

SUDAN EMERGENCY REGIONAL REFUGEE RESPONSE

**Mid-Year Progress Report
January-June 2025**



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 [Sudan Situation Portal](#).

COVER PHOTO

Feirus Deng was in Khartoum when the conflict broke out and along with her family had to leave behind most of their belongings as they fled for safety. After days of perilous travel, they eventually arrived in Renk, South Sudan. Despite the sudden upheaval, she managed to carry a cherished photo of her family. © UNHCR/Reason Moses Runyanga

Contents

| | |
|---|----|
| Sudan Situation Regional Overview (key figures) | 3 |
| Regional Overview (narrative) | 5 |
| Situation Overview | 5 |
| Highlights and Achievements | 6 |
| Sectoral Responses | 8 |
| Regional Cross-Cutting Response | 29 |
| Monitoring framework (January-June 2025 response) | 42 |
| Monitoring framework – AGD breakdown (January-June 2025 response) | 44 |
| Partnership & Coordination | 45 |
| Consequences of Underfunding | 46 |
| Funding | 48 |
| Sudan Regional RRP Partners | 49 |
| Regional RRP Donors | 52 |



AT A GLANCE

Sudan Situation Regional Overview

Arrival figures as of 30 June 2025



4 M

Sudanese Refugees and
Refugees of Other
Nationalities*



21.6 K

Returnees**



1.3 K

Third Country Nationals***



323 M

18% Funded



111

Partners****

| Region | Funding received***** in million USD | Partners |
|--------------------------|---|----------|
| Central African Republic | 7.5 | 10 |
| Chad | 131.3 | 35 |
| Egypt | 43.8 | 29 |
| Ethiopia | 37 | 24 |
| Libya | 25.1 | 20 |
| South Sudan | 56.4 | 47 |
| Uganda | 8 | 31 |

* The refugee figure includes 800,000 Sudanese refugees hosted in neighbouring countries prior to April 2023.

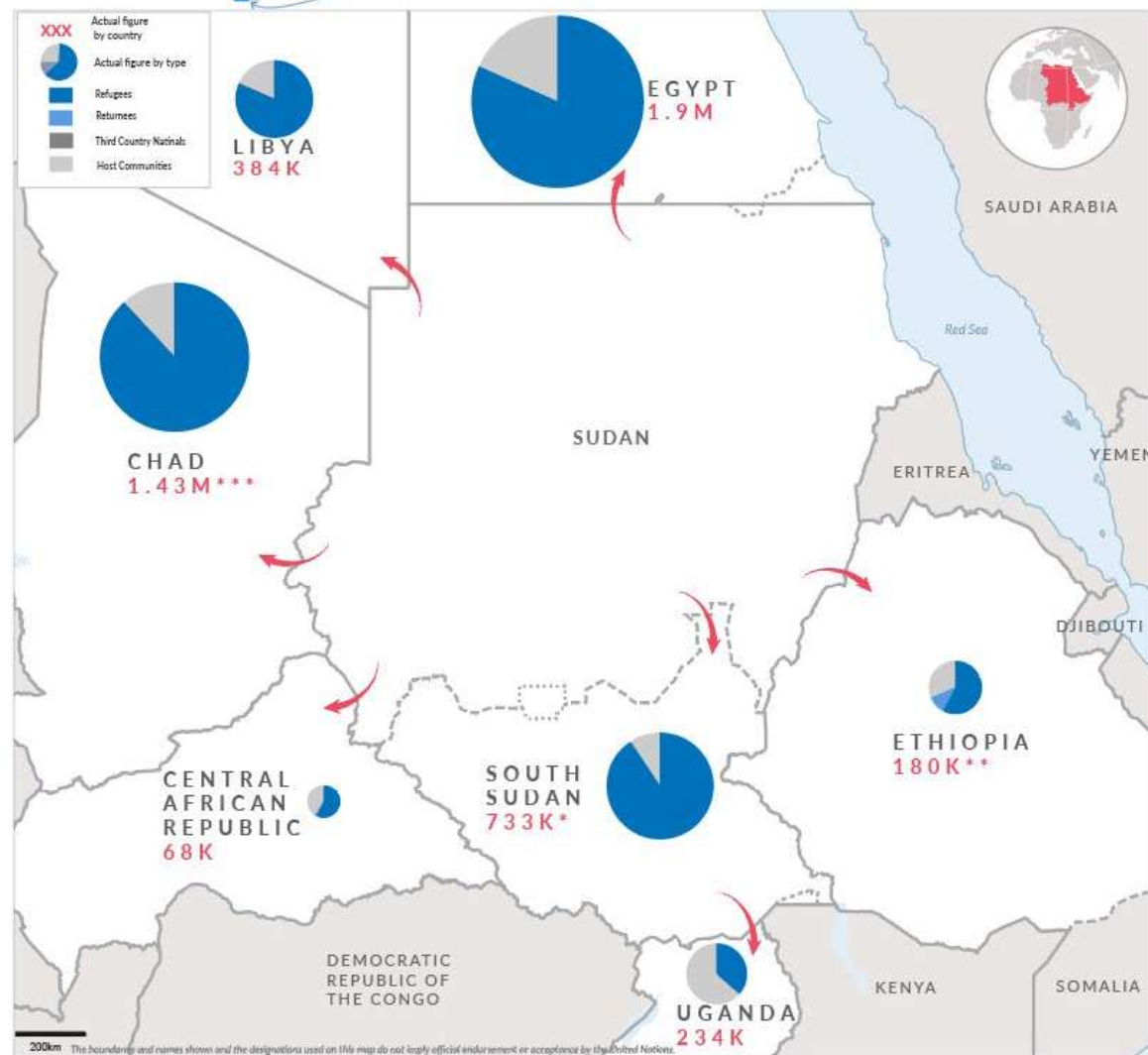
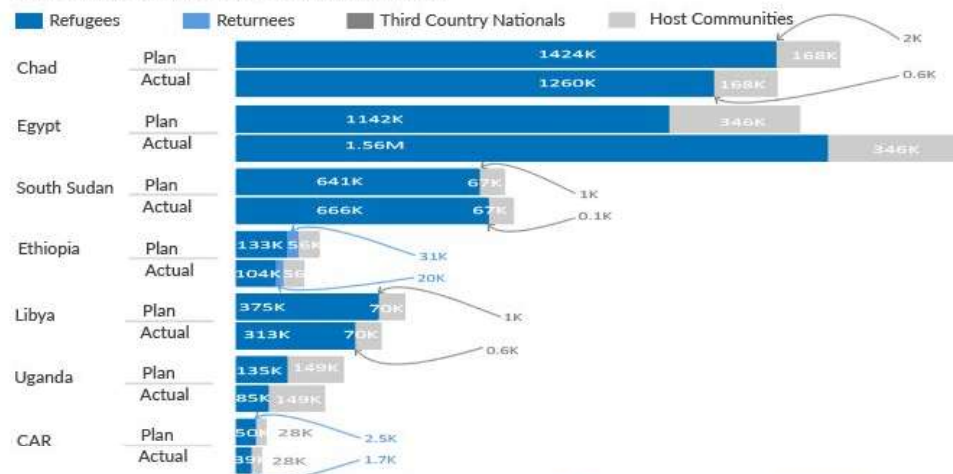
** The returnee figure includes refugees who were hosted in Sudan and are now returning to their countries of origin. This is the cumulative figure for 2024- 25 for only Ethiopia and CAR as the larger number of returnees to South Sudan and Chad are part of the HRP in those countries and are not included in RRP.

*** The Third Country National represents the arrivals of 2025.

**** 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 [Refugee Funding Tracker](#).

 **4,933,300** Total figures
 **4,027,200** Total Refugees (Sudanese and other nationalities)
 **21,600** Total Returnees (refugees and migrant returnees)
 **1,300** Total Third Country Nationals
 **883,200** Total Host Communities

Total figures as of 30 June 2025 | in thousands



* 461,000 returnees in South Sudan (2024 arrivals & 2025 planning figures) are not included in the Sudan RRP and are part of the South Sudan HRP.
 ** 20,000 migrant returnees and 1,000 TCNs projected to arrive in Ethiopia are not included in the Sudan RRP; they are included in IOM's Response Overview for the Sudan Crisis and Neighbouring Countries.
 *** 301,700 returnees in Chad (2024 arrivals & 2025 planning figures) are not included in the Sudan RRP and are part of the Chad HRP.

Population Figures

| Region | Planned population as at end 2025 | Actual Population figures as of 30 June 2025 |
|-------------------------|-----------------------------------|--|
| Refugee Population | 3,900,967 | 4,027,185 |
| Returnee Population | 33,157 | 21,626* |
| Third Country Nationals | 4,000 | 1,264 |
| Host Community | 883,200 | 883,200 |
| Total | 4,821,324 | 4,933,275 |

* This is the cumulative figure for 2024- 25 for only Ethiopia and CAR as the larger number of returnees to South Sudan and Chad are part of the HRPs in those countries and are not included in RRP.

Regional Overview

Situation Overview

The Sudan crisis is the largest displacement and protection emergency in the world today. It has triggered the fastest-growing displacement crisis globally, with over 12 million people forced to flee since April 2023, including over 3.2 million refugees and asylum-seekers who have crossed borders into the Central African Republic (CAR), Chad, Egypt, Ethiopia, Libya, South Sudan, and Uganda. This is not just a Sudanese crisis. It is a regional emergency with global implications. The ripple effects are being felt across an already fragile region, placing enormous strain on host communities, local services, and humanitarian operations.

The emergency needs a much stronger international response, including renewed efforts to support peace and practical solutions for people on the move. Numbers continue to increase as the fighting and displacement continue, particularly in various locations across the Darfur regions and the Kordofan states, with conflict in the form of drone strikes also reaching Port Sudan, a critical hub for humanitarian operations.

[Return movements](#) to pockets of relative safety in Sudan mark a hopeful but fragile shift, as some families return home, determined to rebuild their lives after months of relentless conflict. The scale of returns mainly from Egypt and South Sudan, with smaller numbers from Libya, are also a warning sign of rising pressure and shrinking options for the Sudanese people with significant regional implications. Significant refugee and IDP return movements are returning to adverse conditions that could potentially lead to secondary displacement in and out of Sudan.

Regional Refugee Response Plan (RRP) partners are present and delivering in accessible areas in the seven refugee hosting countries, but the response is below humanitarian standards in many locations. Humanitarian needs are mounting, yet funding has not kept pace. Critical protection, health, and education services are being suspended or drastically scaled back, placing millions at risk and eroding RRP partners' ability to respond under dignified conditions and at scale. In Egypt and South Sudan, protection services for new arrivals are being scaled down or suspended. Relocation of refugees away from the extremely congested border areas and transit centres in Chad and South Sudan cannot continue without more funding, risking outbreaks of disease, and more exposure to protection risks, like gender-based violence. These cuts are weakening frontline capacity, increasing protection risks, and eroding community trust, with long-term consequences for regional stability.

To mobilize and support efforts by development partners to respond to the Sudan emergency, UNHCR and UN Development Coordination Office (UNDCO) have established a [Development Partners Group for the Sudan Regional Refugee Crisis](#) which meets bi-annually. In addition, the first dedicated development partners meeting on the situation in Eastern Chad and the government's National Response Plan took place on 25 June. These initiatives are in line with UNHCR's commitment to pursue "solutions from the start" of an emergency.

The magnitude, gravity and suddenness of funding cuts in the first quarter of 2025 have forced the humanitarian community to hyper-prioritize its response efforts as part of the humanitarian reset exercise. RRP partners worked

together to determine ‘what needs to be done first’ and this is reflected in a hyper-prioritization factsheet for the [Sudan](#) situation where US\$1 billion was identified as priority requirements out of the total RRP US\$1.8 billion appeal.

The Mid-Year Progress Update of the 2025 Sudan Regional Refugee Response Plan (RRP) covers Central African Republic, Chad, Egypt, Ethiopia, Libya, South Sudan and Uganda, reflecting the efforts to respond with lifesaving and in tandem, resilience building interventions for a projected 4.8 million people including refugees, returnees (both refugees and migrants), third country nationals and host communities. The projected number of new arrivals to be assisted for 2025 in Libya has increased from 175,000, bringing the total planning figure to 550,000; however, partners do not anticipate being able to reach more than the figures originally planned and budgeted for. As of June 2025, the RRP was 18 per cent funded.

Highlights and Achievements

January-June 2025



Central African Republic: The ongoing conflict in Sudan had displaced 45,250 people into the Central African Republic by June 2025, including 38,835 Sudanese refugees and 6,360 Central African returnees. Women and children make up 85 per cent of refugees. A significant increase in influx to Birao, Vakaga prefecture - averaging 1,633 new arrivals per month - was observed during the first half of 2025. The influx decreased in June due to the onset of the rainy season restricting road access. Of the new arrivals, 12,140 Sudanese refugees remain in hard-to-reach areas in Bamingui-Bangoran, Haute-Kotto, Ouaka, Mbomou, and Haut-Mbomou.

Security in refugee-hosting areas remains extremely volatile, especially in the Mbomou and Vakaga prefectures. In the Korsi refugee neighbourhood of Birao, the registered refugee population reached 26,695 individuals from 10,658 households. The government and RRP partners continue to coordinate and provide humanitarian assistance, including food, shelter, health, WASH, cash assistance and protection services, although funding cuts have severely further strained the already limited services.

