease outbreak and further displacement due to conflict over water resources. Sector analysis shows that over 40 per cent of hand pumps and 30 per cent of motorized water schemes in Sudan are at high risk of running dry. Increased operation and maintenance costs will place a higher burden on vulnerable communities.

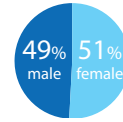
HUMANITARIAN NEEDS

The high population density in Darfur's IDP camps increases the rate of water extraction and the frequency of breakdown of water systems, triggering a need for continuous expansion and maintenance of WASH services. Sustaining the WASH

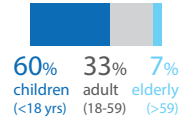
NO. OF PEOPLE IN NEED

3.5M

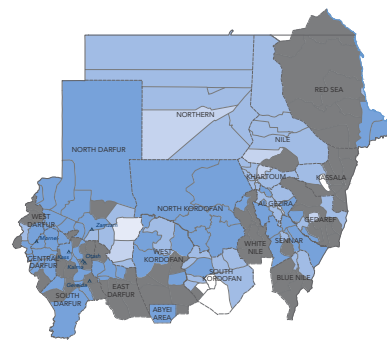
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BY AGE



SEVERITY MAP



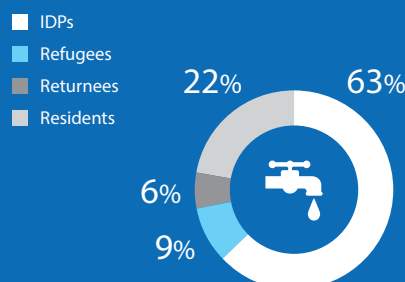
needs of IDPs will require at least US\$14 per capita.

Improved WASH conditions are key to cutting malnutrition rates, as exemplified in the diarrhoea-malnutrition cycle that is prevalent in under-served populations.

An estimated 1.3 million people are at risk of having to migrate due to water resource depletion because of climatic shocks and could require water trucking. Water supply infrastructure will also require upgrading and frequent repair. Water source depletion and floods can have spill-over multiplier effects, including disease outbreak and displacement. To avert disease outbreak, there will be a need for improved environmental sanitation and personal hygiene practices.

30% of water sources are not functioning in Sudan

PEOPLE IN NEED



18 IDP camps out of 60 at a critical sub-standard level in terms of WASH services

Source: WASH database of the Department of Drinking Water

For information on refugees in need see pages 9 and 10

Source: WASH Sector estimate

HEALTH

OVERVIEW



In spite of Federal Ministry of Health (FMoH) and partner achievements, the protracted crisis in Sudan and inadequate funding have had a major impact on all levels of health care, notably in conflict-affected areas (Darfur, South Kordofan and Blue Nile).

About 36 per cent of the Primary Health Care (PHC) facilities across Sudan are not fully functional either due to staff shortages or poor physical infrastructure. Only 24 per cent of functional health facilities offer all main service components of the Primary Health Care (PHC) package (42 per cent in Darfur due to NGO support).

A shortage and inequitable distribution of health workers, a weak Health Information System (HIS) and shortages of drugs and medical supplies exacerbate the overall situation.

Major hazards affecting health in Sudan include droughts, floods, epidemics, internal conflict and displacement. There are frequent disease outbreaks of measles, hepatitis E, scabies and acute watery diarrhea. In addition, the prevalence of non-communicable diseases is on the rise.

AFFECTED POPULATION

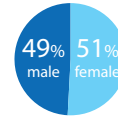
Better health services are required for all people in need, especially mothers and children.

Of the 4.3 million people in need of health assistance, 2.3 million are IDPs (including about 87,000 new IDPs), 209,000 are returnees, 341,000 are refugees. A further 1.4 million are individuals in communities affected by food insecurity and above-emergency threshold acute malnutrition rates in eastern states or vulnerable individuals in underserved host communities living in insecure areas. Of the total number of people in need, about 164,000 are pregnant and lactating women in need of maternal and reproductive health services, including emergency obstetric care.

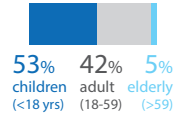
NO. OF PEOPLE IN NEED

4.3M

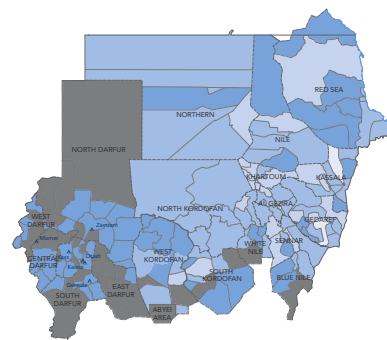
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BY AGE



SEVERITY MAP



Some 820,000 children under five need access to health care, including immunisation and essential lifesaving services. Addressing some of the most important underlying factors of acute malnutrition is also a priority.

