SUDAN EMERGENCY REGIONAL REFUGEE RESPONSE

Progress Report, May to August, 2024



SUDAN REGIONAL REFUGEE RESPONSE PLAN 2024 Progress Report, May—August 2024

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CREDITS

UNHCR wishes to acknowledge the contributions of all relevant partners at regional and country level, in the preparation of this document.

MAP & STATISTICS

The maps in this publication do not imply the expression of any opinion on the part of UNHCR concerning the legal status of any country or territory or area, of its authorities, or the delimitation of frontiers or boundaries. All statistics are provisional and subject to change. Regularly updated population figures can be found on the <u>Sudan Situation Portal</u>.

COVER PHOTO

45-year-old Khadija Sabun Muhamed arrived in Adre with her sister and five children from El Geneina in May. They now live in a makeshift shelter covered with plastic sheeting in the Adre spontaneous site at the border. Urgent resources are required to relocate families like Khadija's to safer areas away from the border, providing them access to shelter, clean water, and essential services at new refugee sites. © UNHCR/Ying Hu

AT A GLANCE Sudan Situation Regional Overview (Infographic)

Total figures as of 30 August 2024

パ!	Re	20
2.37 M	78.8 K	7 K
Sudanese Refugees and Refugees of Other Nationalities*	Returnees**	Third Country Nationals
(S) USD		K K
337.8	M 8	6***

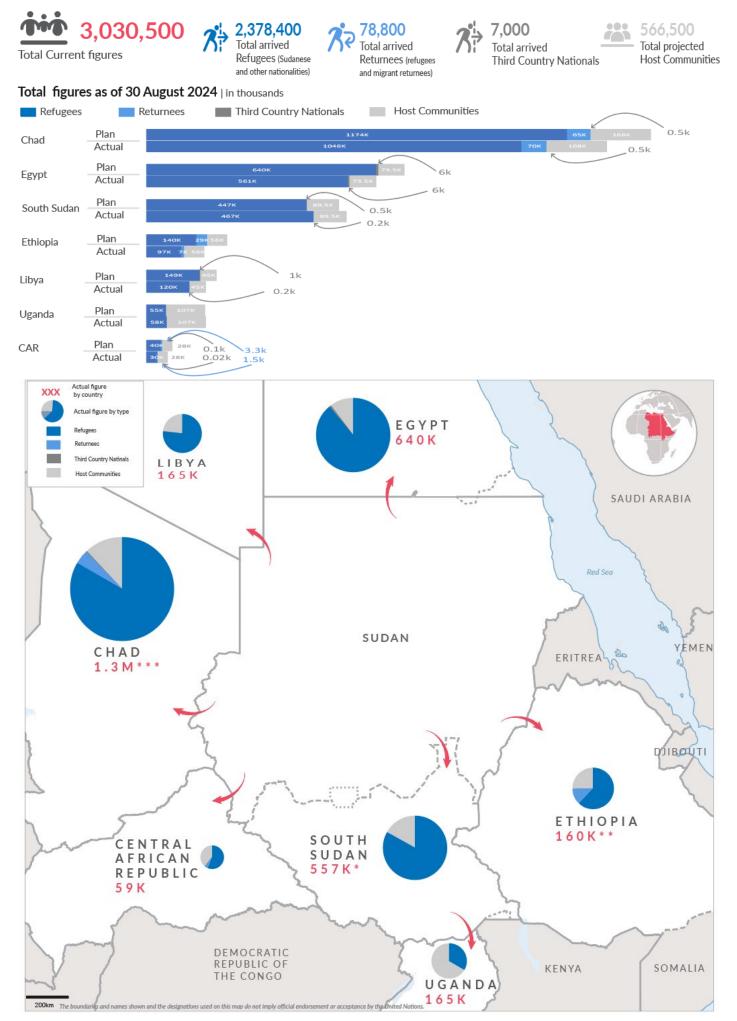
Region	Funding received**** in million USD	Partners
Central African Republic	8.3 M	10
Chad	158 M	23
Egypt	57.1 M	27
Ethiopia	31.4 M	25
Libya	10.4 M	17
South Sudan	60.8 M	42
Uganda	11.8 M	9

*This figure includes Sudanese refugees present in RRP countries prior to April 2023, and those who have arrived since.

**The returnee figure includes refugees and migrants who were hosted in Sudan and have returned to their countries of origin since April 2023. (Returnees to South Sudan are included in the South Sudan HRP and not in the Sudan Regional RRP.)

***UN agencies and some international NGOs are operational in more than one country but are counted only once as a partner in the RRP although their interventions may vary by country.

**** Data retrieved from <u>Refugee Funding Tracker</u> as of 4 Sep 2024



* There are an additional 820,000 returnees (refugees and migrants) who are included in the Humanitarian Response Plan (HRP) for South Sudan that are not included in the Sudan Regional RRP.

** There are 18,000 Ethiopian migrant returnees and 5,000 third country nationals in Ethiopia who are also not included in this RRP; they are reflected in the IOM Response Overview for the Sudan Crisis and Neighbouring Countries.

*** In addition to the 70,000 migrant returnees to date in 2024 in the Sudan RRP, there are 110,000 from 2023 included in the HRP for Chad.

Population Figures

Population Type	Planned population as at end 2024	Actual population figures as of 30 August 2024
Refugee Population	2,644,296	2,378,383
Returnee Population	97,300	78,830
Third Country Nationals	8,100	7,009
Total	2,749,696	2,464,222

Note: The plan also assists 566,500 individuals in host communities in the five countries

Regional Overview

Situation Overview

Since conflict broke out between the Sudanese Armed Forces (SAF) and the Rapid Support Forces (RSF) in mid-April 2023, the magnitude of displacement within Sudan and into neighbouring and other countries continues to grow with refugees moving further afield. An increasing number of refugees fled to Libya with some 97,000 individuals having arrived in the country since the beginning of the conflict. Alkufra, a key entry point to Libya for Sudanese refugees, received up to 350 new arrivals each day. In Uganda, a total of 54,804 refugees from Sudan have arrived since the conflict began, of whom 34,473 arrived in 2024. As such, the two countries – Libya and Uganda – were added to the Regional Refugee Response Plan as of July 2024. Now known as the world's largest protection crisis, Sudan continues to be a conflict that shows little sign of ending. Recent flashpoints in the conflict include Al Fasher in North Darfur State in May, where up to 143,000 people may have been forcibly displaced, and Sennar State in July where more than 151,750 people were displaced from their homes.¹

By the end of August 2024, a total of 10.4 million people had been forcibly displaced. Some 2.9 million people had arrived in the Central African Republic, Chad, Egypt, Ethiopia, Libya, South Sudan and Uganda, including refugees, returnees, and third country nationals, with almost 8 million newly displaced within Sudan and more than 257,000 refugees who self-relocated within Sudan². On 15 August, the Transitional Sovereignty Council of Sudan announced the re-opening of the Adre border crossing, one of the most effective and shortest routes to deliver humanitarian assistance to the eastern areas of Sudan. Nearly 60 trucks³ carrying humanitarian aid had crossed by the end of August.

Most refugees arrived in asylum countries in dire conditions, with little or no assets and resources, and many had encountered violence during their flight. In particular, women and girls faced gender-based violence (GBV) risks while in transit, in temporary shelters, and at the borders. Incidents of GBV both in Sudan and in hosting countries remain alarmingly high, with reports of intimate partner violence (IPV) in CAR, Chad, and South Sudan, accounting for 79, 66 and 52 per cent of disclosed GBV incidents⁴ respectively. In Sudan, one of the main risk factors of sexual violence was the presence of armed actors with reports of them perpetrating sexual violence and forced marriages.

By August, Sudan was facing the worst levels of acute food insecurity in its history, with a staggering 26 million people in acute hunger. Famine conditions were confirmed in August⁵ and the situation was particularly critical for people trapped in conflict-affected areas, particularly Aj Jazirah, Darfur, Khartoum and Kordofan, compounding an already dire humanitarian situation caused by conflict, severe human rights violations and destruction. Concurrently, Sudan was also struggling with diseases and flooding, exacerbating the suffering of the population.

In August, flooding was a major challenge for Chad and South Sudan, affecting the operations receiving refugees and returnees. More than 32,652 refugees (8,163 families) were impacted by these floods in the four provinces of Ouaddaï,

¹ External Update 76 https://data.unhcr.org/en/documents/details/110914

² Data from <u>https://data.unhcr.org/en/situations/sudansituation</u>

³ https://reliefweb.int/report/sudan/sudan-adre-border-crossing-situation-update-flash-update-no-02-31-august-2024

⁴ GBV: Sudan Situation June 2024: <u>https://data.unhcr.org/en/documents/details/111029</u>

⁵ https://reliefweb.int/report/sudan/sudan-adre-border-crossing-situation-update-flash-update-no-02-31-august-2024

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Wadi-Fira, Sila and Enndi Est, with thousands of refugees and host communities fleeing the rising waters and seeking refuge on hilltops. More than 8,223 refugee shelters, including more than 60 Refugee Housing Units (RHUs) and 1,381 latrines and showers, were badly damaged and needed reconstruction.⁶ In South Sudan, heavy rainfall and flooding have caused widespread disruption to service delivery in new arrival hosting locations, particularly Maban and Jamjang. In Jamjang, over 500 metric tonnes of food remained undelivered at the end of August, affecting planned refugee relocations from Renk, via Malakal, to Ajuong Thok and Pamir camps⁷.

Highlights and Achievements

May - August 2024

41K individuals received protection services⁸



individuals relocated or supported with transportation cash allowance



individuals received

non-food items

69K

individuals supported with shelter or housing assistance



individuals provided with primary healthcare consultations

Central African Republic: The security situation in Vakaga prefecture, where most refugees are hosted remained volatile due to the presence of non-state armed groups in localities neighbouring Birao and the historic conflict between different social groups in the region. RRP partners jointly organized a peaceful coexistence workshop in June, bringing together national and regional government, humanitarian, and peacekeeping actors for an inclusive dialogue. The sessions were also attended by refugee and host-community leaders, IDPs and returnees.

Chad: The Constitutional Council confirmed Mahamat Idriss Deby Itno as the winner of the presidential elections, held on 6 May. The new government of the Fifth Republic of Chad, consists of 27 ministers and eight secretaries of state, including eight women. This new government has the same approach with open borders and reinforced security at the border. UNHCR and partners work closely with the line ministries to support refugee activities in Chad especially on policy matters.

Egypt: As part of the MoU signed by UNHCR and UNDP in February, outlining the co-leadership of the Sudan and Syria refugee resilience response in Egypt, a mapping exercise of International Financial Institutions (IFIs) and development partners was undertaken, and an external engagement strategy was developed with a six-month plan of action. Meetings to engage the IFIs on resilience planning were held with the government.