Chad: The relocation of new arrivals from border areas progressed, though with financial and logistical constraints, with authorities reaffirming access for humanitarian purposes. Advocacy for donor mobilization and launching a national response plan remained a priority, reinforcing Chad's role in regional stability and refugee protection. A number of donors and partners, including UN partners, government of Chad, and various diplomatic missions visited the operation from January to June to monitor and provide support.

¹ Includes Child Protection services and GBV responses

In April, Chad received a significant increase in new Sudanese arrivals, following the attack on Zam Zam IDP camp and other areas in Sudan. The second wave of influx led to the declaration of a level 2 emergency in eastern Chad, which has received more than 94,000 new refugees fleeing Sudan from January to June. Protection services and assistance for newly arrived refugees, as well as the broader refugee population, continue to be a challenge amid funding shortfalls.

Egypt: As of June 2025, Egypt hosts over one million registered refugees, with Sudanese nationals making up approximately 75 per cent. Between January and June, 149,000 Sudanese refugees and asylum-seekers were newly registered with UNHCR, bringing the total to 737,394. The Government of Egypt estimates a total of 1.5 million new arrivals since April 2023.

According to the [UNHCR Global Trends report 2024](#), launched in June 2025, Egypt received the second highest number of asylum applications globally in 2024, after the United States.

Following the adoption of Egypt's first national asylum law (Law No. 164) in December 2024, UNHCR provided [comments](#) to align the law with international protection standards. UNHCR also developed a transition plan to support the government in gradually assuming responsibility for refugee registration and protection. This process included two interministerial meetings to coordinate efforts and ensure national systems are prepared for implementation.

On 24 June, the Egyptian Ministry of Foreign Affairs, in collaboration with UNHCR and UNDP, officially launched the [2025 Egypt Refugee and Resilience Response Plan \(ERRRP\)](#), marking the first nationally led refugee response plan under full government ownership. It targets all refugee populations in Egypt including Sudanese.

Ethiopia: Between January and June, 6,881 new arrivals were recorded from Sudan, including Sudanese and other refugees (2,940) and returning Ethiopians (3,941), bringing the cumulative total to 74,664 arrivals since the conflict began. Registration was disrupted due to a major security incident and delays in budgetary agreements with the Refugees and Returnees Service (RRS), who now lead registration. Ethiopia currently hosts 123,628 individuals, including Sudanese and other nationalities affected by the situation, pre-existing Sudanese refugees across camps and settlements, and a transit centre in Benishangul-Gumuz and Amhara regions.

Despite ongoing insecurity, particularly in the Amhara region, 3,540 individuals were relocated from transit centres to camps/settlements relocated during the reporting period making a total of 13,429 to date. Progress in Level (L3) registration is notable, with 18,453 individuals registered in Ura (8,930) and Aftit (9,523), and 7,980 refugees have been verified and integrated with the National ID program to enable access to services and work opportunities. However, severe funding cuts have disrupted aid and strained shared infrastructure, raising tensions between refugees and host communities.

Resettlement efforts saw 279 submissions and 126 departures, 104 through facilitated resettlement and 22 via other pathways.

Libya: Based on multiple data sources, including UNHCR registration in the West, health certificates issued in the East by the authorities, Sudanese Embassy estimates, and protection monitoring, the estimated number of Sudanese refugees and asylum-seekers in Libya was revised upward in Q2 2025. The planned Sudanese population increased from 375,000 to 550,000. Figures for third-country nationals (1,000) and host community members (70,000) remained unchanged, bringing the total planning figure for the Libya chapter of the RRP from 446,000 to 621,000 individuals. The required budget has not been adjusted, however, due to anticipated challenges in reaching all new arrivals, including the suspension of 10 out of 13 RRP INGO partners in western Libya.

In 2025, 15 out of 20 RRP partners reported significant strides in delivering life-saving support to Sudanese refugees and host communities across Libya. A total of 156,613 refugees received critical protection services (including 26,745 children with child protection services and 26,683 women and girls who received gender-based violence services, including risk mitigation and prevention). At the same time, 52,758 individuals were provided with food assistance, helping to address growing food insecurity among displaced and host communities. To support mobility and safety, 2,036 vulnerable refugees received cash allowances, while 49,783 refugees and host community members received essential non-food items (NFIs). Additionally, access to healthcare was strengthened, with 43,199 refugees benefiting from primary healthcare consultations.

South Sudan: In the first half of 2025, South Sudan received 190,204 new arrivals from Sudan, including 108,471 South Sudanese and 81,109 Sudanese refugees. While increased arrivals via informal border crossings in Renk, which started in late 2024, continued through February 2025, a new trend emerged from March onwards: a growing number of arrivals

from Darfur and Kordofan to Abyei, Northern and Western Bahr el Ghazal, and Unity States. At the same time, an increase in movements back to Sudan was observed in April – June.

RRP partners prioritized life-saving response activities despite unprecedented funding cuts that forced many to reduce or suspend activities. Onward transport assistance was paused in June, leaving over 12,000 individuals stranded at the Renk Transit Centre and increasing pressure on local resources. At the same time, reductions in food assistance and the closure of some protection services, including Women and Girls' Centres, compounded vulnerabilities. The operational environment was further challenged by a deterioration in the national economy, escalation of the conflict, disease outbreaks, and the risk of severe flooding in key hosting areas.

Uganda: As of June 2025, there were 85,000 Sudanese refugees in Uganda, who are part of the 1.92 million refugees hosted in the country. In the first half of 2025, Sudanese arrivals declined by 41 per cent compared to the same period in 2024, with monthly arrivals dropping to fewer than 2,500. Despite this decrease, significant challenges remain. By the end of May, over one million refugee children were registered across the operation, with individuals under 18 now comprising the majority of the refugee population. Among the Sudanese alone, 41 per cent are under 18 and 28 per cent are under 12. These trends come amid unprecedented funding constraints impacting essential services. Nonetheless, Uganda continues to uphold its progressive refugee policy, granting refugees land in the refugee settlement, freedom of movement, the right to work, and access to public services, while maintaining *prima facie* recognition for Sudanese asylum seekers.

Sectoral Responses



Protection

Central African Republic: The *Commission Nationale pour les Réfugiés* - CNR (the National Refugee Commission) and UNHCR registration teams biometrically registered 10,602 new refugee arrivals (3,826 households) in Korsi. The refugees registered also received protection services, including civil documentation, access to basic services such as food, shelter, WASH, and health, referral to available services and assistance for persons with specific needs.

Protection monitoring across Vakaga prefecture and its four sub-prefectures documented 507 protection incidents, driven by the resurgence of armed group activity and widespread circulation of weapons. Refugees and host communities faced human rights abuses such as extortion, forced displacement, physical violence, and harassment at illegal checkpoints erected by armed men, further undermining the protection environment and humanitarian access. Based on the information collected, awareness-raising sessions with communities, focusing on peaceful coexistence, GBV prevention, child protection, and access to documentation were conducted. GBV survivors received psychosocial support, medical and legal assistance was also provided to victims.

Since mid-June, escalating tensions between herders and the youth in Terfel and Birao triggered retaliatory attacks. Subsequent threats and violence, including looting, extortion, and insecurity, forced approximately 3,971 people (792 households), mainly women and children, to flee surrounding villages and seek refuge in Birao.

Chad: During the reporting period, significant progress was made in strengthening legal aid and community-based protection for forcibly displaced persons. Legal consultations and detention visits supported 1,030 cases, 158 per cent of the target, with women as the majority beneficiaries. Seventy (70) awareness sessions on asylum law, refugee rights, and justice were conducted, reaching 4,689 people, with a focus on new arrivals.

Community protection improved via complaint mechanisms accessible to children and persons with disabilities, handling 10,866 complaints with significant follow-up. Collaboration with local governance was enhanced through capacity-building and community action plans. Accountability was reinforced through 115 community awareness sessions, which reached 9,383 people.

Key challenges included limited resources to meet rising needs, insufficiently trained staff, security and access difficulties in unstable areas, cultural barriers affecting participation, managing high volumes of complaints and feedback effectively, and ensuring the sustainability of community mechanisms.

Egypt: The Protection Working Group (PWG) partners provided legal aid to 8,381 people in Cairo, Aswan, and Alexandria, including support with birth registration, residency permits, and dissemination of information to communities about their legal rights and available services. Nearly 580 Sudanese and Egyptian community members also took part

in social activities, such as sports, arts, and children's events, designed to promote peaceful coexistence and strengthen community ties.

Following the adoption of Egypt's first national asylum law in December 2024, the PWG created a special task force to coordinate efforts and advocate for the law's implementation to align with international refugee protection standards. In addition, a multilingual guidance document was developed following community consultations. It has been translated into five languages, in addition to Arabic and English and is used for legal awareness with the among communities.

Due to limited funding, UNHCR had to suspend registration services in its Cairo and Alexandria offices and reduce the capacity of its Infoline service, making it harder for people to access humanitarian assistance. In response, the PWG's "Access for All" task force worked to improve reception services at the main registration centre in Cairo.

From January to June 2025, Community-Based Protection (CBP) partners held structured information sessions for 3,142 Sudanese new arrivals, asylum-seekers, and refugees. These sessions helped them to understand the life in Egypt, stay safe, and access essential services, including registration, residency and mental health care treatment. During the same period, 1,030 individuals received psychosocial support, including counselling and group sessions led by trained refugee volunteers. Additionally, community-led initiatives, supported through capacity building and material assistance, reached 106 with tailored services.

Ethiopia: Between January and June 2025, Ethiopia received 6,881 new arrivals due to the Sudan crisis—comprising 2,940 refugees from Sudan (including Eritrean and South Sudanese nationals) and 3,941 Ethiopian returnees—bringing the total assisted population to 123,628. Refugees are mainly hosted in Aftit (Amhara) and in the Benishangul-Gumuz region, specifically Ura and Kurmuk (new arrivals due to the emergency), as well as Bambasi, Sherkole, and Tsore camps for refugee populations who arrived earlier. Meanwhile, Ethiopian returnees in Tigray face serious protection risks and receive limited support.

Security challenges persist along the Gondar-Metema route, disrupting registration, while Benishangul-Gumuz remains relatively stable with ongoing site development. Over 20,700 individuals have completed L3 registration, now linked to the national ID (Fayda) system to facilitate access to services and employment.

Funding shortages have severely impacted humanitarian operations, pausing some registration and relocation activities, disrupting food aid, and straining shared services with host communities. To enhance targeting and accountability, a biometric food distribution pilot using the Global Distribution Tool (GDT) was launched in Aftit, and 66 per cent of Ura's population completed L3 registration.

Progress in asylum procedures includes the launch of the Asylum Appeal Hearing Council and finalization of the RSD Directive. However, legal aid remains largely unavailable in Benishangul-Gumuz and Amhara due to funding constraints, leaving refugees without critical legal support. Legal awareness sessions were held in Ura and Metema, and advocacy with local authorities in Gendewuha continued to protect refugees from arbitrary arrest and detention.

Libya: The Protection Task Force coordinated life-saving protection services across Libya, reaching 103,185 refugees with critical support. Services included individual registration and legal assistance, access to civil documentation, psychosocial support, and integrated case management for those with heightened vulnerabilities. Tailored responses comprised protection needs assessments and targeted protection training as part of capacity-building initiatives to strengthen local actors. Community engagement was sustained through established feedback, response and complaint mechanisms. Responses received from persons of concern informed responses based on identified needs. In March 2025, 10 INGO RRP partners operating in the West were suspended, disrupting life-saving protection services. These suspensions remain in effect, affecting the delivery of protection services.

South Sudan: RRP partners provided legal assistance, psychosocial support, documentation, case management and other protection services to 46,416 refugees and asylum seekers. To address the increasing number of refugees settling outside formal camps, mobile registration teams were deployed to Western Bahr el Ghazal and Warrap States, resulting in the registration of 10,018 individuals. This brings the total number of newly registered refugees and asylum seekers in the first half of 2025 to 67,071. Notably, 68 per cent of these new registrations occurred in an urban setting. As a result, the overall population of refugees and asylum seekers in South Sudan has reached 585,472, spread across 29 locations.

Key protection priorities included family tracing and reunification, prevention of exploitation and abuse, and strengthening of community-based protection mechanisms. However, legal aid capacity remained overstretched, and reception facilities—especially in Renk and Abyei—faced critical gaps.

Uganda: Since the start of the year, 19,854 Sudanese refugees and asylum seekers have been registered in Uganda. This brings the total population of Sudanese refugees in Uganda to 85,384 making Sudan the third largest country of origin for refugees in Uganda. All refugees are now individually registered in the proGres database with the minimum dataset, ensuring accurate data for planning and service delivery. All registered refugees have been issued with documentation enabling them to access major services including sim card, banking services and other government services in the country.

19,854 individuals received different kinds of protection services (including registration with issuance or renewal of documentation), 338 complaints were effectively addressed through established feedback mechanisms, reflecting improved accountability and responsiveness. Mental health and psychosocial support services were extended to 5,244 individuals, contributing to community well-being and resilience. Legal protection efforts reached 2,232 refugees, who received legal assistance and aid services.