Due to the protracted nature of the internal displacement, access to affordable treatment of chronic diseases is crucial for older people.

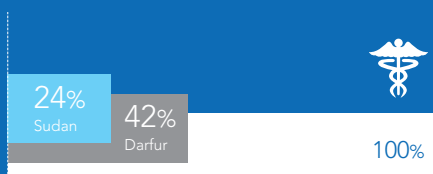
HUMANITARIAN NEEDS

The sector needs to ensure continued access to basic and life-saving primary healthcare and referral services to girls, boys, men and women, while improving maternal and child services in localities with significant health needs.

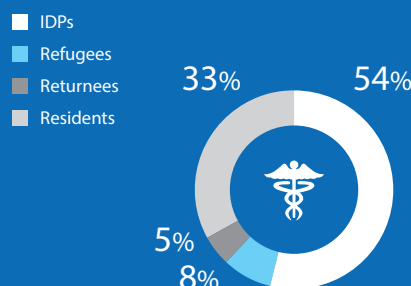
The prevention and control of communicable diseases using a public health approach through strengthening the HIS with

HEALTH FACILITIES

Functioning health facilities providing the minimum PHC package service



PEOPLE IN NEED



820,000 children under 5 need access to health care

Source: Health Sector estimate

For information on refugees in need see pages 9 and 10

a strong early warning and surge capacity for immediate response components is crucial. It is important to boost human resources and coordinate with other sectors on recovery and resilience.

The health sector requires continuity and will need to strengthen support to health clinics and their workforce, including ensuring sufficient medical supplies are in place, in order to respond in a timely and effective way to new health emergencies and ongoing health concerns.

PROTECTION

OVERVIEW



3.2 million people are in need of humanitarian protection support, including children and women at risk, other people with specific needs, and people at risk of landmines or Explosive Remnants of War (ERW).

People in need of humanitarian protection include internally displaced, refugees and host communities in displacement or return areas who may face challenges in addressing needs of their vulnerable members due to displacement or stretched resources.

In addition, vulnerable people in return areas face risks, pending the restoration of safety net mechanisms in these areas.

AFFECTED POPULATION

The total number of people in need of humanitarian protection support is estimated at about 60 per cent of the total number of IDPs and returnees, and 100 per cent of refugees. Groups in need of protection support include:

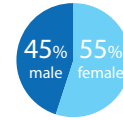
Children at risk: unaccompanied or separated children, children at risk of trafficking and smuggling, children associated with armed forces and groups, child survivors of physical and sexual violence, children at risk of recruitment by armed groups, child labour, child exploitation, child caregivers and children in need of psycho-social assistance. Children represent up to 60 per cent of the displaced population (higher among newly displaced communities) and 62 per cent of refugees in Sudan are children.

Women and girls at risk: single heads of households (38 per cent of women and girls), survivors of gender-based violence (GBV), women in prison and pregnant and lactating women. Women and girls represent respectively 25 per cent and 30 per cent of the displaced population (higher in situations of new

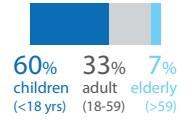
NO. OF PEOPLE IN NEED

3.2M

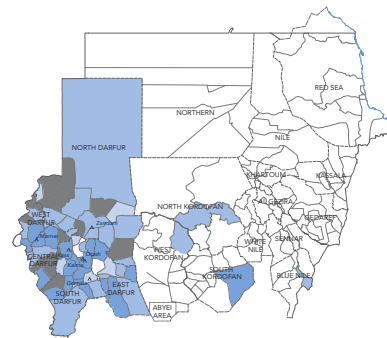
BY SEX



BY AGE



SEVERITY MAP



displacement). Among South Sudanese refugees in Sudan, 80 per cent of households are headed by women.

Other vulnerable people: people with disabilities or with special needs, older people, people with serious medical conditions and people at risk of neglect and/or isolation.

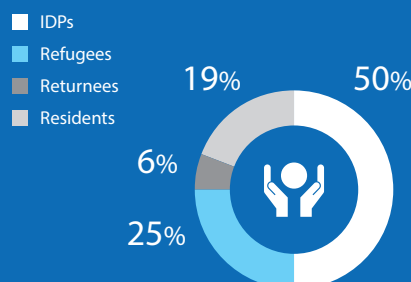
People at risk of landmines and ERW, and communities exposed to landmines/ERW: Over 482,000 people are exposed to the threat of landmines/ERW in Sudan

HUMANITARIAN NEEDS

Vulnerable displaced people and refugees are exposed to the effects of conflict and displacement, including family separation, destitution and lack of access to assistance and other services. Breakdown in family and community

3,878
number of unaccompanied and separated children (1,973 boys, 1,905 girls)

PEOPLE IN NEED



2 million displaced and refugee children in need of humanitarian protection services including in conflict affected-areas

Source: National Council for Child Welfare (FTR database)

For information on refugees in need see pages 9 and 10

structures leaves vulnerable people without adequate support to address their essential needs. Community safety nets are severely weakened, and social institutions are usually too stretched to provide adequate protection services to the affected population.