Ethiopia: Insecurity in the Amhara region led to the closure of Kumer and Awlala settlements and the relocation of refugees to the new Aftit site. In collaboration with the government, 4,597 refugees were relocated to Aftit as of August 2024.In addition, 3,556 refugees were relocated from the Kurmuk transit center to the new Ura refugee site in Benishangul-Gumuz region.

⁶ External Update 76 <u>https://data.unhcr.org/en/documents/details/110914</u>

⁷ ibid

⁸ Includes Child Protection services and GBV responses

Libya: The eastern-based Government in Libya allowed Sudanese refugees to enter, registering them and providing basic protection. The first inter-agency mission to Alkufra, led by the Deputy Special Representative Resident Coordinator/Humanitarian Coordinator (DSRSG - RC/HC) and heads of agencies, consolidated needs identified by the authorities in Alkufra, which led to the development of the Operational Plan for Alkufra. Through the CERF Rapid Response, USD 5 million was allocated to the Sudanese refugee response for Libya to IOM, UNICEF, UNFPA, UNHCR, WFP and WHO, covering health and nutrition, protection and food security sectors.

South Sudan: The daily arrival rate decreased by approximately 32.3 per cent, dropping from 1,512 arrivals per day earlier to 1,024 from May to August. Most new arrivals from Sudan (75 per cent) continued to enter through the Joda-Wunthou border crossing in Renk county. However, at least 4,912 returnees and 3,924 refugees used unofficial border crossing points in the county.

Inflation was a significant concern in South Sudan, driven by the depreciation of the South Sudanese pound against major currencies, making importing essential goods and services difficult. The cost of the multi-sectoral survival minimum expenditure basket increased by 146 per cent between July 2023 and July 2024. By August, inflation had surged further to 54.8 per cent. The disruption of supply routes from Sudan has led to shortages and increased the cost of consumer goods in the north, which hosts most refugees.

Uganda: While most Sudanese refugees entered Uganda by road from South Sudan, nearly a third of new arrivals since April 2023 entered by air. The government granted prima facie recognition for Sudanese asylum seekers who arrived since 1 April 2023 but required all Sudanese refugee registration to take place in Kiryandongo settlement, and those refugees seeking support were settled there. The registration and settlement of new arrivals in Kiryandongo have created additional requirements for humanitarian partners to be able to respond.

Sectoral Responses



Protection

In the Central African Republic, overall, 35,201 people arrived from Sudan since the beginning of the emergency, including 29,043 refugees and 6,158 returnees. Almost half the total refugee population were women and children. Between May and August, a total of 5,757 Sudanese refugees crossed the border, mostly from South Darfur. by the end of August, the population in the Korsi settlement, Birao, had increased by 29 per cent to 14,447 individuals. The other 14,596 refugees have settled in spontaneous settlements in 14 localities, in remote hard-to-reach areas spread across five other provinces. A total of 6,216 refugees were registered biometrically in four provinces and received protection services, including civil documentation, identification of specific needs, and referrals.

Chad received more than 630,000 new arrivals since the beginning of the conflict, with more than 150,000 in 2024 up until the end of August, mainly from North Darfur.

Protection activities included the monitoring of the 32 border entry points, pre-registration, incident reporting, protection referrals, and relocations to new refugee sites. Local authorities allocated a new site for 50,000 people, although relocation from spontaneous sites was slow due to seasonal floods and bad road conditions.

UNHCR signed agreements with Chadian legal and medical associations to allow qualified refugees to work. The International Organization for Migration (IOM) assisted over 213,000 Chadian returnees. Awareness campaigns continued in affected communities, and elections for new refugee committees were held in five sites. Despite efforts, over 60 per cent of emergency needs remain unmet, with continued mobilization of resources by the government and humanitarian organizations.

In Egypt, the protection sector working group established an "Access for All" task force focused on a comprehensive approach to streamline access to registration and protection services. From May to August 2024, partners provided legal counselling and assistance to 5,408 Sudanese. As of 31 August 2024, 760,581 refugees and asylum seekers, including 473,881 Sudanese were registered. 90 per cent of those registered were Sudanese and of this, 96 per cent were new arrivals. The high volume of registration requests resulted in extended waiting times of six to eight months, causing a backlog.

UNHCR launched an online registration appointment tool for Sudanese individuals in mid-August to expedite appointments and to reduce overcrowding at the main registration centre in Greater Cairo. Registration is a requirement for asylum-seekers and refugees to obtain a residence permit valid for six months, however, the residency application process currently takes nearly two years. Despite this long processing period, since 30 June. the government required all foreigners to have valid residency to access public services. This made it difficult for refugees to access education, register births, mental health services, and legal services, among others.

Since the start of the conflict, 498,943 new arrivals from Sudan, have received appointments through the Infoline <u>Contact Us - UNHCR Egypt</u>. Additionally, community-based protection partners provided information awareness sessions to 5,858 refugees and asylum seekers, including Sudanese (773 males and 5,085 females) at the reception centre in Greater Cairo, which covered access to services and assistance, contacts of refugee-led organizations (RLOs), protection from Sexual Exploitation and Abuse (SEA), and feedback and response mechanisms. Partners also provided psychosocial support to 2,047 refugees/asylum seekers including Sudanese (1,188 males and 859 females).

In **Ethiopia**, the Government's Refugees and Returnees Service (RRS) and UNHCR pre-registered 7,014 new arrivals from Sudan, including 4,336 Sudanese, 338 non-Sudanese refugees (Eritreans, South Sudanese and others) and 2,340 Ethiopian refugee returnees. By the end of August 2024, 90,043 Sudanese refugees, including the 48,964 Sudanese refugees who arrived pre- April 2023 were hosted in Sherkole, Tsore and Bambasi camps in the Benishangul-Gumuz region. Refugees were individually and biometrically registered, given ration cards and had access to protection services, including counselling.

In the Amhara region, 233 individuals (112 households) who had resettlement cases prior to fleeing Sudan underwent individual registration to facilitate their travel. 429 elderly and persons living with disabilities were identified, and 150 were provided with counselling and referrals to specific services and assistance.

Most of the Ethiopian refugee returnees from Sudan could not return to their places of origin in western Tigray due to security concerns and so remained as IDPs in central Tigray. Unfortunately, returnees were not provided with humanitarian assistance due to lack of funding, including food, and struggled to re-establish themselves.

In **Libya**, efforts to strengthen national registration and documentation continued, with advocacy to prevent the deportation of those who test positive for infectious diseases, and protection against detention. Medical treatment was provided to those in poor health and visits to the detention centre in Alkufra enabled assessment of the need for core relief items and regular monitoring of detention conditions. Partners improved outreach with field missions to the east, including Alkufra, and accelerated registration in Tripoli. Outreach in areas with a concentration of Sudanese refugees in the east highlighted an urgent need for food assistance, health and access to facilities.



Discussions with national partners enabled and authorities the development of an operational response plan and facilitated capacity-building covering of the needs persons at heightened risk, communication communities, with and psychological first aid. At least 1,200 individuals in need were reached through 91 field visits, and referrals were done to facilitate access to targeted assistance.

In **South Sudan**, between May and August 2024, the Commissioner for Refugee Affairs (CRA) and UNHCR registered 29,321 new refugee arrivals, primarily from Sudan, resulting in a total registered population of 494,487 refugees and asylum-

seekers since the conflict in April 2023. The response necessitated a mobile approach with refugees settling in various remote locations across the country, especially in the north. In a joint effort, CRA, UNHCR, and RRP partners registered 4,553 refugees in Boromedina and Raga Town (Western Bahr El Ghazal State) between 30 June and 12 July. This was in addition to some 12,000 refugees and asylum seekers registered in Wau, Western Bahr El Ghazal State) and Warrap States. Refugees in these locations expressed reluctance to relocate to the designated refugee-hosting areas.

During the reporting period, 19,772 refugees and asylum seekers received protection services, including psychosocial support, legal representation, and documentation renewal. The challenges that hinder access to justice persist including delays in case processing, underreporting of GBV, and limited law enforcement capacity. Additionally, severe floods have hampered access to basic services for refugees in multiple areas, particularly Renk, Maban, and Jamjang, forcing many to resort to negative coping strategies.

In **Uganda**, by the end of August 2024, a total of 54,343 refugees from Sudan were registered, with 19 per cent of them (10,361) residing in urban areas. Uganda also received 4,000 South Sudanese and some 3,500 Eritreans who were registered refugees in Sudan but fled the conflict after April 2023. The new arrivals in 2024 have increased the needs for services in Kiryandongo settlement. Protection partners noted some Sudanese moving onwards to Rwanda, which was driven by the deteriorating services in the settlement, limited livelihood opportunities and possibly the hope of obtaining third country resettlement. In June 2024, RRP Partners conducted two awareness sessions at Nyumanzi reception centre, addressing one addressing onward movement of new arrivals and another focusing on protection of refugee women and girls. The trend of onward movers has decreased with robust community sensitization and there is a need to maintain community awareness campaigns to identify protection risks and work collaboratively with the community on solutions.



Sub-Sector: Child Protection

In the **Central African Republic**, 396 children received child protection services, including 23 unaccompanied and separated children (UASC) and were given psychosocial support, placement in host families, essential core relief items, clothing, and nutritional support. Partners organized recreational and psychosocial activities at the child-friendly space in Korsi, benefitting 214 refugee children (53 per cent girls). However, one child-friendly space was closed in June due to lack of funds. "Children's Clubs" in three local schools in Birao continued with the participation of 111 refugee children (49 per cent girls) and 630 host-community children.

In **Chad**, child protection services reached 41,006 children in Ouaddaï, Sila, and Wadi Fira provinces, including 455 UASC. Additionally, 120 at-risk adolescents, including 60 girls, received life skills training in sewing, baking, and art. The youth centres in Farchana and Bredjing were equipped with TVs, solar panels, and sports equipment to support recreational activities. UNHCR and partners developed a child protection risk mitigation plan at food distribution points, and 380 social workers and volunteers were trained on child protection.

In **Egypt**, child protection sub-sector partners provided Mental Health and Psychosocial Support (MHPSS) services to 11,475 individuals (7,597 children and 3,878 caregivers) through established child-friendly spaces and family clubs across eight governorates, bringing the total number of assisted individuals this year to 21,071. Some 7,331 Sudanese children at risk and survivors of violence were supported with protection services through the specialized service centres in Greater Cairo, Alexandria, Damietta, and Aswan.

In **Ethiopia**, 1,154 Sudanese UASC were identified in transit centres and settlements. Some 8,835 children received child protection services, including 938 (432 girls) UASC, and other children at risk benefited from Best Interest Procedures (BIPs), 675 children were provided with alternative care arrangements, six with medical care/nutrition support and one child was reunified with family. Also, 11,162 children were supported at child-friendly spaces with group and/or individual non-specialized psychosocial support which is basic mental health and emotional support provided by trained individuals who are not mental health professionals.