Fehlklr Alfadi, a father of five children and his wife, gets registered at the Kiryandongo refugee settlement in Uganda. © UNHCR/Ssozi Mukasa



Sub-Sector: Child Protection

Central African Republic: From January to June, a total of 673 children were provided with child protection services. In the Korsi refugee neighbourhood, 651 children — including 291 girls and 360 boys — were registered at the child-friendly space, where they participated in recreational, creative, sporting, and cultural activities. In addition, seven children with specific needs received psychosocial support. To strengthen community-based child protection, a protection committee was established in Korsi, composed of 20 members (10 refugees and 10 from the host community), tasked with conducting awareness-raising campaigns on child protection and identifying, reporting, and referring children at risk. In Ndele, 15 children with specific needs — 10 girls and 5 boys — received psychosocial support and dignity kits. A capacity-building workshop for local authorities on child protection principles and intervention procedures was also organized, with 27 participants (20 men and 7 women). In Sam-Ouandja and Bria, nine vulnerable boys (including orphans, children with disabilities, and victims of abuse, exploitation, or ill-treatment) and eight unaccompanied and separated children received psychosocial support.

Chad: During the reporting period in Chad, UNHCR and partners implemented targeted actions to protect and support children affected by forced displacement and host communities in Eastern Chad. A total of 15,117 children aged 3–5 were enrolled in Early Childhood Centres to promote development and prepare them for formal education. Identification efforts revealed 1,712 separated and 315 unaccompanied children, alongside 2,015 other vulnerable children, enabling tailored protection and care interventions.

Best Interests Assessments were conducted for 366 high-risk children to address specific risks. Material and cash assistance were provided to 1,265 children with specific needs, complemented by psychosocial support and non-food items. Around 505 children with complex vulnerabilities were referred to partner organizations for specialized care, with 24 placed in temporary foster families.

The UNHCR and its child protection partners trained 204 foster families and 1,966 community and institutional actors, enhancing their capacities in child protection, case management, and preventing abuse. More than 36,000 community members were sensitized on children's rights and protection mechanisms.

These efforts have strengthened child protection systems by ensuring access to education, psychosocial well-being, and holistic care while fostering community engagement and sustainable solutions for vulnerable children in displacement contexts.

The high number of vulnerable children continues to strain available resources and capacity. Limited availability and support for Temporary Foster Families posed challenges. Funding and material shortages limited the availability of assistance and services. Security issues hinder access to specific sites. Ensuring sustainable, long-term solutions will remain difficult if the necessary funds are not forthcoming. Capacity gaps persist despite training efforts. Social stigma and cultural barriers also limited children's access to care and protection, especially for girl children.

Egypt: As of June 2025, UNHCR had registered 152,243 Sudanese refugee and asylum-seeker children in Egypt, including 5,015 Unaccompanied and Separated Children. Between January and June, 2,275 children at risk received individual case management services, and 587 children were supported through Best Interests Procedure (BIA/BID). Child protection partners provided mental health and psychosocial support (MHPSS) to 8,277 children and caregivers through mobile and child-friendly spaces, family clubs, and specialized service centres.

To improve coordination, the Child Protection partners developed emergency response guidance for children at risk and simplified, child-friendly referral pathways for community use. Furthermore, 267 individuals, including parents, caregivers, and community members, were trained on child protection and related topics. These efforts aimed to address the emotional, physical, and protection needs of children while strengthening community-based protection systems.

Ethiopia: Despite significant budget reductions for child protection in 2025, the response partners continued to provide essential prevention and response services for children at risk, including unaccompanied and separated children in both emergency and protracted contexts. A total of 458 children (203 girls and 255 boys) received support through Best Interests Procedure, including Best Interest Assessments and tailored interventions such as alternative care arrangements, family tracing and reunification, targeted material support, psychological support, and referrals to multi-sectoral services.

Additionally, 1,063 (including 531 girls and 532 boys) accessed services at Child Friendly Spaces (CFS), contributing to their well-being and development. Furthermore, multi-purpose cash assistance of 1,000 ETB per person (approximately USD \$7) was provided to 65 caregivers (21 women) in Metema to help with their basic needs and support the children under their care. Prevention activities also continued, with awareness sessions, campaigns, and training on child marriage, child labor, GBV, MHPSS, and protection from sexual exploitation and abuse, reaching a total of 5,598 (1,956 women), including community members, incentive social workers, and community protection committees in Assosa, Benishangul-Gumuz region. Yet, underfunding significantly impacted the response, leading to a reduction of refugee incentive social workers, limited recreational kits for CFS, scaling back of prevention activities and cancellation of annual events focused on children's rights and well-being.

Libya: As of mid-2025, the Child Protection Task Force provided critical child protection services to 26,745 children, including Sudanese refugees, third-country nationals, and host communities across Libya. Children make up nearly 40 per cent of the Sudanese population and face serious protection risks due to displacement, limited access to education, and poor living conditions. Child protection interventions comprised mental health and psychosocial support, case management, positive parenting programmes, gender-based violence and risk mitigation, as well as civil documentation, including birth registration. Challenges persist in the issuance of birth certificates, particularly in cases of absentee

fathers, which complicates the legal process. Family separation due to administrative and movement restrictions continues to impact children's well-being and requires sustained attention. Significant funding gaps and the suspension of INGOs affected child protection services and individual case management, limiting the scale and continuity, especially in remote and underserved areas. As a result, countless vulnerable children and their caregivers are now without case management, psychosocial services, or safe referral pathways. This gap in services significantly increases their risk of abuse, exploitation, and neglect. Ongoing cases, including those that are urgent and high-risk, were abruptly closed or put on hold without proper transition plans or confirmation of service continuity. Although some referrals were made, there is no tracking mechanism in place to ensure that children receive continued support. Many children remain out of school, engaged in child labour, or exposed to exploitation and abuse. The demand for child protection support continues to grow, highlighting the urgent need for sustained funding, improved access, and expanded services to safeguard the rights and well-being of vulnerable children across Libya.



South Sudan: From January to June, 9,888 children and caregivers, including 86 children with disabilities, received psychosocial support, child protection case management, referrals to specialized services and other child protection services. Through RRP partners, 378 unaccompanied and separated children were identified and received targeted assistance, including interim care, family tracing, and reunification support.

While many children accessed services at static facilities, partners increasingly relied on mobile outreach, particularly in out-of-camp areas and new arrival locations such as the eastern corridor in Renk, where formal child protection structures remained limited. Child protection committees and caregiver engagement sessions played a crucial role in identifying risks and enhancing referrals for children in need. Despite these efforts, service coverage remains far below needs. Funding shortfalls, limited partner presence and a shortage of trained child protection workers have limited the scale and quality of interventions, especially in remote or newly affected areas.

Uganda: The child protection sub-sector response aimed to strengthen the national child protection system; enhance access to essential services such as case management and alternative care; and support children, families, and communities in protecting children. By mid-year, 2,886 children received child protection services, including appropriate alternative care, mental health and psychosocial support (MHPSS) and 173 benefiting from comprehensive case management. Additionally, 113 parents participated in positive parenting sessions in line with the 22 key family care practices by the Ministry of Gender, Labour and Social Development to enhance the quality of care provided to children. A total of 512 children participated in community-based activities including structured play, psychosocial support and awareness raising to enhance the quality of care advanced to children.

Despite this, Child Protection programming is severely affected by funding cuts, impacting over 2,500 children with specific needs. Staff reductions have compromised service quality, with the average caseworker-to-child-at-risk ratio at 1:145. These figures far exceed the standard of 1:25, highlighting critical capacity gaps.



Sub-sector: Gender-based Violence (GBV)

Central African Republic: During the reporting period, all documented cases of Gender-based violence (GBV) - 86 per cent of whom women and 14 per cent girls - had received psychosocial care from the “Ma Mbi Si” safe spaces case managers along with referrals to medical services, provision of dignity kits, and cash assistance to meet their multi-sectoral needs. Awareness-raising sessions and focus group discussions were conducted with Sudanese refugees and members of the host community, addressing topics such as the causes and consequences of GBV and the mechanisms for reporting and managing GBV cases. In total, 3,526 individuals participated, including 3,044 women and girls, and 482 men and boys.

Chad: Despite substantial funding cuts that led to the suspension of several projects, humanitarian actors in eastern Chad have prioritized available funds to intensify GBV prevention and response efforts. RRP partners reached 134,924 people through awareness sessions in displacement sites, nearby villages, and border areas. Additionally, 2,736 community members and 200 key stakeholders, including authorities and frontline responders, were trained on GBV prevention, services, and case management.

In combating GBV, 718 community and humanitarian actors were trained, and 39 local GBV committees conducted 277 awareness sessions reaching 28,229 individuals. Psychosocial support was provided to 926 GBV survivors, exceeding targets, with additional referrals for medical, legal, socio-economic, and security support. Over 8,000 at-risk women and girls received dignity kits.

Since March, the ongoing emergency has mobilized multiple partners in Wadi Fira and Ennedi East provinces, providing psychosocial, medical, legal, and material support to 27,757 individuals (97 per cent of whom are women and girls), including dignity kits and cash assistance.

Despite these efforts, severe resource shortages persist in areas such as shelter, sanitation, food, and essential items, thereby heightening the risks of GBV. Women and girls remain especially vulnerable, with many resorting to harmful coping strategies due to the lack of adequate support and protection services.

Egypt: By June 2025, the GBV sub-sector partners reached 6,104 refugees through prevention activities, including outreach, awareness-raising, and empowerment sessions, particularly via Women and Girls Safe Spaces. These efforts aimed to promote gender equality, reduce harmful practices, and engage both refugee and host communities. In addition, 24,073 GBV survivors and individuals at risk received essential support, including case management, psychosocial services, legal aid, medical care, and dignity kits.

The GBV sub-sector working group members also strengthened localized protection by involving Women-Led and Refugee-Led Organizations (RLOs) in referral pathways and coordination and hosted a donor field visit in May to highlight these efforts.

Ethiopia: In Ura and Metema, 7,259 individuals participated in GBV awareness sessions, including significant engagement during the International Women's Day celebration, which helped raise awareness of GBV risks and available services. In terms of response, all identified survivors (100 per cent) received psychosocial support, while 37.5 per cent accessed medical assistance, 12.5 per cent received legal aid, and 50 per cent were provided with essential safety support, demonstrating a strong commitment to survivor-centred care. To strengthen community-based protection, 109 individuals participated in specialized GBV training, enhancing community-level capacity for case identification and referral. At Women and Girls Safe Spaces (WGSS), 2,526 women and girls engaged in prevention and empowerment sessions, fostering resilience and knowledge. Additionally, 3,057 women and girls received dignity kits containing essential hygiene items to support their health, dignity and safety. These integrated efforts are vital for reinforcing protection mechanisms and promoting a safer, more supportive environment for all.

Libya: By the end of June 2025, the GBV Task Force had reached 26,683 women and girls, from Sudanese refugee communities (58 per cent), host communities (39 per cent), and third-country nationals (4 per cent). Services included support to GBV survivors, Community outreach interventions for GBV prevention, risk mitigation and response were conducted as well as awareness campaigns. Dignity kits were distributed, and women and girls benefited from social and economic empowerment initiatives, including life skills training. Mental health and psychosocial support services were provided to vulnerable women and girls. In Alkufra, specialized mental health services reached individuals through

emergency medical teams. Moreover, reproductive health consultations were provided across operational areas. These efforts reflect the collective commitment of GBV Task Force members to address the urgent needs of women and girls at risk, despite ongoing access and funding constraints.

The direct impact of these constraints on GBV prevention and response services has been profound. Specifically, referrals to health services, especially for refugees and migrants, have been interrupted directly affecting GBV survivors who require specialized medical care, reproductive health services, case management, and legal and psychosocial support. The disruption of these referrals directly impacts survivors' ability to receive critical post-GBV care.

South Sudan: Between January and June, 30,163 GBV survivors and individuals at risk received support, including dignity kits, emergency medical care, psychosocial support, case management, and referrals to specialized services. Community awareness efforts reached over 17,000 individuals, focusing on behaviour change, early identification, and survivor-centred response.

Despite these efforts, GBV was one of the most severely affected sub-sectors due to funding cuts. Several Women and Girls' Centres suspended core activities, including structured psychosocial support and livelihoods programming, which had previously provided safe spaces and economic empowerment for survivors. As a result, access to essential services for women and girls at risk was significantly reduced, particularly in remote or high-risk locations.

RRP partners prioritized community mobilization and outreach where feasible. A total of 127 frontline workers were trained in GBV prevention and response. Safety audits conducted in Renk and Gorom informed inter-agency action plans to address risks linked to lighting, WASH access, and safe movement.

Uganda: During the reporting period, GBV interventions focused on providing life-saving response services and ensuring survivor-centred support for Sudanese refugees, while actively working to prevent GBV by transforming attitudes and behaviors regarding gender roles and violence. By June 2025, some 20,000 refugees were engaged in GBV prevention through methodologies like SASA! EASE and Girl Shine, which aim to positively shift community perceptions. Additionally, 49 refugees received multi-sectoral support through individual case management services.

