Context
Following the outbreak of armed conflict in Sudan on 15 April 2023, Ethiopia is receiving thousands of forcibly displaced people at three main points of entry along the land border between Sudan and Ethiopia. Amongst the forcibly displaced are thousands of Sudanese and Ethiopian nationals, many of whom were recognized as refugees in Sudan.

The Government’s Refugees and Returnees Service (RRS) and UNHCR are coordinating the response to the new refugee inflows, including daily border monitoring, screening for asylum-seekers and refugees, and coordinating the provision of basic services, such as food, water, temporary shelter as well as emergency healthcare, together with partners.

Joint RRS/UNHCR missions are underway to identify and develop reception sites for those who need protection support, in partnership with regional authorities, other UN agencies and NGOs.

Key figures
- **22,866** Total new arrivals in need of international protection
- **22,580** Newly arrived refugees
- **286** Ethiopian returnees
- **13,513** Sudanese
- **7,769** Eritreans
- **1,232** South Sudanese
- **66** Other

Gender breakdown
- **37%** Female
- **63%** Male

Nationality breakdown

Daily arrival trends

The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

Sources:
- Refugee and Returnee Services (RRS), UNHCR

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| Protection   | Screening of new arrivals continue at Metema (Amhara Region), Kurmuk (Benishangul-Gumuz Region) and Gambella entry points. All new arrivals have access to protection information, counselling and Mental Health & Psychosocial Support (MHPSS).  
In Kurmuk (Benishangul-Gumuz Region), screening of the estimated 5,000 asylum-seekers who arrived recently due to clashes in Sudan’s Blue Nile State is ongoing at the border with over 1,300 people so far screened and relocated to the transit site. Individual registration and biometric enrolment using proGres database was launched in Sherkole camp for new arrivals relocated from Kurmuk TC.  
Persons with Specific Needs (PSNs) including, Unaccompanied and Separated Children (UASC), survivors of Gender-based Violence (GBV). Persons with disability, medical cases are identified and supported by RRS protection and other partners.  
In Amhara, flyers with GBV-related messages in Tigrinya and Arabic languages were distributed at the Metema border point and sessions on GBV prevention, risk mitigation and response measures conducted at the border, TC and new refugee site. Information on safety of children was disseminated to 118 children and their parents at Kumer settlement, where a child-friendly space is now functional. | Overall, limited capacity for Child protection and GBV response.  
At the protection desk at the Metema border point, the majority of refugees and asylum-seekers requested to be relocated to the transit site, and to be informed about the resettlement process and medical services. Prioritization is given to PSNs.  
Staff movement restrictions, due to security reasons, continue to impact the monitoring of new arrivals at the Pagak entry point and in Gambella refugee camps. The number of unverified new arrivals in Gambella remains unchanged (720 individuals) - due to the suspension of the joint screening and pre-L1 registration. | RRS, UNHCR, RaDO, DICAC, IOM, UNICEF IHS, DRMO                                                                                           |
| Shelter/ Core Relief Items (CRI) | In Amhara Region, over 7,015 refugees have been relocated from the border to the Kumer settlement and about 2,000 relocated to Metema Transit centre. Refugees there are sheltered in communal hangers and family tents.  
In Benishangul Gumuz region, over 1,084 new arrivals have been transferred to the Sherkole refugee camp and provided with immediate emergency shelters. At Kurmuk Transit centre, extension of the site is in progress with the first 8 communal shelters under construction. The capacity is going to be increased for 3,315 individuals. | Additional full CRIs and dignity kits urgently needed to support in the provisions for all over 18,000 new arrivals  
UNHCR, RRS including partners are trying to contain the high number of refugees and asylum-seekers who are remaining at the border points with no proper shelter facilities due to limited resources within the operations.  
Need for additional ideal land for extension at Kumer settlement and Sherkole refugee camps in order to set up all facilities in place. | UNHCR, RRS, ANE, UNFPA, IHC                                                                                                               |
| Food Security | Three hot meals per day provided to 5,241 refugees/asylum-seekers at Metema border entry point, Mandefro Tarara TC and at Kumer settlement (all in Amhara Region). | Consultations are ongoing to replace wet feeding with dry food rations at the Metema Transit Center. | UNHCR, WFP, IHS, ANE, RRS                                                                                                                    |
### Sector: Health & Nutrition

**Response:** In Metema, Metema Hospital and Health Centre provide free-of-charge health services for refugees and asylum-seekers. MHPSS services are being provided at the clinic at the border point, and at the Transit Center. 115 patients have benefitted from consultations so far, including 109 were refugees and asylum-seekers.

Provision of emergency clinical and nutrition services continued at the Emergency Medical Team (EMT) clinic and the Mandelfiro Tarara transit site. Emergency clinical, nutrition and MHPSS services are provided at the border, in Kurmuk TC and in the existing refugee camps in Assosa and Gambella.

**Priorities:** The increase in the population in the Metema border area has led to the rise in demand for medical services, straining the resources/operability of the local health facilities.

Lack of medicines is a critical gap at the Health Center in Kurmuk. Additional urgent needs include ambulances to transport patients from the transit site to the nearby health facilities (especially at night), as well as medicines.

**Partners:** GOAL, Emergency Medical Team (MoH), WHO, RRS, MSF-H, CUAMM, IMC, CVT, DICAC, RaDO, PIE, IRC, IOM, Kurmuk Woreda health office

### Sector: WASH

**Response:** Refugees and asylum-seekers at Metema and Kurmuk TCs are receiving water supply by water trucking; the estimated water supply for the refugees in the Kumer site is 17 liters/person/day.

At Kumer refugee site, five blocks of pit latrines have been completed to serve 1,500 inhabitants, as well as 5 shower blocks. Five water locations have been installed with 10m$^3$ roto tanks and six taps each.

**Priorities:** Water supply is a critical gap in Kurmuk TC, which needs urgent attention, and funding.

The construction of four sanitation facilities is ongoing in the Kumer site. Access challenges for trucks, due to the muddy cotton soil, is a major constraint: the access road requires urgent improvement.

**Partners:** IHS, Oxfam, UNICEF, ANE

### Sector: Logistics

**Response:** With the rising number of refugees and asylum-seekers, the number of buses transporting people from the border to the Kumer site has been increased.

**Priorities:** One bus is currently available for transportation in Metema. A partner will take over the logistics of this activity to transport 7000 individuals.

**Partners:** IOM, ANE

### Sector: Education

**Response:** Community volunteers launched informal language education sessions (French and English) for under 14 years age old children at the Mandelfiro Tarara TC. So far, 61 children have enrolled and are attending the sessions.