Additionally, 295 partner staff and stakeholders including volunteers and government officials, were trained in child protection while 8,353 refugees and host community members were made aware of child protection concerns.

In **Libya**, child protection services, including case management, psychosocial support, referrals, child rights awareness, gender-based violence risk mitigation and positive parenting, were facilitated at UNICEF's Baity Centre in Alkufra, Ajdabiya, Sebha, Tripoli and Benghazi. In addition, they were mobile outreach teams working with vulnerable children in the community.

The national child protection working group and Sudan child protection taskforce updated service maps and referral pathways and provided capacity-building on monitoring grave violations. Registration of UASC was done through specialized registration tools. Yet, challenges remained in remote transit cities like Alkufra and Al Qatrun due to inadequate registration systems, referral pathways, child-friendly spaces, alternative care, funding and human resource capacity.

In **South Sudan**, children were 47 per cent of the newly registered arrivals between May and August. During this time 5,532 children benefited from various child protection services. 1,653 UASC were identified and documented during the reporting period. Of these, 81 children in the case management process received tailored protection support. Furthermore, 1,416 children were referred to specialized services, including medical care and psychosocial support, ensuring their holistic needs were met.

Family tracing for children separated during the conflict was initiated by the International Committee of the Red Cross (ICRC), however, efforts were limited in areas with active conflict in Sudan.

In **Uganda**, partners reached 4,259 children through child protection services. Key interventions included training for 30 community members on child protection and referral mechanisms. Case management support was provided to 89 UASC with six in foster care and the rest in kinship care. Additionally, 50 UASC and children at risk received referrals for education, medical care, and food and some 1,046 children were engaged in distress management sessions. Awareness-raising sessions were conducted for 417 community members which included 151 parents attending parenting sessions and 240 parents attending the BE THERE⁹ sessions. 2,236 children attend the mobile child-friendly spaces.



Sub-sector: Gender-based Violence (GBV)

In the **Central African Republic**, six safe spaces were set up and managed by trained case managers using the *Ma Mbi Si* ("Listen to Me, Too") approach to prevent and respond to GBV. Survivors received psychosocial support, 22 per cent received medical care, 1 per cent of survivors were referred to the legal system. 120 dignity kits were distributed to survivors. 119 prevention awareness sessions for 16,424 people (3,497 men, 7,623 women, 1,987 boys and 3,317 girls), were organized using a community-based approach involving protection structures.

In **Chad**, 4,300 refugees, primarily women and girls, received psychosocial, medical, legal, and security support, as well as dignity kits and cash assistance. Additionally, 17,199 women and girls participated in life skills training, while 3,911 engaged in income-generating activities. UNHCR and UNFPA recruited 46 refugee specialists, and 150,404 individuals were sensitized on GBV. Efforts also involved men and boys in GBV prevention. Despite progress, underfunding, security risks, and resource shortages, such as irregular food aid and lack of hygiene items, continued to increase vulnerability to GBV.

In **Egypt** GBV sub-sector partners supported 9,947 Sudanese through specific services, including case management, MHPSS, cash assistance, shelter, legal and medical support, and vocational training. Additionally, more than 9,075 individuals benefitted from GBV awareness-raising sessions and outreach efforts promoting behavioral change. In May, a sub-national GBV sub-working group was launched in Alexandria to better address the specific needs and challenges for refugees, including Sudanese. A second donor meeting was held in June to continue advocating for support and funding for the GBV response. In August, the annual GBV training workshop was held to enhance the capacity of GBV partners in information management and service sustainability, especially for local NGOs.

In **Ethiopia**, all survivors and those at risk of GBV, received psychosocial support, while 10 per cent and 45 per cent received medical services in the Benishangul Gumuz and the Amhara regions, respectively. Some 400 individuals, including 100 host community members, survivors and those at risk of GBV, received cash assistance in the Benishangul Gumuz region. In the Amhara region 129 individuals (33 women) with specific needs received core relief items and 175 women and girls received dignity kits. Additionally, 377 women and girls were engaged in recreational activities, such as handicrafts, at the Women and Girls Safe Space (WGSS) in Kurmuk transit centre to promote their resilience and wellbeing through social connections and interactions.

1,420 refugees were engaged in awareness sessions on GBV prevention, risk mitigation, and survivor-centred approaches and 38 personnel were trained on clinical management of rape and psychotherapy. Also, some 10,351 refugees were reached through general GBV awareness. As part of risk mitigation, safety audits were conducted in

⁹ BeThere is an approach used by Uganda disaster and refugee management committee (URDMC) and other partners in Kiryandongo under the "Sustainable Transition to Locally led Emergency and Protection Services (STEPS) project". The approach strengthens parenting capabilities by reducing stress and bolstering mental health among conflict-affected parents and other primary caregivers. BeThere also aims at enhancing knowledge and skills related to positive parenting, as well as self-care for the caregivers. The overall objective is to support caregivers and families to implement positive parenting and manage their own wellbeing.

Sherkole and Bambasi camps of Benishangul-Gumuz. The main risks of GBV raised by the refugees were crowded shelters and lack of sex-segregated latrines and showers. It was reported that female and child-headed households were exposed to GBV when they collected firewood and when they travelled long distances for economic activities.

Unfortunately, GBV response services have been suspended at the Kurmuk transit centre and Ura settlement as of June 2024 due to a lack of funding.

In Libya, a public health assessment in Alkufra emphasized the urgent need to support women and girls with GBV services. In response to issues identified, partners provided psychosocial support, case management, medical referrals, awareness raising, and cash for protection to address GBV-related issues, reaching 1,496 Sudanese women. UNFPA and a local partner, the Women's Union in the South provided protection services to Sudanese women and their families, including life skills training for over 280 Sudanese women, and awareness sessions on protection from sexual exploitation and abuse (PSEA).

In South Sudan, RRP partners provided support to 47,108 refugees and asylum seekers at risk of GBV. The support included dignity kits, life-saving services, psychosocial support, case management, and referrals to specialized services. 1,377 individuals received one or more response services, including psychosocial support, legal, health, safety, and livelihood interventions. Additionally, 2,954 women and girls received dignity kits alongside case management services, ensuring their immediate needs were addressed with dignity and care. Finally, GBV Safety Audits were conducted in Renk (Renk Safety Audit) Torit, Yei, and Bor and documented the safety and security concerns of women and children in transit centres. The audit identified barriers to accessing services and informed programming to mitigate the risks faced by vulnerable groups in these locations.



Refugees from Sudan are registered at Kiryandongo reception centre in Uganda. © UNHCR/ Mark Isaac.

In Uganda, 89 per cent of survivors received psychosocial support, 23 per cent received medical care, 22 per cent of survivors were referred to the legal system. 120 dignity kits were distributed to survivors and other women and girls at risk. Partners have adopted SASA!10 the use of methodology as a tool for effective community engagement GBV on prevention and risk mitigation with 10 (6M, 4F), Sudanese community activists identified and trained. Additionally, 318 (149 male, 169 female) individuals were reached through awareness raising and women and safe space activities such as tailoring, liquid soap making and psychosocial support sessions.

¹⁰ SASA (Start, awareness, Support action) is an evidence-based community mobilization approach to prevent violence against women. Developed with a combination of theory, practice and relentless optimism, SASA! encourages communities around the world to personally and collectively use our power to create safe, violence-free communities for women (https://raisingvoices.org/women/the-sasa-approach/sasa-activist-kit/).

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Education

In the **Central African Republic**, enrolments in education increased from just 230 refugees enrolled in two schools in one town at the beginning of the year to 1,712 Sudanese refugees (47 per cent girls) enrolled in eleven schools in eight towns across four provinces by June 2024. The gross enrolment rate at the primary level has increased from 3 per cent in January to 39 per cent in June, while the rates in formal secondary education increased from 0 per cent to 2 per cent. French language and academic support classes were organized in Birao, benefitting 594 refugees (49 per cent girls) and 168 host-community children (54 per cent girls). Overall, 27 per cent of Sudanese refugee children between 3 and 17 years old participated in formal and informal education activities, compared with just 5 per cent in January. Many of the education activities were funded by Education Cannot Wait.

In **Chad**, more than 36,500 children, including over 600 Chadians, completed their 2023-2024 school year. 993 refugee students (43 per cent girls) passed their Baccalaureate at the end of the secondary school cycle. The Ministry of Education and Civic Promotion signed the Standard Operating Procedures for the emergency education response. As part of integrating refugees into the national education system, the ministry and the refugee education sector working group organized training for more than 500 teachers on various topics, including pedagogy, child protection, mental health, and psychosocial support. The RESITCHAD emergency project provided access to education for refugee children and the host community by constructing eight schools, rehabilitating schools in host communities, and recruiting and training 150 teachers.

In **Egypt**, the education sector provided 17,856 school-age (3-17 years old) children and youth with education grants to facilitate enrolment in formal and non-formal education. 374 children with disabilities were also supported to enroll in schools. Partners also provided bridging, remedial and language classes, accelerated learning and MHPSS initiatives, reaching 1,561 children. Dignity kits were also provided to 500 newly arrived Sudanese school girls. Partners supported the public and Community Learning Centers (CLCs) with construction, refurbishment and maintenance supplies, enabling centres to provide education services to 2,341 Sudanese refugee children. Since June 2024, the government directed CLCs to comply with the requirements to operate in Egypt, and many of them faced the risk of closure for not being able to obtain all the required documentation and approval. The education sector conducted two deep-dive workshops to explore feasible alternatives, such as digital education opportunities, to ensure refugee children continue learning.

In **Ethiopia**, during the relocations of refugees from Kumer and Awlala settlements and Kurmuk transit centre to the new settlements, refugee schooling was interrupted. Only 6 per cent of the newly arrived Sudanese refugee children (1,671 students - 49 per cent girls) were enrolled in both pre-primary and primary education. For the pre-existing Sudanese refugee population hosted in the Benishangul-Gumuz region, education services continued in the three-refugee camp and host community schools. 28,844 students (44 per cent of girls) were enrolled in pre-primary, primary and secondary education by the end of the academic year in June 2024, amounting to 69 per cent enrolment rate. The overall Gross Enrolment Rate for primary education was 95.5 per cent and 11.7 per cent for secondary education. With the support of the Albert Einstein German Academic Refugee Initiative (DAFI) scholarship programme, three out of five Sudanese refugees enrolled in public universities graduated with bachelor's degrees in June 2024. Key challenges in the education sector remained: the shortage of classrooms, school supplies, furniture and the language barrier.