Despite these efforts, funding cuts have critically impacted service quality, resulting in a case worker ratio of 1:79 against the standard of 1:20, thereby hindering timely and adequate response with further reductions anticipated to worsen the situation. Addressing these financial constraints is crucial to preserving the efficacy of GBV interventions and ensuring comprehensive support and prevention strategies for the refugee community.



Education

Central African Republic: In the Central African Republic, there are over 11,246 school-age Sudanese refugee children, with 8,341 (74 per cent) concentrated in Korsi, Birao. During the reporting period, 2,273 refugees (50 per cent girls) enrolled in primary schools, raising the gross enrolment rate to 30 per cent. Six durable classrooms built by RRP partners enabled schools to absorb more students, and refugee enrolment doubled compared to last year. Girls' enrolment also increased from 46 per cent to 50 per cent, thanks to youth-led community outreach.

Ahead of national exams, 225 students from three schools benefited from preparation classes. For the first time since arriving in 2023, 35 Sudanese refugees participated in the national exams alongside host communities. Despite having only 1.5 years of French learning, they achieved a 60 per cent overall pass rate and 100 per cent among girls, with top rankings in several schools. On World Refugee Day, the top five students from each school were awarded prizes by the Academic Inspection and the Prefect, and half were refugees. At secondary level, 505 learners (including 46 per cent women, up from 34 per cent) attended French bridging courses in Birao, raising the secondary enrolment rate from 2.5 per cent in 2024 to 14.12 per cent. To support integration and language skills, a weekly French conversation club was launched in June in Korsi, covering topics like self-introductions, current events, and culture.

Chad: In the first half of 2025, significant progress was made in refugee education with 927 teachers trained (up from 807 in 2024), 9,320 school kits and 75 teaching kits distributed, and 1,400 refugee students supported in higher education, an increase from 443 in 2024. The accelerated education program continued in five refugee sites (Zabout, Farchana, Aboutengue, Arkoum, and Gaga), enrolling 3,014 children, while 158,464 report cards were issued to strengthen academic monitoring. However, challenges persist.

The school-aged refugee population rose by 40 per cent to 421,000 by June, far surpassing initial projections. Meeting this demand requires an additional 5,000 classrooms, 4,000 teachers, 200 administrative blocks, 5,000 latrines, and 26 water points. Over 100,000 school kits will be needed for the October 2025 intake. The suspension of funding resulted in a decline in volunteer teaching and a decrease in baccalaureate pass rates (from 52 per cent in 2024 to 44 per cent in 2025). Textbook shortages continue to be a significant barrier, particularly in secondary education.

The recent influx of refugees into Wadi Fira and Ennedi Est provinces has further strained the education system. Urgent, coordinated support is required to address infrastructure, staffing, and resource gaps and ensure a safe and inclusive 2025–2026 school year.



Hawa Ahmed Adam is 18-year-old student at Farchana secondary school in Chad. © UNHCR/Ala Kheir

Egypt: During the reporting period, education partners provided education grants to 21,152 children aged 3–17 years to support their enrolment in formal and non-formal education. 74 children with disabilities were supported with cash grants and their parents received mentorship sessions to ensure access to appropriate education models. Over 5,800 refugee children benefited from remedial classes, bridging programs, accelerated learning, Technical and Vocational Education and Training (TVET), and MHPSS services. Recreational and learning kits were distributed and capacity-building interventions provided in public schools, community-based learning spaces, and Sudanese community learning centres. In addition, Ministry of Education staff were trained on student health and well-being. And teachers from community learning centres received training on safeguarding and GBV risk mitigation. Almost 3,300 parents and caregivers participated in awareness and education advising sessions.

Despite these efforts, only 33 per cent of the education sector's 2025 funding needs were met by June. This funding gap threatens refugee children's access to education and increases risks of neglect, abuse, and harmful coping strategies.

The UN Task Team on Inclusion (TTI) continued advocating for inclusive education policies and legal reforms to ensure refugees' access to all levels of education.

Ethiopia: Despite significant funding shortfalls, education services for refugee children in Ethiopia have continued at a minimum level to keep schools functional. Priority activities included payment of teachers' salaries in refugee camps hosting protracted populations, expansion of host community schools to accommodate new arrivals from Sudan, provision of MPHSS, teacher capacity building, distribution of Teaching and Learning Materials (TLM), language support to promote inclusion, and strengthening GBV risk mitigation and PSEA. In Aftit (Amhara region), a total of 1,495 (667 girls) were enrolled across pre-primary (331), primary (856), and secondary (308) levels. Similarly, in Ura (Benishangul-

Gumuz Region), 2,729 (1,266 girls) were enrolled in pre-primary (402) and primary (2,327) education during the reporting period. For protracted refugee populations in Bambasi, Tsore and Sherkole (Benishangul-Gumuz region), education services were sustained through partner support, reaching a total of 23,972 children (10,009 girls) across all levels, including pre-primary (4,843), primary (14,796), and secondary (4,333) levels. In terms of tertiary education, 20 (6 girls) refugees were enrolled in university programs. Overall, 28,196 refugee children benefited from education programming during the reporting period.

Libya: The Education Task Force supported Sudanese students across the country with learning opportunities. Non-formal education opportunities and skills development programmes for 5,185 Sudanese students were provided, as well as distribution of individual learning materials to 817 students. This addressed group and individual educational needs. Through a targeted approach, 281 Sudanese students were enrolled in formal schools and received specific enrolment support including issuance of documentation and placement tests. Additionally, 24,804 Sudanese children benefited from rehabilitated community infrastructure projects, thereby increasing access to educational services. 1,920 Sudanese students benefited from educational facilities equipped with essential resources designed to enhance access to education and improve learning outcomes. These efforts demonstrate the commitment to supporting Sudanese students at multiple levels, ultimately leading to improved educational opportunities.

South Sudan: Between January and June, RRP partners supported access to education for 63,892 refugee children, despite persistent infrastructure and staffing challenges. Approximately 45 per cent of school-age children were engaged in formal or non-formal education. Primary gross enrollment is at 39 per cent compared to 46 per cent at the end of 2024, and secondary gross enrollment dropped to 11 per cent — a 3 per cent decline driven by overcrowded classrooms, teacher shortages, and the impact of displacement on household stability.

Partners provided catch-up classes, language support, and psychosocial assistance to help children integrate into the national curriculum. The WFP-supported School Feeding Program for primary education, along with Mastercard Foundation school meals support for secondary schools, continued to play a crucial role in promoting school attendance, particularly for girls in Maban, Jamjang, Wedweil, and Gorom. The secondary school in Gorom has been operational since the start of the 2025 academic year.

Access to tertiary education remained limited, with 358 refugee students enrolled in higher education institutions, supported by tuition fees and monthly stipends. However, more than half of refugee children remain out of school, facing barriers linked to insecurity, food insecurity, distance to learning facilities, and lack of learning materials. Only a third of teachers hold formal qualifications, further impacting learning outcomes and school retention.

Uganda: Between January and June, 19,780 Sudanese refugees have benefited from education programming with 13 per cent enrolled at pre-primary, 22 per cent primary level and 3 per cent at secondary level. Additionally, 17 Sudanese from Karary University were supported to undertake their examinations through a hosting arrangement with Islamic University in Uganda. 5 female Sudanese offering medical courses are currently enrolled while an additional 15 and 50 students are under enrolment for University and Technical training respectively.

Despite the increase in number of Sudanese accessing education, the Gross Enrolment Rates (GER) remains low. Besides, education quality indicators remains low with Pupil Teacher Ratio as high as 86:1 and Pupil-Classroom Ratios at 119:1 for primary against standard of 53:1; pupil to desk ratios at 6:1 against standard 3:1; and Pupil stance ratios of 74:1 against standard 45:1; This is further worsened by the dilapidated state of infrastructure in the schools. Additionally, tracking of Sudanese enrolled outside of the settlements has been difficult to track as the Education information management system (EMIS) has not been fully rolled out across the country.



Food Security

Central African Republic: RRP partners continue to provide essential food assistance in nearly a dozen localities hosting Sudanese refugees with the primary focus of response in Korsi, Birao. WFP delivers monthly full food rations, complemented by dry meals while newly arrived refugees are progressively integrated into the regular ration programme. Between January and June 2025, approximately 19,471 refugees received assistance, including 18,384 only in Korsi (Vakaga prefecture). Other refugees received food assistance in Bria, Sam Ouandja (Haute-Kotto), and others in Mbomou and Bamingui-Bangoran prefectures. To mitigate access challenges during the rainy season which started in June, the strategy was adapted by prioritizing cash transfers, ensuring continuity of food assistance despite road inaccessibility in several areas.

Chad: The World Food Programme (WFP) provided food assistance to a total of 893,009 individuals, comprising 804,304 refugees, 62,705 returnees, and 26,000 host community members. In many cases, particularly for refugees, cash transfers were used in place of direct food distribution to offer greater flexibility and support local markets.

Despite these efforts, funding shortfalls persist as a significant challenge. Limited resources have forced WFP and its partners to reduce food basket sizes and deliver assistance irregularly, particularly in older refugee settlements, where needs remain high. Addressing this funding gap is crucial to ensure sustained and adequate food and cash support for all affected populations and to prevent frequent demonstrations outside humanitarian offices in operational areas.



A group of 20 refugees and 10 host community members are working together to cultivate a piece of land provided by the host community near the Arkoum refugee settlement in Chad. © UNHCR/Ala Kheir

Egypt: RRP partners supported efforts to better understand and respond to the needs of refugees in Egypt. In collaboration with Central Agency for Public Mobilization and Statistics (CAPMAS) and the UNHCR-WFP Joint Hub, the 2025 Egypt Vulnerability Assessment for Refugees (EVAR) was completed. This assessment provided updated data on the vulnerabilities, needs, and capacities of refugees, helping to improve targeting and planning across sectors. Community feedback mechanisms were used to ensure refugee voices were included. The findings reinforce the urgent need for continued support to address the complex vulnerabilities of refugees and asylum seekers in Egypt as more than half of the refugee population in Egypt is food insecure; one in three Sudanese refugees report not getting medical help when needed; and half of refugee children are out of school.

In the first half of 2025, 3,201 individuals benefited from self-reliance capacity-strengthening activities, including training and livelihood support. In addition, 172,072 targeted Sudanese refugees received cash-based assistance to help meet their essential food and nutrition needs. These efforts reflect the sector's commitment to evidence-based programming and inclusive, needs-driven support.

Ethiopia: In Benishangul-Gumuz, refugees relocated to Ura refugee site received 100 per cent of the minimum daily food requirement (2,100 kcal per person per day) through a hybrid modality comprising 50 per cent in-kind food assistance and 50 per cent cash-based assistance. Similarly, refugees in the Aftit settlement in the Amhara region also received the full daily requirement, but exclusively through in-kind assistance. This full ration significantly contributed to improved household food security and dietary diversity among newly relocated refugees. On average, 12,360 refugees received monthly food rations at Ura Refugee Site and 6186 individuals at Aftit. In contrast, refugees residing in the protracted Assosa camps of Sherkole, Tsore and Bambasi received only 60 per cent of the minimum daily caloric

requirement, resulting in food insecurity at the household level. Inadequate food assistance has led to increased harmful coping mechanisms, such as skipping meals, selling assistance items, and child labour. It also poses risks to poor nutritional outcomes, and increased vulnerability among affected populations. On average, 62,728 refugees received their monthly food ration in Assosa camps.

Libya: As of 30 June 2025, the Food Security Task Force provided unconditional food assistance to 52,758 individuals across Libya. Monthly distributions for vulnerable Sudanese refugees were prioritized, with 10 per cent of assistance allocated to host communities. Over four rounds of food restricted vouchers were distributed between January and April 2025 to host communities in Azzawya, Benghazi, and Sabha. To prevent malnutrition, specialized supplements were provided to children aged 6–59 months, expecting and breastfeeding mothers.

The sector faced significant operational challenges, including funding gaps, limited access to key areas and delays in security and shipment clearance resulting in the suspension of some planned activities. Despite these obstacles, the Food Security Task Force remained committed to resuming and scaling up food assistance as conditions improve and additional resources become available.

South Sudan: As of mid-2025, food assistance had reached approximately 143,091 refugees and asylum seekers through a hybrid of in-kind distributions and cash-based transfers across transit centres and refugee-hosting areas, including Renk, Maban, Jamjang, Gorom, and Wedweil. Due to ongoing funding shortfalls, UNHCR and WFP fully transitioned to a targeted assistance model in all long-standing camps and settlements, applying a protection vulnerability top-up for the most at-risk households registered before the Sudan conflict influx (April 2023). This targeting approach, based on criteria such as disability, chronic illness, child- or older person-headed households, and children at risk, resulted in coverage ranging from 25 per cent to 58 per cent depending on location. Full assistance was maintained only for new arrivals.

While nutrition prevention, treatment, and school feeding programmes continued for eligible populations, the scale-back of blanket food distributions heightened tensions in camps—particularly in Maban—and increased the risk of deteriorating food security. In urban areas, where 68 per cent of new arrivals have settled this year, no regular food assistance is provided.