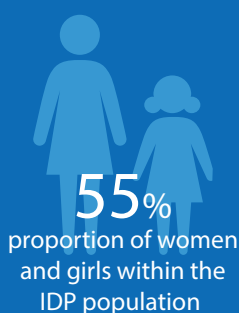
Landmines and Explosive Remnants of War (ERW) affect the safety of displaced, local, and returnee communities; such communities need support to demarcate and clear these areas in order to maintain or restore livelihoods. Also, awareness raising and mine risk education (MRE) are required for landmine and ERW affected people to coexist safely with the threat of landmines and ERWs.

Destitution resulting from displacement and loss of a protective environment puts children at higher risk of abuse, exploitation and violence. Children demobilised from armed groups, unaccompanied or separated children and child victims and survivors of child right violations need access to Family Tracing and Reunification and other support services. Protection from risks of recruitment, exploitation and other forms of abuse is needed in areas of displacement. Birth registration in areas of displacement, return areas and for refugee communities remains a challenge. There is a high need for sustainable prevention and response measures in these areas. This includes community-based child protection mechanisms and services for children at risk of abuse, exploitation, including trafficking and violence including child survivors of GBV.

GBV has been exacerbated by the conflict, as well as by inadequate living conditions and the lack of privacy, which IDPs and refugees face in camps and elsewhere. Lack of awareness among communities makes it challenging to ensure prevention of GBV and to ensure access of survivors to the relevant multisectoral services. Vulnerable women and girls in areas of conflict need support to prevent risks of GBV, in particular to reduce their exposure, for example during movements for water or firewood.

Victims of trauma, GBV survivors and victims of landmines and ERW, including children, require psychosocial assistance and support for recovery and socio-economic reintegration. Limited mobility, lack of information on available services and the distance to services, social exclusion and fear of social stigma hamper the ability of vulnerable people to access adequate social protection and assistance.

The influx of displaced persons, refugees or returning groups puts communities under stress, and may trigger tension/ conflicts. Mechanisms and capacities contributing to conflict resolution and peaceful coexistence, as well as advocacy with authorities in displacement and return areas, need support.



NUTRITION

OVERVIEW



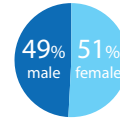
Malnutrition is chronic in Sudan with emergency level rates having been observed for decades. This is due to poverty, limited access to health care, poor maternal and childcare practices and a lack of safe drinking water, with the situation often being aggravated by climatic impacts. Today, Sudan has one of the highest rates of wasting in the Middle East and North Africa (MENA) region with a Global Acute Malnutrition (GAM) rate of 16.3 per cent amongst children under the age of 5.

Malnutrition in Sudan is not limited to conflict-affected areas; 52 per cent of acutely malnourished children live in nine states not affected by conflict. Displacement in conflict-affected areas increases the prevalence of malnutrition, while additional contributing factors include feeding habits, childcare practices, sanitation and access to health services. Despite considerable needs only about 25 per cent of children with acute malnutrition have access to treatment services. A multi-sectoral approach is needed to tackle the underlying causes of malnutrition.

NO. OF PEOPLE IN NEED

2.2M

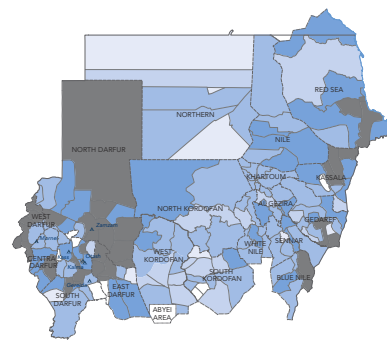
BY SEX



BY AGE

100% children (<18 yrs)

SEVERITY MAP



HUMANITARIAN NEEDS

Acute malnutrition is a life-threatening condition, which may result in increased morbidity and mortality among affected children. If untreated, acute malnutrition can have debilitating consequences such as impaired physical growth and cognitive development. Hence, a timely and comprehensive response to the needs of vulnerable children and PLW is required, and preparedness for timely effective response to seasonal spikes in acute malnutrition should be in place. Without addressing the underlying causes, vulnerability to acute and chronic malnutrition cannot be averted. As such, multi-sectoral nutrition sensitive interventions should complement the emergency nutrition response. The Nutrition Sector needs to ensure increased access to life-saving services for acutely malnourished children under age 5 and PLW, and integrated services for the prevention of malnutrition among vulnerable groups. In addition, education and counselling for mothers/ care givers to children under age 5 must be prioritised.