In **Libya**, non-formal education including basic literacy and numeracy, life skills training and MHPSS were provided to Sudanese children in Alkufra, Ajdabia, Sebha, Tripoli, Misrata and Benghazi. Sudanese schools in Tripoli and Misrata received support to accommodate new students. Some families were also supported with documentation and placement tests to enrol into public schools. However, the public and Sudanese schools need additional learning spaces to mitigate overcrowded classrooms and enable the admission of more Sudanese children in public schools. Partners met with the Sudanese Consulate to discuss expanding Sudanese schools in Tripoli and a new school in Sebha.

In **South Sudan**, the education facilities in Maban, Gorom, and Jamjang refugee camps were expanded to accommodate new arrivals with improvements in infrastructure, teacher incentives, and learning materials. 59,474, refugee children were enrolled at the primary (with 2,969 new arrivals) and 6,565 at the secondary level (338 new arrivals). To support the transition into the South Sudan curriculum, intensive English language training and mental health and psychosocial support were provided to children.

Monthly stipends and semester fees were paid for 251 DAFI scholars. The 2024 DAFI new call for applications was launched and concluded with over 1,800 applications compared to 500 in 2023. Four new Mastercard Foundation scholars were identified to join USIU-Africa, however, enrollment has been delayed by the lack of non-machine readable conventional travel documents. In this period, 72 scholars completed their studies and were expected to graduate and enter the labour market.

With the influx into South Sudan, the primary and secondary gross enrolment rates dropped to 47 per cent and 12 per cent, respectively, from 50 per cent and 13 per cent in 2023. The already weak education system and the inadequate funding for response partners resulted in below minimum standards on emergency education to meet the needs of the significant rise in the population of children and youth of school-going age.

In **Uganda**, a total of 25,327 Sudanese refugees (11,539 girls and 13,788 boys) of school-going age were registered. By the end of August, 191 refugees (108 girls and 83 boys) were enrolled in pre-primary education, 771 (401 boys and 370 girls) in primary education, and 26 in secondary education at the Kiryandongo refugee settlement. The English for Adults (EFA) program at the settlement supported 109 students, addressing the language barriers for the Arabic-speaking Sudanese students joining Ugandan schools.



Food Security

In the **Central African Republic**, at the Korsi settlement in Birao, RRP partners provided hot meals to about 1,000 refugees per day who were waiting to be integrated in WFP's rations programme. In May, two months of rations were distributed to 12,200 refugees, and in July, 9,793 refugees received rations for the month. During the rainy season in August, the roads of the prefecture were inaccessible and so partners transitioned to a cash-based food security approach, serving 9,884 refugees.

In **Chad**, 420,385 persons received food assistance. Hot meals were provided for two days to all refugees during relocation from border areas as they waited to receive core relief items and dry food rations. WFP provided monthly inkind food assistance to all new arrivals at the border and refugee sites. The old Sudanese refugee caseload received targeted cash assistance based on vulnerability profiling.

In **Egypt**, Ready-to-Eat (RTE) meals were provided to new arrivals at Argeen and Qustol border crossings in the south of Egypt. However, this life-saving assistance was paused from July 2024 due to funding shortages. WFP was actively



Refugees in Egypt receive cooking courses to encourage their self-reliance and promote opportunities for income generation. © WFP

fundraising to resume the RTE assistance.

Sector partners also provided monthly food emergency cash assistance to 80,000 Sudanese new arrivals, and monthly conditional cash assistance to 4,462 Sudanese refugee pregnant and breastfeeding women, along with their children under two years old. In collaboration with the National Nutrition Institution, food security partners raised awareness on nurturing healthy development during the first 1,000 days of a child's life. Partners also supported more than 1,000 Sudanese with the Food for Training (FFT) programme offering vocational training for improved food livelihoods. and income security. generation activities.

In **Ethiopia**, the monthly General Food Distribution (GFD) for new arrivals took place at Aftit settlement, Ura settlement, and Kurmuk transit centre and for Sudanese refugees hosted in the camps in Benishangul-Gumuz region. From May

to July 2024, an average of 92,417 refugees from Sudan received 60 per cent of the monthly general food rations in camps and settlements. However, WFP was able to increase the standard ration for new arrivals to 100 per cent as of August 2024 and 15,643 refugees in Kurmuk transit centre received a full food basket by the end of the month. A joint cash feasibility assessment was underway in the Benishangul Gumuz region to scale up cash for food starting in the last quarter of 2024. Unfortunately, due to the insecurity in the Amhara region, no food distribution was possible in August.

In **Libya**, food assistance in Ajdabiyah and Tripoli was distributed in the reporting period for Sudanese refugee households and vulnerable host communities. Partners worked closely with Sudanese community leaders in the western and eastern regions to update beneficiary lists and develop vulnerability criteria for targeting Sudanese refugees to enable the direct distribution of wheat flour recommended by the municipality. Partners worked closely with Sudanese community leaders in the western and eastern regions to update beneficiary lists and develop vulnerability. Partners worked closely with Sudanese community leaders in the western and eastern regions to update beneficiary lists and develop vulnerability criteria for targeting Sudanese refugees to enable the direct distribution of wheat flour recommended by the municipality.

In **South Sudan**, WFP and partners provided a mixed food basket of in-kind food and cash-based transfers for 323,696 refugees and returnees in the transit centre in Renk, Abyei and Malakal and upon arrival to 23,354 new refugees in the refugee hosting locations in Maban, Jamjang and Aweil. Additionally, WFP provided a protective ration/ cash-based transfers (CBT) to complement the nutrition-specific support to families with children below two years of age in the Renk transit centres who arrived between April 2023 and April 2024. This brought the number of households reached with two rounds of protective ration to 8,310 people with a final round of distribution planned for September 2024.

WFP and its partners provided life-saving food, nutrition, protection, livelihood (in the form of general food distribution), in nine major refugee camps and settlements (Aweil, Gorom, Makpandu, four Maban camps, and two Jamjang camps). The provision of food in refugee camps was at 50 per cent rations (15 feeding days per month), benefitting more than 344,802 refugees. Refugee camps in Gorom and Yambio transitioned from blanket food distribution to targeted food assistance that benefitted 15-25 per cent of the most vulnerable refugees in each camp. New arrivals from Sudan, were not affected by the targeting and will continue to receive reduced food rations for the next 12 months. CRA, WFP, and UNHCR worked with communities to build awareness and readiness for the transition, as well as to inform individuals of the possibility of making appeals for the decision.

In **Uganda**, general food assistance was provided to 56,009 Sudanese refugees in Kiryandongo refugee settlement. This included 31,553 refugees who received in-kind food assistance with essential food items (rice, beans, vegetable oil, and salt) and 24,456 who received cash assistance. New arrivals received 100 per cent food rations for three months, after which refugees receive reduced rations due to underfunding.



Public Health & Nutrition

In the **Central African Republic**, in collaboration with the district hospital of Birao, partners operated three health posts with primary care, maternal health, sexual and reproductive health, MHPSS, and nutrition. The health posts received 13,551 consultations, including 10 per cent from the host-community. The consultations included 634 pre-natal and 153 post-natal consultations, 776 gynaecology consultations, and 67 births. Some 261 refugee children received multi-antigen vaccinations, and 324 pregnant women received tetanus vaccines. 529 refugee children with moderate malnutrition and 83 with severe malnutrition were treated. 291 children (6 and 23 months) received food supplements to prevent malnutrition. The health posts referred 299 cases for secondary health care between May and August.

In **Chad**, partners supported the Ministry of Health in providing primary healthcare to refugees and host populations through a network of 20 health centres and 13 health posts. IMC took over health and nutrition activities from IRC in Dougui refugee settlement. A total of 367,786 medical consultations, including 89,182 (16 per cent) from host communities, were carried out. Acute respiratory infections, watery diarrhoea, and malaria remain the most common ailments. On 2 March 2024, the Ministry of Health declared a hepatitis E outbreak, and as of the end of August, 3,443 cases were registered, with 11 deaths (fatality rate 0.3 per cent). Measures responding to this epidemic continued, led by the Ministry of Health. From May to August 2024, 1,785 new mental health cases were registered, bringing the total number of mental health clients under follow-up to 17,215.

A total of 7,473 new births were registered, and 94 per cent were assisted by skilled health workers. Community management of acute malnutrition programmes were implemented in all refugee sites; 117,067 children were screened for malnutrition at border entry points and refugee sites; 21,375 moderate acute malnutrition and 7,323 severe acute malnutrition cases were found and enrolled in nutrition programmes. Some 70,744 pregnant and lactating women were screened for malnutrition, and 5,021 were treated for acute malnutrition.

In **Egypt**, the health sector provided routine vaccination and growth monitoring consultations to 8,883 Sudanese children under 5 years of age, primary health care consultations to 11,355 and 2,013 secondary and tertiary health care interventions to Sudanese refugees and asylum seekers. Partners donated 2,454 doses of Tetanus immunoglobulin vaccine and 9,720 test-kits for diseases such as measles, rubella, dengue, and cholera to the Ministry of Health as well as primary care units and 500 doses of Hepatitis B immunoglobulin for public hospitals in Cairo and Aswan governorates.

Partners resumed activities that were suspended in Aswan governorate, in collaboration with the Egyptian Healthcare Authority (EHA), across a network of 235 healthcare services including covering expenses, ICU admissions, surgical interventions, laboratory and radiological interventions, and dispensing medications. Thirty-five medical and educational staff were trained in eight schools as part of the "Health promoting schools". However, there was a country-wide shortage of essential medication, including some psychotropic drugs and insulin.

Nutrition partners trained 30 physicians from 16 hospitals affiliated to the Ministry of Health and population and the Egyptian Healthcare Authority in governorates with high concentration of Sudanese, on management of Severe Acute Malnutrition. They also trained 19 healthcare workers on screening children for malnutrition and held awareness sessions on Infant and Young Child Feeding for refugee populations. 2,477 Sudanese children under 5 years of age were screened for malnutrition in primary health care units in Cairo and Giza; 30 children were referred for further management. Some 1,246 mothers were counselled on infant and young child feeding practices.

In **Ethiopia**, comprehensive primary health care services and referrals to secondary and tertiary health facilities were provided. For Sudanese refugees a total of 70,611 primary healthcare consultations were carried out, with nationals accounting for 20 per cent of the total consultations. Among them, 1,296 women accessed reproductive health services, including 496 deliveries. In the camps located in the Benishangul Gumuz region, 478 (99 per cent) of the deliveries were assisted by skilled health workers, while only 25 births were assisted in the emergency locations (Metema and Kurmuk). Additionally, 760 refugees received MHPSS support including two cases GBV receiving Post-Exposure Prophylaxis within 72 hours. Due to resource limitations, referrals to tertiary health facilities were limited to emergency cases.

Community health awareness sessions focusing on health education and hygiene promotion, and distributions of insecticide-treated bed nets and indoor residual spraying in the refugee camps were held. Despite these efforts, significant challenges, including shortages of medicines, limited referral access, and service interruptions due to fuel shortages plus security issues, remained.