Uganda: The food security sector assisted 51,269 Sudanese refugees with in-kind food assistance and Cash Based Transfers in 2025. The 2024 Food Security and Nutrition Assessment indicated poor Global Acute Malnutrition (5-10 per cent) for Kiryadongo (8.9 per cent), while GAM for the rest of the settlements was acceptable (<5 per cent). Minimum acceptable diet (MAD) was only 20.2 per cent in refugee settlements, increasing the risk of undernutrition, stunting, micronutrient deficiencies, and related health issues among children aged 6-23 months. The nutrition indicators remained within Sphere with standards of 93 per cent recovery rate under the Targeted Supplementary Feeding Programme. Effective March 2025, the Maternal Child Health and Nutrition (MCHN) programme closed in all the 13 settlements, and the Targeted Supplementary Feeding Programme (TSFP) was prioritized in five settlements, including Kiryadongo.

Effective April, WFP implemented a further recategorization/reprioritization exercise conditioned by reduction in funding which has seen over 1 million refugees in Uganda phased out of food assistance and only 52 per cent of the Sudanese benefit from food assistance. This includes a reduction in household food rations - including a decrease for Category 2 households from 30 per cent to 22 per cent of a full ration, a reduction of Category 1 households from 60 per cent to 40 per cent and the ration for new arrivals reduced from 100 per cent to 60 per cent. This is expected to deteriorate an already volatile nutrition status for refugees.



Public Health & Nutrition

Central African Republic: In collaboration with the Vakaga Health District through the Birao district hospital, RRP partners provided primary and secondary health care services to both refugees and host communities. Health posts conducted 17,736 medical consultations, of which 90 per cent were for refugees and 10 per cent were for members of the host-community living around the Korsi refugee neighbourhood.

Maternal health providers conducted 688 pre-natal consultations, 58 post-natal consultations, 688 gynecology consultations, and assisted 85 births. In addition, 134 refugee children eligible for measles vaccination were immunized. A total of 5,437 children under five were screened for malnutrition and supported: 85 (1.5 per cent) were treated for severe acute malnutrition, and 249 (4.6 per cent) for moderate acute malnutrition. Furthermore, 1,178 lactating and/or

pregnant women at risk of malnutrition received food supplements to prevent undernutrition. From January to June, health posts referred 370 patients to secondary health care, representing 2 per cent of all outpatient department cases.

Chad: UNHCR and its partners, in collaboration with the Ministry of Health, continued to deliver primary healthcare services to refugees and host communities through a network of 20 health centres, seven health posts, and two secondary hospitals during the reporting period. To strengthen the health system, 1,247 health workers were recruited alongside the provision of essential medicines, medical supplies, and ambulances.

A total of 569,834 medical consultations were conducted, with 119,966 (21 per cent) for members of the host community. The most common health conditions were acute respiratory infections, watery diarrhoea, and malaria. Mental health support expanded, reaching 14,337 individuals, with 4,210 new cases recorded. Nine thousand three hundred twenty-six (9,326) births were registered, 97 per cent of which were attended to by skilled personnel, indicating strong maternal care coverage.

In nutrition, all refugee sites operated Community-Based Management of Acute Malnutrition (CMAM) programs, enrolling 25,655 children with moderate acute malnutrition (MAM), 8,486 severe acute malnutrition (SAM), and 2,102 malnourished pregnant and lactating women.

One hundred thirty (130) refugee health workers, including 20 medical doctors, received clearance to practice in Chad.

Challenges remain, including the need to upgrade temporary health facilities, functionalize district hospitals, and address shortages in specialists and funding. The risk of a cholera outbreak is high due to regional spread, and poor accessibility during the rainy season hampers emergency referrals.

Egypt: Sudanese refugees in Egypt continue to face challenges in accessing essential healthcare. According to preliminary findings from the Egypt Vulnerability Assessment of Refugees (EVAR), 38 per cent of newly arrived Sudanese refugees do not seek medical care when needed, mainly due to concerns about unaffordable costs. From January to June 2025, Health Sector Working Group partners provided primary healthcare consultations to 62,883 Sudanese refugees and asylum-seekers. Additionally, secondary and tertiary healthcare services were delivered to 6,914 individuals, including hospital admissions, surgeries, and dialysis sessions. A group of Egyptian and Sudanese medical students were trained to lead awareness campaigns focused on refugee health needs, family development, and health literacy.

To support national health infrastructure, medical equipment, including a Computed Tomography (CT) scanner was donated to the Ministry of Health and Population (MoHP). Partners also continued advocacy efforts for the inclusion of refugees in Egypt's Universal Health Insurance System (UHS), now active in six governorates, including Aswan.

During the first half of 2025, the Nutrition sub-sector partners provided infant and young child feeding counselling to 4,027 children and mothers through primary healthcare units operated by the MoHP. Additionally, 13,330 children under five were screened for malnutrition in collaboration with seven private healthcare providers in refugee-hosting governorates.

To enhance service delivery, 150 healthcare workers received training in maternal and child nutrition. The nutrition sub-sector is also working with national partners, including the MoHP, the Egyptian Healthcare Authority, and the National Nutrition Institute, to develop national guidelines for managing wasting at both primary and secondary care levels.

Ethiopia: Across Ura, Sherkole, Bambasi, and Tsore camps in Benishangul-Gumuz, over 44,800 clinical consultations were provided to refugees and host communities. Common illnesses included respiratory infections, malaria, diarrhea, and pneumonia. A total of 474 patients were referred to advanced care. Skilled birth attendance was provided for 914 mothers, and 663 women completed antenatal care. However, service quality was hindered by shortages of essential medicines and power supply, particularly affecting diagnostics, cold chain systems, and emergency care.

In Afit settlement (Amhara region), 14,648 consultations were conducted, with 30 per cent involving host community members. Refugees accessed specialized care and 512 MHPSS consultations. Reproductive health services included 79 deliveries (90 per cent skilled attendance), 168 first antenatal visits, and 276 women accessing family planning. Seven health professionals were deployed for emergency coverage, and healthcare workers received targeted training.

Nutrition services in Benishangul treated 222 children with severe acute malnutrition (SAM) and 1,207 with moderate acute malnutrition (MAM), achieving a 97 per cent SAM recovery rate. In Afit, 22 SAM and 184 MAM cases were treated, alongside support for 184 pregnant and lactating women. A recent survey in Afit reported a 7.7 per cent GAM

rate (within WHO threshold) but highlighted high stunting (21 per cent) and critical anemia (41 per cent) among children under five.

Access challenges in both regions included security-related movement restrictions and infrastructure gaps, particularly in Aftit, where lack of funding delayed construction of key health facilities.

Libya: During the first half of 2025, the health response for Sudanese refugees and host communities in Libya continued in Alkufra, Ajdabiya, and surrounding areas. Health and nutrition-related activities were provided to Sudanese refugees and host communities. A total of 43,199 individuals received primary health consultations, supported by outreach teams and mobile clinics where fixed infrastructure was limited. Patients were referred for advanced care in coordination with hospital systems.

Reproductive health services remained a priority, and childbirths and maternal consultations were safely conducted. Nutrition actors screened children under five, expecting and breastfeeding mothers, while preventive efforts included Infant and Young Child Feeding (IYCF) sessions and early risk identification. Health education and awareness activities reached individuals, with mental health and psychosocial support integrated into some routine services.

The suspension of several INGO partners in western Libya has disrupted referral pathways, emergency care, and continuity of services. This has shifted the burden onto health facilities, mainly in Tripoli and Misrata, and also in Ajdabiya, Alkufra, and Benghazi, where large numbers of refugees and migrants continue to seek care. Many cases previously managed by INGOs have been left without proper follow-up or drug refills, and no formal handover occurred between care levels. The national system was not prepared to absorb this sudden load, and the pressure has exposed critical gaps not only in access but also in service availability, as not all essential healthcare services are currently offered. MOH staff or the broader health system are attempting to fill the gaps, but capacity remains limited, particularly in diagnostics, referral coordination, and specialized care. Without urgent funding, critical services face collapse, and out-of-pocket health costs are rising even among vulnerable residents.

Coordination through the Public Health and Nutrition Task Force, ensured harmonized approaches, joint monitoring, and collaboration with national health counterparts. However, key challenges persist, including limited diagnostic capacity, shortages in medical staff, and weak referral systems. Despite these constraints, gradual improvements in service coverage reflect collective efforts to maintain essential health and nutrition support in a challenging operational environment.



A 21-year-old Sudanese refugee receives treatment after losing his leg to a gunshot wound in Sudan. He currently lives in Derna, Libya, where he has found a job — a new beginning built on resilience and hope. © Premiere Urgence International (PUI)

South Sudan: Between January and June, health partners provided 192,745 primary healthcare consultations to refugees, asylum-seekers and the host community across transit centres, camps, and settlements. Malaria, acute respiratory infections and diarrheal diseases remained the leading causes of morbidity, particularly in overcrowded transit sites such as Renk and Abyei. The ongoing cholera outbreak that began in late 2024 continued to affect refugee-hosting areas, with over 78,630 suspected and confirmed cases reported nationally and 2,830 cases among refugees. A new Hepatitis E outbreak was also confirmed in Renk, exacerbating public health risks in already overstretched facilities.

Malnutrition screening reached 32,255 (8,021 refugees) children and 9,554 (2,640 refugee) pregnant/lactating women, with 5,785 children enrolled and treated for acute malnutrition through the Therapeutic Feeding Programmes. The nutritional situation remains critical, with Global Acute Malnutrition (GAM) levels surpassing emergency thresholds in most transit areas, particularly in the Upper Nile.

Safe delivery services achieved a 94 per cent skilled birth attendance rate, though antenatal coverage remains below the standards due to access barriers and health workforce gaps. Partners scaled up cross-border coordination between the Renk and White Nile team in Sudan on WASH and health surveillance, improving outbreak response. However, challenges persist in the handover of health facilities covering refugees and host communities to the Health System Transformation Project (HSTP) due to slow recruitment, delayed delivery of medications and supplies, and gaps in facility-level staffing.

Uganda: Between January and June, the overall health situation remained stable with an acceptable crude mortality ratio (CMR) standing at 0.03 and under 5 MR 0.14 per 1,000 population. Services were accessed through the available national facilities. 1,200 new arrivals were screened for malnutrition, 1,429 vaccinated against polio and 4,075 against measles. 61,531 individual (outpatient department (OPD) consultations were supported with a consultation per clinician per day of 66. Three outbreaks were reported amongst the population with 22 mpox cases reported, treated recovered with no fatality, 7 measles cases were also reported, treated and recovered with no fatality and 27 cholera cases reported, treated with 25 recovered and 2 fatalities. 748 live births were reported of which 93 per cent were attended to by skilled health care workers.

High malnutrition rates were reported among new arrival children under 5 years and pregnant and lactating women at Kiryandongo Reception Centre, through point-of-arrival screening and bi-weekly mass screening. Global acute malnutrition rates in children swung between 'critical' and 'serious' thresholds, reaching as high as 29.7 per cent in June 2025. Blanket supplementary feeding program (BSFP) is planned for July 2025. Since January, 36 children have been treated for severe acute malnutrition and 144 children, and 89 women were treated for moderate acute malnutrition. Critical gaps in service delivery include the unavailability of essential medicines and medical supplies.



Livelihoods & Economic Inclusion (LEI)

Central African Republic: RRP partners' market gardening activities advanced in Korsi, Birao with 51 planned groups, including 24 formed by the refugees and 27 formed by members of the host community, fully established by the end of June. Each group received 15 livestock (goats and sheep) and seeds to support livelihoods. Meanwhile, RRP partners continued awareness-raising to promote the identification and enrollment of beneficiaries for the market gardening projects.

Chad: As part of the 2025 agricultural campaign, 4,145 households, including 2,989 refugee households and 1,156 from host communities, have been selected for livelihood support. Assistance will be delivered through cash-based interventions (CBIs), primarily to help beneficiaries purchase improved seeds and partially replace existing agricultural tools.

Technical and financial bids were evaluated for the construction of four spillway weirs in Metché and Zabout. Following the selection, sites were officially handed over to contractors, marking the beginning of on-the-ground construction with active involvement from local authorities and stakeholders. Additionally, vegetable farming sites in Gaga and Lira (each covering 5 hectares) were provisionally handed over. Developed with support from the European Union, these sites feature modern infrastructure and will enable around 100 households to boost their resilience through market gardening.

A national survey, led by the Chadian government, funded by WFP and UNHCR, and conducted by ACTED, is assessing the vulnerability and coping capacities of displaced populations. Launched in eastern Chad and across intervention

areas, it aims to enhance the effectiveness of resilience programs and support advocacy efforts with development partners.

A joint mission by UNHCR, WFP, FAO, and state agencies visited seven villages in Wadi Fira and Ouaddaï to identify priority needs, particularly in agriculture and livestock, as part of the villagization process to support territorial stabilization.

Egypt: LEI sector partners continued efforts to strengthen the economic resilience of refugees, despite ongoing funding limitations and broader economic challenges. With the future enactment of the new asylum law, refugees may be granted the legal right to work and potentially have access to formal employment opportunities.

In the meantime, LEI partners delivered trainings and skill development programs to enhance employability. Refugees also received support with job placement and wage employment, helping them access income-generating opportunities. In addition, refugee-owned businesses were supported through grants, mentorship, and improved access to financing.