AFFECTED POPULATION

Malnutrition affects vulnerable residents, IDPs, refugees and returnees. The 2013 Simple Spatial Surveying Method (S3M) survey and 2014 Multiple Indicator Cluster Survey (MICS) indicated above emergency level acute malnutrition among children under the age of 5 across Sudan. Eleven of eighteen states record a malnutrition prevalence rate of over 15 per cent, which is above the WHO emergency threshold. About 2.2 million children suffer from wasting annually; 573,000 of these suffer from Severe Acute Malnutrition (SAM). There is high risk of micronutrient deficiency; the 2014 MICS indicated only 7.6 per cent of households consumed iodized salt. Maternal nutrition is a concern, with some 337,000 pregnant and lactating women (PLW) being undernourished every year.



2.2M

children suffer from Global Acute Malnutrition (GAM), of whom 573,000 have Severe Acute Malnutrition (SAM)



337,000

pregnant and lactating women undernourished every year

RECOVERY, RETURN & REINTEGRATION

OVERVIEW



Sudan's protracted displacement has created vulnerabilities and dependencies that require a coherent, effective and efficient multi-sector response. Since 2003, some 533,000 people have voluntarily returned, of whom 209,000 since 2014. This includes almost 105,000 Sudanese refugees who returned from Chad to their places of origin in Darfur. Some 200,000 vulnerable residents near IDP camps and in return areas are also in need of assistance. Leaving IDPs in continued marginalization without the prospect of durable solutions remains an obstacle to stability, peace, recovery and reconstruction. Despite challenging circumstances, it is necessary to support vulnerable people to become more self-reliant and resilient. Interventions in areas of return and local integration must be coordinated to ensure coherent and harmonized assistance that supports durable solutions.

AFFECTED POPULATION

In areas where the environment is conducive for return, spontaneous return of IDP and refugee returnees took place in 2016 and is expected to increase in 2017. However, some return areas are not yet conducive for permanent return due to insecurity, lack of access to basic services, shortage of natural resources and economically and environmentally viable livelihoods, and land tenure issues. It is expected that a significant portion of IDPs in Darfur may choose to integrate in the towns, cities and peri-urban areas to which they were displaced. Return and local integration require long term programming, including rehabilitation of basic infrastructure such as water, health, food and education facilities, providing long term shelter, and supporting community-level income generation. A shift towards a greater focus on local integration of affected populations will be necessary in 2017.

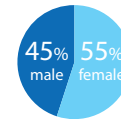
HUMANITARIAN NEEDS

- People who have voluntarily returned or integrated

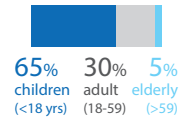
NO. OF PEOPLE IN NEED

2.7M

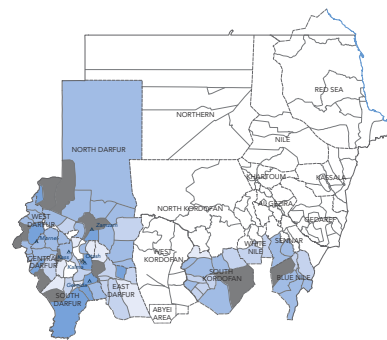
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BY AGE



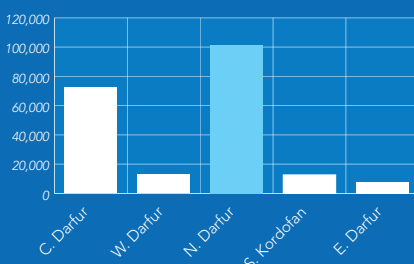
SEVERITY MAP



locally and host communities continue to face many vulnerabilities. These often intensify with time, weakening the resilience of communities to recover from shocks and stresses. Preconditions for durable solutions include a conducive environment for return or local integration, and secured access and right to use of land allowing people to return home or to become fully self-reliant in their location of displacement. The most urgent multi-sectoral needs include:

- Livelihood opportunities, agriculture and livestock-based livelihood support, especially for the most vulnerable.
- Transitional and permanent shelter and access to social services and infrastructure.
- Improved governance, rule of law and access to justice as well as natural resources, land, food and fuel.
- Access to environmentally friendly and reliable energy and technologies.

2014 - 2016 RETURNEES BY STATE



209,000
number of people who have voluntarily returned in the last three years