From May to August 2024, 903 children under five were screened for malnutrition in transit centres (Kurmuk and Metema) and Ura settlements. Among them, 111 children (12 per cent) were identified as acutely malnourished; among them, 5 per cent of the children were severely acute malnourished (SAM) and were enrolled in the Outpatient Therapeutic Programme (OTP) while 7 per cent had moderate acute malnutrition (MAM) and were enrolled in the Targeted Supplementary Feeding Programme (TSFP). In the Benishangul Gumuz camps, where the pre-existing Sudanese refugee population is settled, 196 children were admitted to the OTP for severe acute malnutrition and 743 children were admitted to TSFP for moderate acute malnutrition, with cure rates of 97 per cent and 98 per cent respectively. In addition, as a malnutrition preventive measure, 7,026 children under five were enrolled in Blanket Supplementary Feeding Programme.

Due to insecurity and funding issues, acquiring nutrition data for new arrivals crossing the border through Metema entry point was challenging. The funding constraints impacted the provision of quality health, nutrition, and food services to refugees, and increased the risk of disease outbreaks and malnutrition.

In **Libya**, over 33,000 medical consultations were provided to Sudanese refugees by health partners in Alkufra, Tripoli and other locations since July. Additionally, over 780 received MHPSS support services. Medical supplies and equipment were handed over to multiple hospitals in Alkufra, including reproductive kits to the maternity hospital. Assessments conducted in Alkufra identified health risks attributed to poor cleanliness, substandard food preparation, and lack of sanitation materials. Local health authorities reported limited hospital capacity at primary healthcare level, insufficient essential medicines and equipment, inadequate laboratory supplies, and a lack of medical personnel.

Seven mobile teams operating in Alkufra offered nutrition preventive and case management services to children aged 6-59 months and women of childbearing age. They promoted optimal infant and young child feeding practices in emergencies through targeted messaging and educational materials and supplies. Malnutrition prevention through blanket supplementary feeding, training and procurement of Specialized Nutritional Foods (SNF), however challenges remain for SNF clearance process and funding shortages.

In **South Sudan**, medical and nutrition teams screened children under five and pregnant and lactating women at the transit centres, reaching over 14,823 individuals with interventions to prevent malnutrition, including vitamin supplementation. Vaccination efforts targeted over 1,341 children under 15 for polio, measles, and other vaccine-preventable diseases, including COVID-19, at the transit centres in Renk and other locations.

Preliminary data indicated high malnutrition rates (Global Acute Malnutrition (GAM) beyond the 15 per cent emergency threshold) in transit areas. Preventive and curative interventions were provided on-site or at nearby centres, including supplementary feeding programmes and community-based treatment for acute malnutrition using plumpy nuts and other

special nutrition products. 923 children were discharged after recovering from malnutrition treatment, resulting in a 93 per cent cure rate for those in Outpatient Therapeutic Programmes (OTPs).

100,473 primary medical consultations were conducted for refugees, with each clinician attending an average of 49 consultations daily. Safe motherhood programmes were provided at the primary healthcare centres, resulting in 1,625 skilled deliveries, achieving a skilled birth attendance rate of 93 per cent. The under-five mortality rate stood at 0.20 per 1,000 per month, and the crude mortality rate at 0.14 per 1,000 per month. Gaps remained in antenatal care coverage, with only 72 per cent of pregnant women receiving four or more visits.

Some 811 individuals received HIV treatment services and management of opportunistic infections. Communicable diseases, particularly diarrhea and malaria, emerged as primary health concerns, exacerbating the overall health risks in the camps.

In **Uganda**, a total of 12,584 medical consultations were registered with each clinician seeing an average of 50 patients per day, 66 per cent of these were refugees and 34 per cent were from the host population. The top morbidity causes were malaria upper respiratory tract infection, lower respiratory tract infection, gastric and duodenal ulcers, and skin diseases. A joint health monitoring mission was conducted in August 2024 by the Ministry of Health (MoH) together with UN agencies, partners and donors, including USAID and the World Bank, in the refugee hosting district to monitor the implementation of integration of health services into the national health system. Staffing gaps, infrastructure gaps, medicines and medical supply gaps were identified as the critical gaps.



Livelihoods & Economic Inclusion (LEI)

In Birao in the **Central African Republic**, partners prepared for farming initiatives for the 10 hectares of land given by local authorities. This initiative - a livelihoods project by FAO in Birao- was expected to provide gardening supplies, eds, and training to 50 cooperatives totalling 1,000 individuals from the refugee and host communities, including returnees and



Katidja Abakar, mother of 9 children, a Sudanese refugee in Korsi, in the Central African Republic practices basket-making and leads a session with members of the Group of women who make baskets. © UNHCR / Stella Fatime

internally displaced people. The construction of a water borehole and water tower was ongoing to ensure irrigation possibility during the dry season.

In **Chad**, UNHCR and GIZ signed an agreement to support a surface water mobilization project in Ouaddaï Province to enhance resilience and economic inclusion for refugees and host communities. Three weirs were built at Farchana and Hadjer. Through negotiations, NGOs secured some farmland and maintained conflict-sensitive agreements. The project

also developed climate-resilient agricultural value chains, targeting 4,633 households (including 3,275 refugees). Ultimately, 4,071 households (2,859 refugees) received support, with 88 per cent of the allocated budget used to boost agricultural and economic activities.

In **Egypt**, the livelihoods and economic inclusion sector held a workshop with its partners to address legal barriers, that were hindering refugees' access to formal employment and opportunities in Micro, Small, and Medium Enterprises (MSMEs). The workshop provided a platform for partners to exchange insights on the current policy environment, explore potential solutions to enhance economic inclusion, and identify advocacy strategies to address these challenges. Despite these barriers, partners focused on building refugee and host community resilience through vocational training, skill development programmes, and socio-economic initiatives in Cairo, Alexandria, Aswan, Damietta.

In **Ethiopia**, livelihood interventions reached 810 individuals. 560 individuals benefited from livestock, training, and business coaching while 200 refugees in Ura settlement and 50 host community members, including 53 per cent of women, received in groups of 2 to 5 agricultural tools such as sickle, flat hoe, shovel, water cane and individual agricultural inputs (cereals and vegetable seeds, fertilizers etc.). Given the limited resources, life-saving activities were prioritized.

In **Libya**, IOM, in collaboration with the Rabianah Women Empowerment Office and the Ideal Women Foundation, organised a bazar for families in Alkufra, showcasing products made by Sudanese men and women. The event was joined by approximately 150 Sudanese and 400 host community members, and it was an artistic celebration of creativity, empowerment and a sense of community.

In **South Sudan**, RRP partners extended their reach to refugees in Maban, Jamjang, Yambio, Aweil, and Juba, focusing on economic and financial empowerment initiatives that have benefited 11,227 individuals in need. A total of 5,280 individuals received support in agriculture and livestock production. This assistance included the distribution of seeds, farming tools, fishing kits, poultry, and tillage services. Additionally, beneficiaries gained access to poultry pens, tractors, and agricultural extension services.

By August 137 refugees (62 women and 75 men) were enrolled in various technical vocational training programmes. These programmes covered computer literacy, hairdressing, garment making, welding, and carpentry skills. The training facilities were further enhanced by providing ICT equipment, including 60 laptops, two printers, and two projectors, as well as the solarization of the ICT facility in Maban with an 8KWP solar system. 1,545 individuals (1,235 women and 310 men) participated in initiatives such as coaching for Village Savings and Loan Associations (VSLA), receiving revolving capitalization grants, entrepreneurship training, and business startup grants and kits. Furthermore, 92 refugees were supported in opening bank accounts with Equity Bank and enrolling in a credit scheme to access business capital.

The livelihood response also integrated environmental considerations by mainstreaming environmental protection and providing access to alternative briquette cooking energy. Additionally, solar-powered electric cooking stoves were provided to meet the energy needs of individual households and institutions. Altogether, these initiatives benefited 941 individuals (683 women and 258 men).

In **Uganda**, given the largely urban profiles of the Sudanese refugees, with one-third having university degrees, most of the Sudanese refugees needed support to access formal financial services and start-up capital to integrate into the local economy. As part of the Uganda National Financial Inclusion Strategy, two workshops were organized for Sudanese refugees in the Kiryandongo settlement and in Kampala, in order to facilitate access to financial services, self-reliance and resilience.



In the **Central African Republic,** RRP Partners distributed approximately 11,000 litres of fuel for vehicles and generators in the area of operation. Vehicles and generators were also maintained and repaired. Logistical arrangements enabled the protection monitoring and host family visits, community awareness campaigns on the prevention of GBV and other incidents and the hygiene promotion. Transportation was provided for domestic kits, 330,026 tons of food, bricks for 120 semi-durable shelter construction and sand for the closure of expired latrines in the Korsi site. Assistance was also extended to a partner in moving to its new offices and transporting relief supplies.

In Eastern **Chad**, 12,600 new arrivals were relocated from border areas to refugee sites, along with 3,842 tons of luggage and 165 animals. Despite flooding during the rainy season, which hindered road access to refugee sites, 18 containers

of core relief items (CRIs) worth USD 1.2 million were delivered to site. Telecommunications to remote areas of Farchana and Adré benefitted all partners in these localities.

In **Ethiopia**, connectivity was improved by installing VSATs in Tsore and Gondar, and a third one is in the process of being installed in Gende Wuha (Amhara region). These satellite communication systems were essential to ensure uninterrupted and secured communication for humanitarian responders, which was crucial for the efficient and effective delivery of aid and protection.

To support the humanitarian response, three 40 Mt trucks were deployed to Metema transit centre to deliver 246,240 pieces of soap, 40 plastic rolls and 3 rub halls. The current security situation in the Amhara region significantly hampered the movement of personnel and assistance.

In **South Sudan**, 28,648 refugees and asylum seekers were transported from the border to transit sites. Additionally, UNHCR relocated 3,197 refugees from transit locations such as Renk and Abyei to refugee-hosting areas across South Sudan. Relocation was expanded beyond Maban to Jamjang, Wedweil, and Yambio, enabling 4,424 refugees to relocate from Renk to Maban and Jamjang. Between January and April 2024 another 282 refugees were relocated to Maban, 1,359 to Jamjang, and 1,056 to Yambio.

Since the onset of the emergency, critical internet access and essential security communication services were provided to partners, the broader humanitarian community, and some refugees and asylum seekers. Reliable connectivity was established at the Renk transit centre, UNHCR Renk field unit, Wedweil refugee settlement, and Gorom refugee settlement, enabling over 500 humanitarian workers to access the internet and deliver essential protection services. Information Technology teams conducted missions to Renk, Aweil, and Wedweil, providing technical guidance for successfully implementing connectivity and security communication systems. A backup VSAT internet link was installed at the UNHCR office in Renk to enhance network performance and reduce downtime. Connectivity services were extended to the new transit centre to support registration activities. Also, Wedweil underwent critical infrastructure upgrades, including enhanced internet connectivity. Satellite-based radio communication systems were installed at the UNHCR offices in Renk and Aweil, significantly improving security communications.