While inflation, limited market absorption, and competition for jobs remained key challenges, partners mitigated some impacts through strengthened private sector engagement and market linkage activities. These interventions contributed to improved livelihoods and self-reliance for refugees and host communities.

Ethiopia: During the reporting period, livelihood activities resumed through coordinated efforts among RRP partners. The regional government allocated 314 hectares of agricultural land at Ura Refugee Site, with 40 hectares designated for development during the main agricultural season. Land preparation has commenced across all camps, and procurement of agricultural inputs including seeds and fertilizers has been completed. Technical staff have been deployed to support implementation.

During the reporting period, 2,665 individuals completed entrepreneurship training, 421 received work permits out of the targeted 751, 806 opened bank accounts, and 632 market linkage opportunities were facilitated. To support diversified livelihoods, 450 vaccinated goats and 160 beehives were distributed to 120 beneficiaries, including members of the host community. Additionally, one Savings and Credit Cooperative (SACCO) received ETB 181,535 (approximately USD \$1,295) to strengthen its capacity to provide affordable loans and financial services, contributing to improved socio-economic well-being of its members. A bakery business was established with baking machines and accessories supplied, and a bakery house constructed. The connection to electricity is currently pending. Multipurpose cash



Sudanese refugee recently relocated to the Ura settlement in Benishangul Gumuz, Ethiopia, offers choice meat at the entrance. He used to be a chef at the Hilton Hotel in Khartoum until the outbreak of the Sudan conflict forced him to flee to Ethiopia. © UNHCR/Sona Dadi

assistance for basic needs, business startup support, and livestock provisions were implemented, benefiting approximately 1,399 households.

Libya: In 2025, the Livelihoods and Economic Inclusion (LEI) Task Force facilitated a series of community support initiatives, including Iftar gatherings and sports tournaments for men and women during Ramadan. 458 individuals received livelihood support. These events were held in Alkufra, Benghazi, and Ghat, with participants from host communities, third-country nationals, and Sudanese refugees. Additionally, the LEI Task Force organized social mixing activities and skills training sessions for Sudanese refugees. Ten individuals received startup toolkits to support their skill development and promote economic inclusion within host communities.

South Sudan: In the first half of 2025, 7,012 individuals benefited from livelihood support, including agricultural inputs, vocational training, entrepreneurship, business development and graduation livelihood programs. Women comprised over 65 per cent of participants across most activities. The livelihoods response continued to apply an area-based approach to promote social cohesion and shared economic benefits among refugees, returnees, and host communities.

Partners delivered skills training in catering, carpentry, tailoring, solar-powered ICT, and other vocational trades, while Village Savings and Loan Associations enabled participants to access savings, credit, and support for small business development. Financial inclusion efforts were reinforced through collaboration with Equity Bank, which supported account opening and access to credit. To promote environmental sustainability, briquette production and solar cooking initiatives were expanded in multiple locations, reducing dependence on firewood and mitigating deforestation risks.

On 25 June 2025, the Commissioner of Maban County, together with CRA, RRC, and local leaders, formally approved the allocation of 142 square kilometres of arable land to refugees, marking a pivotal milestone for refugee self-reliance and peaceful coexistence under the Global Compact on Refugees. This decision is expected to significantly bolster food security, livelihoods, and community integration in Maban.

Uganda: Between January and June, 15,639 Sudanese refugees benefitted from livelihoods and economic inclusion interventions including agro-based enterprise development, business skills and opportunities and provision of start-up kits. Additionally, 869 households were supported to access land reflecting an increase compared to same period last year. The marked increase is attributed to enhanced and concerted advocacy by partners to support refugees. With the ongoing food ration cuts in Uganda, coupled with year-on-year decline in funding for humanitarian and development efforts; refugees' own food production is critical in supporting food availability and food access at the household level.

Despite receiving 18,000 new arrivals, only 18 per cent, equivalent to 3,240 households, received emergency livelihood support. Overall, agriculture production support in 2025 declined compared to support provided during the same period in 2024. This is attributed to several contextual developments including the closure of several multi-year projects; downsizing of operations by response actors and de-prioritization of overall food security and livelihood support in humanitarian programming to focus on essential services and emergency lifesaving support.



Logistics, Supply & Telecommunications

Central African Republic: RRP partners deployed to the area of operation more than 0.8 million tons of miscellaneous items, including foods, basic household items, shelters and latrines building materials, water sanitation items, fuel, and spare part. From January to June 2025, approximately 17,591 liters of fuel were distributed for vehicles and generators in the area of operation. Vehicles and generators were also maintained and repaired with a total of 34 jobs undertaken. 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.

In response to the growing humanitarian needs related to the Sudan situation, internet was installed in remote field offices in Birao and Obo, where Sudanese refugees are hosted. This solution improved basic communication and reduced isolation for field teams but remains unstable and inadequate for efficient operations. More robust telecommunications solutions are needed to equip teams to operate effectively in these highly challenging environments.

Chad: In eastern Chad, 5,105 refugees were relocated from Adre border area to the Dougui and Kouchagine Moura sites. However, due to funding constraints, the pace of relocation was slow, with UNHCR relying on its limited fleet of trucks.

In Wadi Fira province, six UNHCR trucks and five rented vehicles were used to relocate 20,000 refugees from Tine spontaneous site to Iridimi, and 135 refugees from the Oure Cassoni border point to its nearby refugee site. To support shelter needs, 90,000 plastic sheets and 34,000 blankets were imported using UNHCR funds, and 6,000 family tents were delivered with transport support from MSC.

To address ongoing transportation challenges, UNHCR is importing 19 trucks expected to arrive in Chad by September. Meanwhile, heavy rains are causing seasonal floods, severely limiting road access to refugee sites and delaying aid delivery. Additionally, high fuel prices continue to be a significant operational concern.

Ethiopia: To support the emergency response to the Sudan situation and promote connectivity for refugees in Ethiopia, efforts were made in collaboration with local internet service providers to significantly expand internet access across refugee settlements and camps in the Amhara and Benishangul-Gumuz regions. Connectivity was successfully established in Aftit, Amhara region, as well as in Bambasi and Tsore camps and Ura, Benishangul-Gumuz. This improved connectivity is critical for delivering essential services, including refugee registration. To further improve digital inclusion, a comprehensive connectivity assessment was recently completed across all settlements and camps in the Amhara and Benishangul-Gumuz regions. The findings will inform future planning and support collaboration with the Connectivity for Refugees Initiative in 2025. Additionally, in partnership with Cisco, the refugee connectivity project is advancing implementation in Bambasi and Tsore camps. This initiative aims to establish internet access in key community areas such as schools, medical centres, markets, and youth centres, thus enhancing infrastructure for community support, education and integration.

South Sudan: In the first half of 2025, over 42,000 refugees and asylum seekers were safely transported from border entry points to transit centres. Out of those, UNHCR with support from IOM relocated 3,224 refugees from transit centres to refugee-hosting areas across South Sudan. This included 1,468 from Abyei to Aweil, 1,472 refugees from Renk to Aweil, 232 to Jamjang, and 145 to Maban.

The first half of 2025 coincided with the dry season, providing a critical window for partners to pre-position essential non-food items (NFIs) in key refugee-hosting areas ahead of the rainy season. Given the persistent challenges posed by poor road conditions and seasonal flooding—particularly in Upper Nile and Unity States—prepositioning was essential to minimize service disruptions. However, funding cuts significantly hampered these efforts, with several pipelines delayed or paused, undermining readiness for the rainy season response. While partners increased reliance on river transport along the Renk–Malakal–Jamjang corridor, insecurity in parts of Upper Nile and Jonglei disrupted key river routes and rendered several locations temporarily inaccessible. These combined constraints severely affected the ability to sustain uninterrupted humanitarian delivery during the peak of displacement and seasonal hazards.

The telecommunications infrastructure was sustained and expanded to support response operations. Internet and radio systems were installed or upgraded in key sites, including Renk and Wedweil, enabling real-time registration and case management. Additionally, several partners have adopted satellite-based internet solutions (e.g., Starlink), which significantly improves connectivity, increases bandwidth, and reduces costs, thereby enhancing operational efficiency across remote field locations.

Uganda: Between January and June, a total of 7,080 individuals were transported from Elegu border crossing points to Kiryadongo refugee settlement. This ensured timely and safe relocation of new arrivals, contributing to the broader protection and assistance objectives. However, the response faced a significant challenge due to the high cost of hiring buses, which strained available resources. The rate of arrival consistently outpaced UNHCR's internal logistics capacity, necessitating reliance on external transport providers.



Settlement & Shelter/Housing

Central African Republic: Progress was achieved in the first half of 2025 to improve shelter and infrastructure for Sudanese refugees in Birao's Korsi neighbourhood, through coordinated efforts by humanitarian and government partners. Construction began on a new nursery school at Nguerendomo and a health centre in the Ibongbi neighbourhood, alongside the launch of five semi-permanent shelters in Korsi.

To promote a more sustainable response, RRP partners adopted a shelter strategy based on distributing tarpaulins and allocating plots of land, enabling refugees to construct their own shelters. A total of 144 tarpaulins were distributed to 72 households who had already built shelter frames, resulting in 72 emergency shelters made by refugees from climate-appropriate local materials authorized by local authorities. Refugees' direct involvement in construction fostered

autonomy and resilience, while improving living conditions and strengthening social cohesion with host communities. The shelter response in Korsi highlights the value of collaboration between RRP partners and local authorities, demonstrating how sustainable, community-driven approaches can meet both immediate and longer-term needs in complex humanitarian contexts.

Chad: As part of the RRP, humanitarian partners carried out critical shelter interventions in the provinces of Sila, Ouaddaï, and Wadi Fira, targeting refugee sites in Kerfi, Kouchaguine-Moura, Iridimi, and Farchana. These efforts aimed to address the urgent needs of displaced populations, who faced heightened vulnerability due to ongoing insecurity and forced displacement.

Under the coordination of the Shelter Sector Group, RRP partners constructed 5,023 emergency family shelters and 26 community sheds. These structures provided essential living space and communal areas, benefiting a total of 20,092 newly arrived Sudanese.

The intervention has not only improved physical living conditions but also contributed to the overall well-being, safety, and dignity of the affected communities. By offering stable shelter, the response has reduced exposure to protection risks and environmental hazards and fostered a sense of security and community cohesion in an otherwise fragile humanitarian setting. Due to the large number of daily new arrivals, the need for communal and individual shelters, including public structures such as schools and health centres, continues to increase.



Sudanese refugees gather together, sheltering from the sun under trees and building makeshift shelters, at a temporary site in Koulbous, Chad, on the border with Sudan © UNHCR/Ala Kheir

Ethiopia: During the first half of 2025, wide-ranging shelter and site development interventions were carried out in the Ura and Aftit settlements, significantly improving living conditions and infrastructure in the settlements established to host refugees from Sudan. A total of 1,582 emergency shelters were constructed, 717 in Ura and 865 in Aftit, alongside 720 upgraded transitional shelters, with 598 in Ura and 122 in Aftit.

Site development activities included the improvement of 0.7 hectares of land, the construction of 8.6 km of access roads (5.5 km in URA and 3.1 km in Aftit), and the installation of 12 drainage structures (10 in Ura and 2 in Aftit), enhancing accessibility and resilience within the settlements.

Additionally, from January to June, 9,523 Sudanese refugees have received essential non-food items, available from existing stock, including soap, clothing, buckets, blankets, and sanitary napkins, supporting hygiene and household needs.

Libya: The Shelter and Non-Food Items (SNFI) Task Force coordinated the NFI distribution to 49,783 Sudanese refugees and host communities across 14 locations, namely Alkufra, Ajdabiya, Benghazi, Sebha and Tripoli. The NFI package includes blankets, mattresses, a jerry can, kitchen set, solar lamps, and tarpaulin to provide emergency shelter and protection from the elements. These efforts targeted urban and remote areas, addressing urgent needs among refugee populations. 100 units of fire safety equipment was provided to support preparedness efforts in Alkufra, especially in the farms where refugees are living in crowded spaces.

Despite these achievements, the sector continues to face significant operational challenges. Funding constraints have limited the scale, frequency, and consistency of humanitarian assistance. Furthermore, the suspension of activities of several international organizations in Western Libya has disrupted coordination and implementation among SNFI Task Force, delaying distributions and reducing overall coverage. Sustained support and improved access are urgently needed to ensure timely assistance to vulnerable populations.

South Sudan: Between January and June, RRP partners constructed 2,996 emergency household shelters and 13 communal shelters, providing life-saving housing assistance. These interventions were essential to ensuring safe and dignified living conditions for newly arrived refugees and asylum seekers amidst protracted displacement and recurring environmental shocks. Due to funding shortfalls and at the request of local authorities, the partners have consolidated the transit facilities in Renk, resulting in the closure of Transit Centre 1. A total of 552 refugee and returnee households were assisted with an integration cash grant. At the same time, services were either consolidated in Transit Centre 2 or moved to the host community.

To support longer-term stability, 201 transitional shelters were constructed in Jamjang, Wedweil, and Gorom settlements, benefiting 532 individuals. Additionally, 50 shelters were rehabilitated in Jamjang, benefiting 845 of the most vulnerable individuals, including female-headed households and those with specific needs. In Malakal, which serves as a key transit hub from Renk, upgrades of the communal shelters that started at the end of 2024 were completed to improve reception conditions. Moreover, a total of 14,193 individuals received essential non-food items (NFIs), including kitchen sets, dignity kits, clothing, jerry cans, plastic sheets, and solar lamps, contributing to improved hygiene, privacy, and living conditions.