In May 2024, the Government in **Uganda** announced a partial closure of Karuma bridge, which connects the West Nile and northern regions to the central region, allowing only light vehicles to operate along the route. This bridge is essential for the relocation of newly arrived Sudanese refugees from Adjumani to the Kiryandongo refugee settlement. Alternative routes were identified, but they were significantly longer and therefore more costly. To mitigate this financial burden, RRP partners reduced the frequency of relocation convoys and increased the capacity of the Nyumanzi reception centre to accommodate an anticipated longer stay for Sudanese new arrivals.

Settlement & Shelter/Housing

In the **Central African Republic** at the Korsi settlement in Birao, partners constructed 225 emergency shelters for newly arrived refugees and repaired 750 existing emergency shelters with new plastic tarpaulins following damage from the start of the rainy season. Partners also began the construction of 120 semi-durable shelters for the most vulnerable families, including people living with disabilities, single mothers, and older persons. Additional funding is required to construct more semi-durable shelters to meet needs of the most vulnerable families.

The **Chad** Red Cross (CRT) and the Economic and Social Development Agency (ADES) facilitated the construction of 9170 emergency family shelters. These efforts were concentrated primarily in the new Dougi refugee sites in Ouaddaï province and the extension areas of the Milé and Touloum refugee sites in Wadi-Fira Province. Approximately 16,712 refugees benefited from improved housing conditions.

In **Ethiopia**, 45 HAs of land in the Amhara region was provided by the government in Aftit to relocate refugees from Kumer and Awlala. The site development started in July 2024 with refugees in Aftit setting up 350 family tents previously used in Awlala and Kumer settlements. The shelter partner provided 68 additional tents for vulnerable families and six communal hangars. Additionally, 30 family tents were installed at the Gessan entry point (Benishangul Gumuz region) to accommodate potential new arrivals. The construction of 1.5 km access road and 4.4 km internal road within the Aftit settlement was ongoing. In the Benishangul-Gumuz region, the development of the new Ura settlement was on-going with the completion of 720 emergency shelters and the construction of a 2.2 km access road. On relocation to the Ura settlement, 1,297 individuals (421 households) received blankets, kitchen sets and sleeping mats.

SUDAN REGIONAL REFUGEE RESPONSE PLAN 2024 Progress Report, May-August 2024



In Libya, IOM distributed NFIs to 1,000 Sudanese refugees in Tripoli and 1,203 in Ajdabiya and 190 in Bani Waleed while UNHCR distributed NFIs to 2,399 Sudanese refugees in Alkufra and 674 in Benghazi. The main challenges included documentation as the local authorities only allowed refugees with Security Registration Cards to receive NFI assistance at a single distribution point. INGOs still unable to were access Alkufra for assessment and distribution and a local partner was deployed to undertake the work. authorities Libyan

Sudanese refugees sit in front of their shelter at the Kurmuk transit centre in the Benishangul-Gumuz region of northwestern Ethiopia. Credit: UNHCR/ Tiksa Negeri

maintained a strict no-camp policy despite shelter conditions in Alkufra and other locations being dire.

In **South Sudan**, RRP partners constructed 1,711 emergency household shelters and distributed 751 family tents, benefiting 13,822 refugees and asylum seekers, mainly in Jamjang, Maban, and Wedweil. In addition to emergency shelters, efforts were made to provide more durable solutions for the most vulnerable populations. 71 transitional shelters were constructed in Jamjang, benefitting 355 individuals. In Renk, nine communal shelters were constructed, and 37 existing ones were rehabilitated, increasing capacity to accommodate an additional 2,500 individuals in the transit centres. This intervention was critical in mitigating overcrowding and ensuring more adequate living spaces in transit. Additionally, RRP partners were regularly monitoring the situation in transit centre 1 and 2, releasing monthly service profiles available here. Complementing the shelter efforts, essential non-food items (NFIs) were distributed to 35,186 individuals. The distribution included vital items such as kitchen sets, dignity kits, assorted clothes, jerry cans, plastic sheets, solar lamps, and other core relief items (CRIs). Despite these achievements, challenges remain with an urgent need for shelters in Bulukat. Moreover, transit centres were in dire need of site improvements, including drainage works and dyke construction, to mitigate the impact of seasonal flooding and improve the resilience of shelter solutions.

In **Uganda**, partners supported new arrivals in Kiryandongo settlement to provide for their basic needs. Emergency shelter kits were provided (plastic sheeting, wooden poles and nails) to 25,087 individuals (5,017 households), ensuring 100 per cent coverage of new arrivals.

In line with the shelter strategy, every household settled in gazetted refugee settlements was allocated a plot of land for shelter and basic livelihood support. Due to underfunding, limited assistance was provided to Persons with Specific Needs in shelter construction. There were still no resources allocated for road rehabilitation and maintenance in the settlement.



At the Korsi settlement in Birao, in the **Central African Republic** partners constructed 159 emergency latrines and 71 emergency showers. Partners identified blocks most in need of additional latrines and preparations began for the construction of 92 semi-durable latrines. To expand access to potable water and decongest the existing three forages, partners started work on extension systems which will channel water to 18 kiosks across the settlement with a total of 80 faucet terminals. Additionally, preparations began for the construction of two water towers with tanks and a bladder which can store 50,000 additional litres of water. A total of 547 hygiene kits were distributed to newly arrived refugees, and community relay workers continued organizing awareness-raising campaigns about hygiene and sanitation, reaching on average, 750 people per week.



In Chad, safe drinking water was supplied to refugees at Adré, the six new sites, and extensions of eight older sites through water trucking and borehole construction. Refugees received an average of 12 litres per person per day, below the Sphere standard of 15-20 litres Boreholes and water distribution networks were expanded. including 15 new boreholes and 22,023 pipeline. meters of Despite these efforts. WASH infrastructure remains inadequate. with only 750 emergency latrines and

showers built. There is an increasing risk of waterborne diseases.

In **Egypt**, the WASH sector facilitated access to drinking water for 150,000 Sudanese who crossed the border between May and August 2024 (55 per cent female), also benefiting the cumulative number of approximately 500,000 Sudanese since the beginning of 2024. These services were provided at two border ports, and at the Karkar Bus Stop, where sanitation services were established for new arrivals. In July 2024, partners assessed WASH facilities in three public schools and provided two training sessions on health. These trainings benefited 20 staff members from the Ministry of Health (MoH) and 20 staff members from the Ministry of Education and Technical Education (MoETE), strengthening capacity in managing WASH.

In **Ethiopia**, the Regional Water Bureau of the government provided technical support and oversight in the development of durable water systems and capacity-building. In the camps located in the Benishangul-Gumuz region, where the preexisting Sudanese population are settled, the average litres per person per day of potable water collected at the household level for the 80,692 refugees was 14.42 litres, which is much lower than the post-emergency standard of 20 litres/p/d. In transit centres and newly established settlements, 46,873 recently arrived Sudanese refugees received an average of 10.1 litres of water per person per day, still below the 15 litres per person recommended in emergency situations. Water was supplied through water trucking until more sustainable solutions are possible. Overall, for the Sudan response, RRP partners were able to provide an average of 12.07 litres of potable water per person per day.

During the reporting period, 500 additional household latrines were constructed in Bambasi camp bringing the access to household latrines to 40 per cent in the Benishangul Gumuz region. In the transit centres and settlements access to communal latrines was measured at 109 users per stance. In addition, 7,606 refugees each received 500 grams of laundry soap upon relocation to the Aftit settlement.

In **Libya**, the risk of outbreaks of waterborne diseases in refugee sites rapidly increased, which posed significant public health risks to refugees and local communities. An operational plan for Alkufra was developed, and partners and the local authorities, despite limited resources and access challenges, stepped up the response. UNICEF procured water supply materials, including pumps and water purification tablets, while other partners procured mobile latrines and other supplies to improve the WASH situation in Alkufra.

In **South Sudan**, safe drinking water was provided at all transit and reception sites through emergency water treatment systems, water trucking, and borehole rehabilitation. Efforts were ongoing to repair the water systems in Renk town. The average per capita water supply was 18 litres per person per day, which falls within the emergency threshold, however, Maban had the lowest supply, at just 14 litres per person, due to the impact of floods. More resources were needed to expand the water supply system and improve water treatment capacity to ensure a consistent and safe water supply for all refugees.

Emergency sanitation facilities were installed, but the latrine coverage stood at just 24 per cent, with an average of 29 people per latrine, due to serious gaps in funding for the construction, operation, maintenance, and desludging of sanitation facilities. RRP partners successfully advocated for borehole drilling and solarisation projects to address these issues, reducing water trucking costs. However, additional boreholes were urgently required to meet the needs of the growing refugee population in the refugee-hosting areas. Insufficient resources for WASH services, including non-food items (NFIs) and menstrual hygiene management kits, in transit centres, elevated the risk of waterborne disease outbreaks.

In **Uganda**, with the large influx of Sudanese refugees, the water system of Kiryandongo settlement was in a critical situation. Access to safe water has severely degraded, from 17 litres per person per day in January 2024 to less than 10 litres per person per day in August 2024. UNHCR and LWF increased the water supply to 11.5 litres/person/day through the emergency motorization of a borehole which was connected to two tanks of 10,000 litres each. UNICEF has mobilized additional funding to support improving the water system in that settlement. Partners conducted five environmental health and hygiene campaigns in Kiryandongo reaching approximately 5,972 new arrivals. These sessions helped prevent disease outbreaks, improved health outcomes and fostered a sense of ownership while protecting environmentally sensitive resources.

Regional Cross-Cutting Response



Participation and Inclusion

In **Ethiopia**, a participatory assessment was completed in May 2024 in all locations hosting refugees in Ethiopia, with a total of 4,879 respondents. According to the assessment, Sudanese refugees with disabilities in the Amhara and Benishangul Gumuz regions reported major challenges such as long distances to food distribution points and other facilities, limited access to basic services, and anxiety, stress, and trauma.

In **Libya**, focus group discussions with the Sudanese community and newly arriving refugees enabled timely targeted assistance. Community-based care arrangements were operational, providing support to individuals with heightened protection needs including unaccompanied and separated children and women at risk.

In **South Sudan**, RRP partners conducted a series of community consultations and Key Informant Interviews in Maban, Jamjang, Yambio, and Juba. These consultations allowed refugees to share their feedback on food targeting and prioritization strategies. RRP partners also conducted participatory assessments across all refugee hosting locations engaging with youth, older persons, male and female to gain a better understanding of the specific needs and suggested future programmes.