Maintaining adequate reception capacity remains a critical priority considering ongoing conflict and shifting displacement dynamics. Investments in infrastructure—particularly flood mitigation, drainage, and shelter improvements—are essential to ensure that transit and reception centres can continue to receive and assist new arrivals safely and with dignity, especially as the rainy season progresses. At the same time, with a growing number of refugees choosing to settle in urban areas, there is a parallel need to strengthen integration approaches. Supporting access to services, livelihoods, and documentation in urban settings is key to promoting self-reliance, reducing aid dependency, and easing pressure on overstretched rural settlements.

Uganda: In the first half of 2025, A total of 9,342 individuals, approximately 2,000 households have been provided with emergency shelter kits upon plot allocation. This represents 100 per cent of all new arrivals who were relocated to Kiryandongo refugee settlement. Plastic sheeting, building poles, wire nails, and nylon ropes were provided through CBI, while the rest were provided in kind.

Limited partners focusing on shelter and infrastructure, coupled with shifting donor priorities, have placed immense strain on providing adequate shelter across all refugee settlements in Uganda. Due to reduced funding, no shelter support was provided to enable refugees upgrade from emergency shelters to transitional or semi-permanent. This has left refugees vulnerable and at times resorted to encroaching on the environment for alternative materials. Lack of funding for opening and maintenance of roads in refugee settlements has resulted in poor road conditions, limiting access to essential services and prompting new arrivals to relocate to more accessible areas, thereby distorting settlement patterns.



Water, Sanitation & Hygiene (WASH)

Central African Republic: Access to safe drinking water remains a critical challenge in Korsi. Two boreholes currently supply 280,000 litres per day to 26,750 people, providing only 10 litres per person—half the standard of 20 litres per day for post-emergency settings—due to the growing refugee population and funding cuts. Sanitation infrastructure includes 513 latrines (261 emergency, 252 semi-permanent), which remains insufficient for the population, posing a risk for disease outbreak. Since February 2025, 234 emergency showers were available, supplemented by family showers constructed by refugee households. RRP partners are working to increase latrine coverage. The latrine-to-person ratio has risen to 67, far exceeding the emergency threshold of 50 people per latrine.

Hygiene promotion activities by RRP partners reached over 7,213 households (18,609 people, among which 70 per cent of refugees) weekly, amounting to 173,112 households over six months. These activities included awareness-raising sessions on good hygiene practices, water point management, and sanitation maintenance. Hygiene kits were also distributed more than 60 handwashing stations were installed across Korsi, enhancing sanitation access and helping prevent disease while promoting dignity and security.

Chad: Between January and June, WASH partners in Chad continued to provide critical water, sanitation, and hygiene services to refugees, despite significant funding cuts and operational challenges. Efforts focused on sustaining access and preventing waterborne diseases. In the water sector, 71 of 90 planned boreholes (79 per cent), mainly by UNICEF, were drilled. However, only 13 km of the planned 92 km water network (14 per cent) was installed, along with 6 of the 25 reservoirs (24 per cent) and 23 of the 100 tanks (23 per cent). Eight boreholes were upgraded with hybrid solar pumps, and 12 of 20 water tankers (60 per cent) were deployed. All water networks in 21 settlements were maintained.

Sanitation progress was limited: only 3,016 of 21,825 latrines (14 per cent) were built, and just 2,034 of 24,000 households (8.5 per cent) received family latrine support. No communal latrines were installed in spontaneous settlements, which raised health risks. Key barriers included funding gaps, project delays, and issues with land access. Community-led efforts reduced costs, highlighting the need for flexible funding and sustainable solutions.

Egypt: WASH sector partners supported Sudanese refugees and host communities in key refugee-hosting governorates, including Aswan, Cairo, and Giza, where needs remain high. 37,500 reached with handwashing behaviour-change programmes. In parallel, 88,658 individuals were supported with WASH supplies. These efforts aimed to strengthen handwashing practices and promote improved hygiene behaviours among vulnerable populations. Coordination was carried out with the Ministry of Health and Population, Ministry of Education, Egyptian Red Crescent, UNICEF, and other key partners.

Ethiopia: As of mid-year 2025, WASH interventions in Ethiopia's refugee-hosting regions have made encouraging progress, despite persistent challenges. The average water supply across Aftit (10.8 L/person/day), Kurmuk (10 L/person/day), and Ura (20 L/person/day) reached 13.6 liters per person per day, approaching the emergency standard of 15 L/person/day.

Sanitation access also improved, with an overall latrine-to-user ratio of 1:16, meeting the emergency benchmark of 1:20. Aftit met the standard 1:20, while Kurmuk and Ura overachieved 1:14. In Ura, efforts are ongoing to shift from shared family latrines to individual family latrines, although progress is constrained by limited funding. In Aftit settlement, RRP WASH partners completed the permanent water supply installations, including boreholes, reservoirs, and a 9.5 km water distribution line. Full system activation is still pending. Hygiene promotion activities are being carried out by 16 community promoters using a variety of outreach methods. In Ura settlement, surface water treatment has been enhanced through the construction of a rapid sand filter unit and a clean water well, supporting inclusive water distribution to 5,000 individuals from the Akuda Tumet host community. Additionally, water line connections were extended to the primary school and health centre, supporting the school feeding program and improving healthcare delivery particularly in maternal and child health services.

Libya: The WASH Task Force supported 63,000 individuals with WASH interventions across refugee-hosting areas in Libya, with a strong focus on Alkufra. Key achievements in Alkufra included, the installation of prefabricated latrines, provision of solar-powered water pumping systems for boreholes, and the delivery of spare parts, submersible pumps, and water quality lab equipment to local authorities. Water purification tablets were also prepositioned to support emergency preparedness.

WASH infrastructure improvements included the maintenance of water and garbage trucks, the installation of electrical transformers on main water pumps, the provision of large waste containers, and the distribution of hygiene and dignity kits. The Task Force enhanced water quality and sanitation by distributing hygiene kits, water storage tanks, water purification tablets, and water testing kits. Across Libya, family hygiene kits, mobile latrines, and garbage trolleys were also distributed to support displaced populations and vulnerable communities.

Despite these efforts, the sector continues to face severe underfunding, hindering the expansion and sustainability of services, especially in remote areas like Alkufra, where WASH vulnerabilities pose significant public health risks.

South Sudan: Between January and June, the average water supply remained at 17 litres per person per day, in line with emergency standards. However, gaps persisted in locations such as Maban, where the supply dropped to 16 litres per person per day, and severe water shortages emerged in Renk, across the eastern corridor. The sudden arrival of hundreds of thousands of refugees and returnees, the majority settling outside the transit centres, overwhelmed existing water infrastructure. Several hafirs – water reservoirs – ran dry under pressure, leaving large segments of the population reliant on water trucking and unprotected water sources.

Sanitation coverage deteriorated, with only 35 per cent latrine coverage and an average of 49 persons per latrine, far exceeding the SPHERE standard of 20 persons per latrine. In response to the ongoing cholera outbreak, partners prioritised water treatment, latrine construction, and hygiene promotion in high-risk areas, including Renk, Maban, Malakal, and Jamjang.



Uganda: Between January and June, 75,859 Sudanese refugees were supported to access sustainably produced water. Water access was maintained at an average of 10 litres per day in Kiryadongo refugee settlement where Sudanese new arrivals are relocated. This is significantly below the emergency threshold of 15 litres per day. Latrine coverage reduced from 71 per cent in Q4 of 2024 to 69 per cent by mid-2025. This is attributed to the high arrival rate compared to funding available for the provision of household latrines. While latrine per person ratio was kept within the target of 1:50, there still exist a wide disparity between receiving settlements and non-receiving settlements, with the former having a disproportionately higher latrine ratio. To promote personal hygiene and environmental sanitation amongst the newly arrived, WASH partners deployed community hygiene promoters (Village Health Teams) at a ratio of 1 VHT to 681 persons to enhance hygiene promotion at household level.

Due to aged electromechanical equipment, the frequency of water system breakdown has increased hence the high cost of operation and maintenance. Global funding cuts have reduced funding for operation and maintenance, which has led to an overall 30 per cent reduction in water supply to protracted caseloads and a corresponding reduction in partner staffing. Besides, there is lack of funding for emergency response and HH latrine construction after settling new arrivals.

Regional Cross-Cutting Response



Age, Gender and Diversity

Central African Republic: Age, Gender and Diversity considerations are mainstreamed across all sectors of the RRP response in the Central African Republic. Community awareness and service delivery were adapted to reflect the diverse needs of women, girls, persons with disabilities, youth and elderly. In protection, safe spaces and child-friendly spaces ensured women, girls, and children at risk could access psychosocial support. Focus groups with persons with specific needs and protection monitoring have been deployed to ensure prioritization of the most vulnerable in the protection response. Awareness-raising campaign on children rights, prevention of GBV and peaceful cohabitation have been conducted on a regular basis. In shelter and livelihoods, women and marginalized groups were actively engaged in cooperative initiatives and shelter construction. Across all activities, community structures – comprising refugee and host community groups, along with youth and women's committees – were strengthened to promote inclusion and prevent harm.

Chad: A participatory evaluation based on age, gender, and diversity (AGD) was planned, utilising tools such as an updated Kobo form and a revised stakeholder training module tailored to the Chadian context, in line with the new policy. However, due to a funding freeze, implementation has been delayed for six months, with the hope that the necessary funds might be available.

In response to a new influx of Sudanese refugees in April 2025, a rapid assessment was conducted at the Oure Cassoni refugee site in Ennedi Est Province in May. A total of 175 participants, including new arrivals, refugees from 2023 to 2024, local authorities, and community leaders, participated in the exercise.

Fourteen focus group discussions were held, involving 37 per cent women, 25 per cent men, and 38 per cent children and adolescents, alongside semi-structured interviews. The evaluation identified urgent needs for new arrivals, including water, healthcare, food, shelter, NFIs, and solar lamps. For long-term refugees, key priorities included food, education, and sustainable livelihoods.

Egypt: The AGD approach was integrated across all sectors and sub-sector working groups, ensuring refugee response efforts were inclusive and responsive to diverse needs. Partners applied AGD principles in program design, implementation, and monitoring to promote equitable access to services. For example, Refugee-led structures representing various nationalities, genders, and age groups actively participated in coordination platforms, placing communities at the centre of decision-making. Participatory dialogues and focus group discussions with Sudanese women, men, youth, older persons, and persons with disabilities informed programming and outreach. Education partners adapted learning support for children with disabilities, while health actors prioritized maternal and reproductive health. Livelihood programs addressed barriers faced by women and older persons. Community feedback mechanisms were designed to be inclusive and age appropriate. The AGD lens also guided protection interventions, reinforcing accountability and ensuring services met the specific needs of diverse refugee groups.

Ethiopia: The implementation of the Age, Gender, and Diversity (AGD) approach advanced through stronger engagement with community-based structures in both Gende Wuha (Amhara) and Benishangul-Gumuz regions. In Gende Wuha, community structures were established across key sectors, including Security, WASH, health, protection, and education, to enhance community-based protection by promoting local ownership, improving coordination, and supporting timely response to protection concerns. In Benishangul-Gumuz, the Refugee Central Committee, Women's Committee, and Youth Group led six monthly awareness campaigns at the Ura site, reaching 4,438 individuals (1,904 women). These sessions addressed key protection risks, including child marriage, child labor, PSEA, and GBV. Despite these efforts, delays in finalizing partnership agreements and security challenges, particularly in Amhara region, hindered broader community engagement activities. Strengthening the capacity of newly established community

structures and providing refresher trainings on Accountability to Affected Populations (AAP), Fraud Prevention, PSEA, and Gender Equality remain priorities requiring further support.

Libya: All RRP partners in Libya have integrated targeted measures to address the specific priorities, challenges, and barriers faced by Sudanese refugees in alignment with the Age, Gender, and Diversity (AGD) approach. To ensure no one is left behind, the partners engage in active community engagement. Outreach teams supported by trained community mobilizers foster direct dialogue, share life-saving information, and build trust between refugees, host communities and protection actors.

South Sudan: RRP partners continued to strengthen the integration of Age, Gender, and Diversity (AGD) considerations across all sectors of the Sudan response in South Sudan. In line with the AGD Policy and the Global Compact on Refugees, the response seeks to ensure that the distinct needs, capacities, and voices of all individuals—especially women, children, older persons, persons with disabilities, and other marginalized groups—are systematically reflected in planning, implementation, and monitoring.

In 2025, response monitoring included a strong focus on age, gender, and disability disaggregation, enabling more inclusive analysis and targeted programming. Partners also continued efforts to improve the availability and use of disaggregated population data by age, sex, and nationality, building on progress made in 2024 to inform evidence-based decision-making across the RRP.