Transparency and Communications

In **Chad**, 36 awareness sessions were held to familiarize 5,933 refugees on accountability, free humanitarian services, zero tolerance for sexual abuse and exploitation, and upholding refugee rights and responsibilities.

Standard Operation Procedures (SoP) on Communication and Transparency were developed by UNHCR in **Egypt** and apply to sectors and sub-sectors, as one of the key areas of engagement related to communication with communities, according to the Age, Gender, and Diversity (AGD) policy, and the Accountability to Affected Population (AAP) framework.

Community meetings were held at the UNHCR-Terre des Hommes multi-purpose community centres across Greater Cairo, and an informative brochure was developed to explain the services offered to refugees, including legal clinics, digital space, services for persons with disabilities and youth programs.

In **Libya**, the UNHCR Help Page provided information on the procedures, available assistance and services as well as individual agencies' hotlines and communication channels.

In **Uganda**, awareness of access to the UNHCR Uganda HELP Page was also promoted in addition to leaflets on the prevention of fraud and corruption being circulated.

Feedback and Response Mechanisms

In the **Central African Republic**, the Center for Feedback and Information was operational, through which refugees inquired about services and gave feedback or made complaints. Complaints were received, recorded and communicated to the relevant stakeholders. More than three-fourths of these complaints were responded to, and feedback meetings were organized to discuss satisfaction of the responses.

In **Chad**, 2,855 complaints and requests for information, mostly from women, were collected through Information and Feedback Centres. These included 1,540 information requests and 1,289 assistance requests. 1,663 complaints were processed, with 80 per cent benefiting from face-to-face responses, online feedback being provided for 590 complaints, and 626 were still under review.

In **Egypt**, a systematization form developed by the protection working group, was used to collect feedback from the refugee community following participatory dialogues. The social cohesion tool was shared with the community, and participants were encouraged to brainstorm the definitions of social cohesion and social tension contextualized in Egypt.

In **Ethiopia's** Amhara region, refugee complaints were primarily received through the protection service line with approximately 20 calls responded each month. The queries mainly concerned the security situation, food distribution, health referrals, and complementary pathways. In the Benishangul-Gumuz region, feedback and complaints were primarily received through protection counselling, as complaint boxes were rarely used and phone lines were ineffective due to poor network coverage. In the Ura settlement, regular meetings were held by RRS and UNHCR with the Refugee Representative Committees (RRC), block leaders, and focal persons representing youth, children, women, and people with disabilities to support various activities and gather feedback.

RRP partners continued to harmonize Feedback and Response Mechanism (FRM) tools and ensure the interoperability of FRM information. Additionally, a desk review for all partners Feedback and Response Mechanism Standard Operating Procedures (SOPs) and policies began in August 2024. In the Kurmuk transit centre, Benishangul Gumuz region, a KOBO Community-Based Feedback Mechanism tool was used during general food distribution to record community complaints.

In **Libya**, a multi-channelled Complaint and Feedback Mechanism (CFM) allowed refugees to communicate their needs and to be referred for services.

In **Uganda**, protection desks, complaints/suggestions boxes, the inter-agency Feedback, Referral and Resolution Mechanism (FRRM) were activated in Kiryandongo settlement.



Protection from Sexual Exploitation and Abuse (PSEA)

In the **Central African Republic**, a capacity-building session for members of the PSEA Network on protection from exploitation targeted 32 humanitarian actors from 19 organizations. Awareness sessions were also held on World Refugee Day in June for 89 Sudanese refugees.

In **Chad**, 123 awareness sessions on PSEA were held for 10,457 refugees (70 per cent women, 24 per cent men, 6 per cent children). Three PSEA coordination network meetings addressed partner capacity risks. A workshop held in August brought together 72 participants to review the national Standard Operating Procedures for PSEA, focusing on referral pathways, reporting mechanisms and accountability mechanisms. The workshop participants recommended involving religious leaders, increasing PSEA message visibility, and training Peacekeeping contingents before deployment.

In July 2024, IOM and UNHCR, the co-lead agencies for the PSEA Network in **Egypt**, organized the annual retreat for its members. The main issues discussed during the workshop were a PSEA refresher training, the application of the Inter-Agency SEA Risk Assessment (IARA), which is a tool designed to identify, analyze, and manage potential risks of sexual exploitation and abuse, particularly in the humanitarian and development work, and the inter-agency complaints referral system. Network members jointly finalized the SEA risk register for Egypt.

In **Ethiopia**, training on PSEA was conducted for 76 government officials, partner staff, social workers, volunteers, and the community-based child protection committee in Metema and Kurmuk transit centres. Additionally, 1,309 refugees and asylum seekers were engaged in mass awareness sessions on SEA across the operation.

All RRP partners in **Libya** have identified PSEA focal points and the different agencies organized PSEA training for their staff during the reporting period. Sexual Exploitation, Abuse and Harassment (SEAH) risk mitigation measures were mainstreamed in all Task Forces' activities, and a complaint mechanism was set up.

In **South Sudan**, RRP partners implemented regular awareness campaigns reaching over 17,895 individuals with dissemination of over 1,266 posters and banners in English and Arabic with key messages on GBV and PSEA prevention and response. Capacity-building efforts include the training of 182 staff of RRP partners and monthly coordination meetings of the PSEA task force's in Maban, Jamjang, Renk, Yei, Bentiu, and Torit.

In **Uganda**, further to a country-wide Training of Trainers completed in mid-2024, PSEA Focal Points organized PSEA refresher sessions for RRP partners and refugees in Kiryandongo. These sessions provided information on the identification and reporting of SEA cases and responding to incidents.



Cash-based interventions (CBI)

In the **Central African Republic**, for the month of August, due to road inaccessibility of the Vakaga during the rainy season, partners transitioned to a cash-based food security approach, serving 9,884 refugees. This modality will be continued until the end of the year when the roads reopen. Additionally, an RRP partner completed two distributions of cash to a total of 2,196 people including 1,585 refugees and 611 returnees complementing the monthly rations, allowing families at most risk of malnutrition to supplement their monthly rations. Protection partners provide cash assistance to 155 vulnerable women and men to support them to cover basic needs.

In **Chad**, UNHCR and partners provided livelihood support to small farmers in the framework of livelihoods and socioeconomic inclusion. A total of 4,071 households, approximately 25,063 individuals, received a one-off cash transfer for rainy season agriculture activities, with 30 per cent of participants targeted from the host community. More than 400,000 refugees received WFP cash transfers for food assistance.

In **Egypt**, the CBIs sector partners provided one-time Emergency Cash Assistance (ECA) to 684 unregistered newly arrived Sudanese individuals at the border in Aswan as well as bi-monthly Multi-Purpose Cash Assistance (MPCA) to 18,365 new Sudanese individuals. Sector partners provided cash for transportation to 735 Sudanese people from Aswan to Cairo, and a three-month MPCA to 4,652 Sudanese individuals in Cairo, who did not receive any cash assistance at the border. Partners collaborated closely through the de-duplication task force under the CBI Working Group to avoid duplication of assistance based on data sharing.

In **Ethiopia**, over the past four months, multi-purpose cash assistance has been successfully distributed to a total of 270 individuals in Kumer settlement and Kurmuk transit center. This initiative specifically targeted refugees from Sudan, following a comprehensive nutrition and food security assessment. This multi-purpose cash assistance provided crucial support to the most vulnerable groups, including persons with disabilities, unaccompanied and separated children, older persons, survivors of gender-based violence (GBV), large families, families with malnourished children, and pregnant women.

In parallel, a verification exercise and vulnerability assessments targeted approximately 300 spontaneous Ethiopian refugee returnee households returning from Sudan in the Tigray region. This was done to ensure that assistance is directed towards those most in need. Significant strides were made to implement a hybrid approach to food assistance that involved substituting in-kind food assistance with cash support for Sudanese and other refugees in the Benishangul camps. However, the distribution of cash assistance faced several challenges given the recent currency devaluation, inflation and lack of security that impacted safe distribution. Other concerns were cash liquidity shortages at financial service providers and difficulties with obtaining civil documentation necessary for verification purposes.

In **Libya**, emergency cash distribution was impacted by political challenges hindering international financial service providers from operating as well as the longstanding cash liquidity issues in the country. Furthermore, the identification of beneficiaries for emergency cash assistance is hampered by the restrictions on registering refugees in Alkufra and the east, where the vast majority of refugees are arriving.

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South Sudan. In through the coordination of the sub-national Cash Working Group in Renk, cash provided assistance was to approximately 176,223 individuals. In the Maban camps, 4,218 refugees, including 2,152 newly arrived refugees, received cash assistance for sanitary napkins. Additionally, in Upper Nile State, 80 asylum seekers benefited from multi-purpose cash. A national NGO, SADOO, delivered cash assistance to 4,550 beneficiaries in the Wedweil Refugee Settlement.

In **Uganda**, from May through August 2024, some 7,600 Sudanese families were provided with unconditional cash grants to support them to settle in Uganda. The average transfer value was UGX 320,000 (USD 86) per family and was calculated based on family size and prices of basic household items and

shelter materials in the local market. The refugees reported spending their money on priority items, including (in order of priority): food, shelter, water, transport and health.

Localization

Out of 86 partners in the RRP, one-third (28) are national organizations.

In the **Central African Republic**, despite not being individually listed in the RRP, national organizations were integral to the response, working with appealing partners to reinforce capacity and carry out joint evaluations and activities, particularly in protection, shelter, nutrition security, and WASH.

In **Chad**, the 23 RRP partners, including national NGOs worked closely with the local authorities to select land for the new refugee site and to plan the sites for returnees.

In **Egypt**, the participation of six national NGOs and one Refugee Led Organization in the RRP process, improved social cohesion across all sectors and sub-sectors ranging from education, WASH to livelihoods and job opportunities, local NGOs played a catalytic role in the refugee response especially in border areas for new arrivals providing humanitarian assistance and sharing information and data by liaising with the refugees and host communities.

In **Ethiopia**, in addition to the four RRP-appealing national partners, other national NGOs, government authorities, refugee representatives and associations, incentive workers and volunteers facilitated various services such as water and sanitation, protection, awareness campaigns on health, GBV, and child protection. International and national organizations provided training to enhance the capacity of local communities and government officials. The Government took steps to integrate refugees into national education and health care systems. Local authorities, host communities and regional governments were among the first responders, providing basic services at the border areas and transit centres during emergencies and continuing to support the response. As the situation remains dynamic and challenging, with major security concerns in the Amhara region hampering personnel movements, the need for localization of protection and assistance increased.

In **South Sudan**, four refugee-led organizations actively contributed to the humanitarian response across Magbi, Yei, and Juba, primarily focused on enhancing self-reliance. In addition to self-reliance initiatives, these organizations were implementing a project on Education and Drama for Peace, using drama as a tool for education and fostering peace in Renk. Six additional refugee-led organizations were identified and were working to expand their outreach in Juba, Wau, and Western and Eastern Equatoria. These initiatives exemplified best practices in humanitarian response by empowering refugee-led organizations and ensuring refugees take a leading role in driving sustainable solutions for their communities.

In **Uganda**, international NGOs partnered with local NGOs to provide protection and assistance to Sudanese refugees under the STEPS Consortium. STEPS is funded by the European Union Civil Protection & Humanitarian Aid (ECHO) and led by CARE Uganda in collaboration with War Child Uganda. STEPS aims to strengthen a locally led multi-sectoral consortium to deliver life-saving protection and assistance.

Climate Action

In Birao in the **Central African Republic**, solar installations in the Korsi settlement provided sustainable energy in one of the three water boreholes. RRP partners began preparations to reinforce solar energy in the other forages, which will replace one generator-powered forage with solar installations, install two solar pumps, and add additional solar panels to the existing installations.

In Eastern **Chad**, to mitigate the environmental impact of the massive influx of refugees, a workshop with partners and local authorities worked on the adoption of a strategy and action plan to improve access to energy, promote environmental preservation, and reduce conflicts over natural resources in the east of the country.

In **Ethiopia**, Sudanese refugees and asylum seekers residing in the Benishangul-Gumuz and Amhara regions remain dependent on the natural habitat for cooking and lighting energy, leading to conflicts with the hosting communities. However, progress was made on improving energy provision to institutions with three electric grid-powered communal kitchens operational in Sherkole refugee camp, benefiting close to 300 households. The Benishangul-Gumuz Regional Natural Resource Development and Environmental Protection (NRDEP) Bureau distributed sustainable fuelwood to 35,860 Sudanese refugees and 125,000 tree seedlings were planted to replenish woodlots. In the newly established Aftit settlement, ten solar streetlights were installed and the procurement of additional 164 solar streetlights was underway.

In **South Sudan**, RRP partners actively engaged refugee community groups in managing tree nurseries across Maban, Jamjang, and Makpandu with a production capacity exceeding 100,000 seedlings. These efforts supported both reforestation and biodiversity conservation in refugee-hosting areas. Various approaches were being implemented, including agroforestry, woodlot plantations, and tree planting at household and institutional levels, encouraging the growth of fruit-bearing and shade trees. Six community disaster preparedness committees engaged in flood preparedness activities and early warning systems. RRP partners worked with them to rehabilitate dikes and road networks to strengthen resilience against climate-induced disasters.

RRP partners advanced climate action by promoting sustainable and clean cooking solutions. This included the distribution of 50 ECOCA institutional solar electric cookers at four health facilities in Maban, with installations currently underway. In addition, commercial distribution campaigns marketed 50 subsidized solar e-cooking kits at the community level. Over 34 women were supported to produce over 700 kg of carbonized briquettes, which were then distributed to 600 households identified as having heightened protection risks.

Partnership & Coordination

As outlined in the Refugee Coordination Model (RCM), for the response to the Sudan emergency, together with government counterparts, UNHCR leads or co-leads refugee coordination structures that include high-level refugee coordination fora and sectoral as well as cross-sectoral working groups at the country level in the Central African Republic, Chad, Egypt, Ethiopia, Libya, South Sudan and Uganda on protection (with sub-sectors for child protection and GBV), WASH, public health and nutrition, shelter, settlements and housing, food security, livelihoods and economic inclusion, humanitarian transportation, PSEA and others depending on the country context. Throughout the response, UNHCR ensured that joint assessments, monitoring and reporting on progress, communication and information-sharing tools were put in place in coordination with governments and RRP partners.

Harmonizing and coordinating different interventions by all stakeholders was essential to maximize benefits for the people assisted through this plan. Humanitarian, development and peacebuilding actors worked together to strengthen to secure predictable, multi-year development financing in support of the regional Sudan crisis. The African Development Bank, the World Bank and EU INTPA continued with their engagement in Chad, South Sudan and Ethiopia. UN-Habitat also conducted support missions to all three countries, with the view to supporting efforts to plan integrated settlements as part of the emergency response to the Sudan crisis.

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Notes: This list only includes appealing organizations under the RRP, many of which collaborate with implementing partners to carry out RRP activities.

Funding

The 2024 Regional Refugee Response Plan (RRP) for Sudan is an appeal for USD 1.5 billion for a projected population of 3.3 million people that includes 2.6 million refugees, 97,300 returnees, 8,100 third country nationals and 566,500 members of the host populations in surrounding areas. 86 unique partners across seven countries supported government-led efforts in assisting these refugees, returnees and vulnerable host community members. The RRP was just 22 per cent funded by the end of August, leaving critical gaps in the response across several sectors in the different asylum countries. Further information on the funding levels of the response is available on the <u>Refugee Funding Tracker</u>, which tracks interagency funding levels of the response.

Funding Details by Country

	Country	Requirements	Funding	Gap	Targeted Population	# of partners	Funded	Gap
	Chad	\$630,286,512	\$158,038,431	\$472,248,081	1,407,305	23	25%	75%
•	South Sudan	\$372,952,554	\$60,779,673	\$312,172,881	537,000	42	16%	84%
<u>8</u>	Egypt	\$183,142,076	\$57,117,732	\$126,024,344	719,456	27	31%	69%
	Ethiopia	\$175,759,980	\$31,404,670	\$144,355,310	224,064	25	18%	82%
	Uganda	\$50,865,892	\$11,836,508	\$39,029,384	162,200	9	23%	77%
6	Libya	\$48,610,000	\$10,365,957	\$38,244,043	195,000	17	21%	79%
Ŧ	Central African Republic	\$46,173,991	\$8,299,258	\$37,874,733	71,176	10	18%	82%

Please note: Data is as of 4 Sept 2024. Source: Refugee Funding Tracker

RRP partners gratefully acknowledge government donors, private donors, charities, and other organizations for their contributions to RRP 2024 and urge all donors and organizations to increase funding contributions. RRP partners also acknowledge the significant generosity of the host countries to Sudanese refugees.

2024 Regional RRP Donors¹¹

Australia (Gov)	Ireland (Gov)	Switzerland (Gov)
African Development Fund	Japan (Gov)	The Global Fund (Gov)
CERF	Jersey	United Arab Emirates (Gov)
Country-based Pooled Funds	Philippines (Gov)	United Kingdom (Gov)
Denmark (Gov)	Private donors	United States of America (Gov)
European Union	Saudi Arabia (Gov)	Allocations from flexible funding
France (Gov)	Spain (Gov)	
Germany (Gov)	Sweden (Gov)	
Allo	cations from flexible funding*	
Algeria	Japan for UNHCR	Peru
Angola	Joint United Nations Programme on HIV/ AIDS	Poland
Australia for UNHCR	Luxembourg	Private donors in the Republic of Korea
Belgium	Malta	Republic of Korea
Canada	Mexico	Russian Federation
China	Monaco	Saudi Arabia
Conflict-Related Sexual Violence MPTF	Montenegro	Serbia
Costa Rica	Netherlands	Singapore
Espaňa con ACNUR	New Zealand	Switzerland for UNHCR
Estonia	Northern Ireland (Great Britain)	Thailand
Finland	Norway	Türkiye
Italy	Private donors	UNO-Flüchtlingshilfe

In addition, these donors also provide unearmarked or softly earmarked funds used for the Sudan situation: Australia, Denmark, Sweden, France, Germany, Ireland, Japan, Philippines, Spain, Switzerland, United Kingdom and the United States of America.

¹¹ The list of donors is mostly drawn from the refugee fund tracker 27

2024 RRP Monitoring framework (May – August RESPONSE)

	Sector	Indicator	Central African Republic	Chad	Egypt	Ethiopia	Libya	South Sudan	Uganda	Total
		# of people registered on an individual basis	6,216	80,885	147,656	N/A	5,062	29,321	38,980	308,120
		# of people who received protection services	14,404	N/A	14,662	N/A	3,439	6,318	2,092	40,915
	Protection	# of people transported from border crossings to final destinations	N/A	10,721	NA	N/A	NA	28,648	NA	39,369
		Proportion of people who have access to safe feedback and response mechanisms	100%	35%	N/A	N/A	100%	N/A	N/A	78%
5	Sub-sector: Child	# of children who received child protection services	232	41,006	31,869	8,835	2,670	2,768	N/A	87,380
II	Protection	# of unaccompanied and separated children	80	455	696	1,154	161	1,653	10	4,209
	Sub-sector: GBV	# of identified GBV survivors and persons at risk assisted with appropriate support (including dignity kits, life-saving services, psychosocial support, case management, referral)	N/A	4,300	9,947	404	5,185	1,377	63	21,276
		# of people reached through GBV prevention activities	N/A	150,404	9,075	1,420	5,987	603	48	167,537
2 =	Basic Needs	# of people benefitting from the multipurpose cash assistance (CBI)	2,196	N/A	50,009	270	868	6,235	N/A	59,578
×=		# of people supported with emergency transportation cash allowance	NA	NA	684	2	NA	NA	NA	686
	Education	Proportion of children enrolled in primary education	39%	77%	30%	97.5%	N/A	47%	N/A	58%
		Proportion of children enrolled in secondary education	2%	4%	27%	11.7%	N/A	12.7%	N/A	11%
		Proportion of children and youth engaged in formal and informal educational activities	27%	36%	57%	N/A	11%	66%	N/A	39%

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	Food security	# of people receiving food assistance (in-kind/CBI/hybrid)	12,200	448,511	78,194	92,417	4,235	157,056	31,553	824,166
इं	Public Health & Nutrition	# of individuals received primary health care consultations	3,884	113,866	11,355	21,181	33,230	100,473	38,404	322,393
		# of births attended by skilled health workers	61	5,140	NA	496	NA	1,730	2,209	9,636
		# of children below 5 years of age screened for malnutrition	903	355,327	2,477	903	NA	14,823	14,002	388,435
\$}}. • • •	Livelihoods & Economic Inclusion	# of people who received livelihood support (productive assets, training and/or business support in cash or in kind)	1,854	12,369	155	810	N/A	11,227	N/A	26,415
	Settlement &	# of emergency shelter provided/maintained	975	9,170	NA	1,090	14	2,462	N/A	13,711
Î	Shelter/Housing	# of people who received non-food items	4,540	55,604	NA	7,617	14,580	35,186	N/A	117,527
فيا	WASH	# of people per communal toilet/latrine	86	19	NA	94	NA	29	N/A	57
		Average # of litres of potable water available per person per day	13	12	15	12	N/A	18.5	N/A	14
Control of the second s	Partnership	# of RRP partners able to deliver in the response	10	23	27	25	17	42	9	86

NA denotes the indicator is not applicable to the response in that country.

N/A denotes no submission for the indicator.

* UN agencies and some international NGOs are operational in more than one country but are counted only once as a partner in the RRP although their interventions may vary by country.

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