Uganda: In the first half of the year, Uganda has taken proactive steps to strengthen regional refugee engagement and representation. Notably, Uganda is actively contributing to the newly established Regional Engagement Forum (REF)—a structured advisory platform composed of forcibly displaced representatives from across the East and Horn of Africa and Great Lakes (EHAGL) region. The REF is designed to amplify refugee voices in regional and strategic processes, and to foster cross-border learning—particularly critical in the context of multi-country displacement crises such as the ongoing Sudan emergency. Uganda's well-established refugee leadership structures, including national REF members, are playing a key role in feeding into this platform to ensure inclusive representation and alignment with national priorities. This engagement reflects Uganda's continued commitment to participatory approaches and regional collaboration in refugee response planning and policy development.



Disability Inclusion

Central African Republic: Inclusion of persons with disabilities (PWD) remained a cross-cutting priority. PWD specific needs are systematically registered in ProGres during the registration process and additional individual protection interviews conducted to ensure that protection activities are adapted to the conditions of each and facilitate prioritization for assistance activities, such as distribution and medical support. Community outreach and referrals were supported by a mixed refugee-host child protection committee in Korsi, trained to identify and report children at risk, including those with disabilities. In health and WASH, improvements to infrastructure design sought to increase accessibility, though gaps remain in accessible latrines and assistive devices. Refugees with disabilities also benefited from inclusion in livelihoods cooperatives and awareness campaigns, though further investments are needed to mainstream accessibility across all sectors.

Chad: In Ouaddaï Province, 1,052 refugees with physical, hearing/deaf, mental, and visual disabilities were documented. Among them, 410 had physical disabilities, with 328 receiving support such as crutches and tricycles. Psychosocial support was provided to 40 per cent of those with hearing impairments, 60 per cent of those with mental disabilities, and 55 per cent of those with visual impairments. In Wadi Fira and Ennedi East provinces, 2,345 refugees with disabilities were recorded, including 1,142 visually impaired, 406 hearing impaired, 378 with mental disabilities, and 419 with physical disabilities. Some received assistive devices, such as crutches and tricycles.

Despite an individual case response plan, specific needs, particularly for children with hearing and visual impairments who require education and specialized care, have not been met. These gaps in inclusive support are primarily due to ongoing funding freezes, limiting the ability to provide adequate assistance to vulnerable refugees with disabilities.

Egypt: Established in early 2025 under the PWG, the Disability Inclusion Task force, co-chaired by UNHCR and Humanity & Inclusion organization, aimed to promote an inclusive humanitarian response in Egypt that upheld the rights, dignity, and participation of refugees with disabilities. In June 2025, the Task force launched a training series targeting members of the protection sector, as well as key actors from other sectors and sub-sector working groups, to strengthen disability mainstreaming across Egypt's refugee response. The first two modules focused on introducing the principles

of disability inclusion and integrating inclusive approaches into data collection and analysis, with active collaboration from the Information Management Working Group. These trainings aimed to enhance the quality of reporting and monitoring by equipping participants with practical tools and knowledge.

Ethiopia: In the Aftit settlement, verification of persons with specific needs (PSNs) was conducted through both home visits and at the protection desk. As a result, 140 elderly individuals and persons with disabilities were verified. Additionally, focused discussions were held with 62 persons with disabilities, during which key concerns such as access to food distribution, limited accessibility to shelters, inadequate medical services, and ongoing safety concerns affecting their overall well-being were raised. In the Benishangul-Gumuz region, funding constraints for PSN services impacted the program as early as 2024. In 2025, there were delays in the signing of the partnership agreement with the newly designated disability inclusion partner and consequently, a delay in the implementation of planned activities.

Libya: RRP partners in Libya are committed to strengthening inclusion by prioritizing meaningful engagement with persons with disabilities. Outreach efforts were expanded to reach remote and underserved areas, ensuring that all Sudanese refugees, regardless of location or ability, are included in decision-making processes that impact their protection and well-being. By embedding Age, Gender, and Diversity (AGD) sensitive methodologies into all interventions, and promoting active participation in community engagement activities, the RRP partners ensured that refugees are not only informed but also empowered to influence the decisions and services that affect their lives.



Sudanese refugees in South Sudan reflect on the hardships they endured, such as Omar, who had to have his leg amputated after developing an infection likely caused by hours of walking to reach the Joda/Wantau border crossing in Renk. © UNHCR/Philip James Lukudu

South Sudan: RRP partners are committed to promoting the rights, dignity, and meaningful participation of persons with disabilities across all sectors of the response. Efforts focused on ensuring equal access to protection, assistance, and opportunities through inclusive programming, targeted outreach, and strengthened partnerships with organizations of persons with disabilities.

Between January and June, a total of 1,176 persons with disabilities—including 86 children—benefited from targeted services within GBV and child protection programming, including psychosocial support, case management, and safe referral pathways. These efforts contributed to a more inclusive and protective environment for displaced persons with disabilities, particularly in high-risk settings such as transit centres and informal settlements.

Partners continue to work towards mainstreaming disability inclusion across the response, with an emphasis on removing physical, communication, and attitudinal barriers that hinder access to services.

Uganda: A total of 4,100 PSNs were recorded and verified either through the registration process or during the PSN verification assessment conducted in February. Among them, 1,253 refugees had serious medical conditions and 998 refugees had either physical, hearing/deaf, mental, and visual disabilities. Other recorded PSN categories include older persons, women at risk, single parents, children at risk, and UAM. Partners worked closely to support refugees with disabilities through different modalities, either through cash support or in-kind assistance. Overall, shelter remains a significant challenge, as the high cost of materials makes it difficult for many, especially persons with disabilities, to improve their living conditions.



Youth

Central African Republic: Youth engagement was central to the refugee response in the Central African Republic, especially in education, protection, and community leadership. Refugee youth play active roles in awareness campaigns on hygiene, girl's education, and peaceful coexistence. Others engaged in creative and sporting activities through child-friendly spaces or led peer-support activities as youth focal points. Over 500 youth and adolescents attended French courses in Birao, supporting their social, economic, and educational integration. A weekly French conversation club was launched in Korsi, creating space for young people to express themselves and build language skills. Additionally, 30 Sudanese refugee youth whose university education was interrupted due to the war received DAFI scholarship and are attending a tertiary French bridging program before integrating into national universities. Nonetheless, the enrolment rate of refugees at the tertiary level remains below 1 per cent, underscoring the need for more higher education opportunities for refugee youth.

Chad: To enhance the protection and resilience of young refugees in eastern Chad, UNHCR has implemented a vocational training and socio-economic integration program. The initiative supports access to higher education for over 600 students, including 17 per cent from host communities, through scholarships and tuition fee coverage. Additionally, 300 young refugees completed vocational training in IT, carpentry, and pastry-making, while 230 youth, including host community members aged 15–35, received entrepreneurship support focused on small-scale trade. In the agricultural sector, 1,772 youths in Ouaddaï, 1,116 in Sila, and 610 in Wadi Fira and Ennedi-East (ages 18–35) were supported to launch income-generating activities.

Despite these achievements, several challenges persist. These include limited financial resources to scale and sustain activities, inadequate access to educational materials, insecurity in certain areas, and socio-cultural barriers, particularly those hindering young women's participation. Addressing these challenges requires additional funds, strengthened collaboration with development actors and local authorities as well as greater investment in community engagement.

Egypt: Partners implemented diverse activities targeting refugee youth to promote protection, well-being, and self-reliance. In the education sector, youth benefited from accelerated learning programs and vocational training to address gaps caused by disrupted schooling. Livelihood actors provided life skills training to enhance employability and resilience for Sudanese youth refugees. Protection partners facilitated youth-led initiatives, peer support groups, and recreational activities to strengthen social cohesion and mental well-being. Refugee youth also participated in community dialogues and feedback mechanisms, ensuring their voices informed programming. These efforts reflected the AGD approach, ensuring that youth of different genders, backgrounds, and abilities were meaningfully included in the refugee response across all sectors.

Ethiopia: In the first half of 2025, youth programming under the Sudan RRP in Ethiopia faced significant constraints due to severe funding cuts and the absence of earmarked support for youth-specific interventions. As a result, youth-focused activities were deprioritized in most locations. In Benishangul-Gumuz and Amhara regions, programming was limited to minimal engagement efforts, primarily through small-scale sports and recreational activities aimed at maintaining youth participation and morale. This reduction negatively impacted efforts to promote youth protection, skills development, and community engagement. Dedicated funding is urgently needed to re-establish structured youth initiatives and ensure the meaningful inclusion of young refugees in the overall response. Despite these challenges, in

Benishangul-Gumuz, youth-friendly services continued; four youth centres remained operational, offering psychosocial support and recreational activities. These interventions reached 300–350 youths daily, 44 per cent of whom were female. Community-based initiatives were also launched through youth facilitators and clubs focusing on Sexual and Reproductive Health and Rights (SRHR), arts, peer support, and sports.

Libya: The RRP partners in Libya have actively prioritized the specific needs of children and adolescents, particularly those at heightened risk such as unaccompanied and separated children, in the design and implementation of their activities.

South Sudan: RRP partners continued to prioritize youth empowerment by expanding access to practical skills, education, and financial resources that support long-term resilience and economic inclusion. Between January and June, 500 refugee youth (288 male and 212 female) benefited from tailored skill development opportunities, including vocational training in high-demand fields such as tailoring, carpentry, solar ICT, and catering. Many of these youth were also supported with access to finance through Village Savings and Loan Associations and entrepreneurship programs—enabling them to start small businesses and pursue income-generating activities. Despite these efforts, access to formal education remains a critical challenge for refugee youth. Secondary gross enrollment dropped to 11 per cent in the first half of 2025, a 3 per cent decline from 2024. This decrease was driven mainly by overcrowded classrooms, teacher shortages, and the destabilizing effects of displacement on household income and mobility.

Youth enrolled in secondary school also benefit from complementary support through school feeding programs and psychosocial assistance, which have proven critical in improving attendance and retention, particularly for girls. Expanding access to both education and livelihoods remains essential to unlocking the potential of refugee youth and preventing harmful coping mechanisms.

Uganda: Between January and June, the response in Uganda took proactive steps to support empowerment and self-reliance among youth in particular. Partners supported two skilled youth groups (comprising 10F, 10M) with startup kits to improve their household incomes and attain self-reliance. Additionally, one Sudanese football team participated in the social sports event that was organized to enhance social cohesion and peaceful coexistence between refugees and the host community. Each participating football team was awarded UGX150,000 (approximately USD 43) to support in team building. Despite these efforts, the scale of programs targeting youth remains low and needs to be prioritized noting that the youth constitute a significant proportion of the Sudanese population.



Accountability to Affected People (AAP)

Central African Republic: AAP remains a core pillar of the refugee response in the Central African Republic. The community information & feedback centres in Korsi and Bria continued to provide information and respond to complaints, with regular feedback sessions helping to strengthen trust. In other regions, protection monitoring, and ad hoc missions have been conducted to collect refugees and host communities' concerns and discuss needs. Community structures and focal points have been supported and strengthened to facilitate information sharing in remote areas. Information campaigns on rights, available services, and complaint mechanisms were delivered to 1,098 refugees from April to June 2025. Refugees participated in assessment and planning processes, including the creation of a new mixed committee with equal refugee-host membership in Birao. Feedback loops and consultations helped improve the design and implementation of activities across protection, shelter, WASH, livelihoods, education, health, and food insecurity in response to community priorities.

Chad: In eastern Chad, accountability is a key strategy to improve the humanitarian response. Under UNHCR's leadership, an AAP coordination framework is active in Abéché, with over 25 partners and 50 focal points across the region, including three task forces, one of which is located in Farchana (Assounga department).

In 2025, activities focused on communication, transparency, complaint and feedback management, guided by a jointly approved action plan. UNHCR and its partners (NIRVANA, APLFT) conducted 295 communication sessions, reaching 139,375 refugees, including those in Abéché, Oure Cassoni, Goz Beida, and Farchana. Messages covered available services, free access to aid, accountability, SEA, and zero-tolerance policies.

Through Information and Feedback Centres (CIF), 22,252 complaints were collected. Of these, 12,581 were referred to sectors such as shelter, health, education, and protection. Feedback was provided in 5,835 cases, ensuring responses to community concerns. However, ongoing engagement and resources remain crucial to sustaining and expanding accountability efforts.

Egypt: To strengthen accountability to affected communities, the partners focused on improving communication, participation, and inclusion. For example, CBP partners held structured community dialogues with 495 Sudanese refugees, asylum-seekers, and new arrivals. These two-way discussions helped ensure that refugees could share their concerns and that their changing needs were understood. Participants highlighted legal and physical protection as top priorities, especially issues related to registration, documentation, residence permits, detention, and long-term solutions. Access to basic services was also a key concern.

Ethiopia: During the reporting period, UNHCR strengthened Accountability to Affected Populations (AAP) by establishing a feedback committee at Ura refugee site, which addressed 24 client submissions 50 per cent from women, averaging 4 per month. Feedback and Response Mechanisms (FRM) were harmonized, and a joint FRM pilot is planned for Q3 2025 in three refugee sites, including Sherkole and Ura. In Benishangul-Gumuz, community-based complaint mechanisms were set up in Ura and Kurmuk, while in Assosa, camp-level committees responded to feedback weekly. Child discussion forums were held monthly to include children's voices in programming. Suggestion boxes and community focal points were also introduced to enhance feedback collection and responsiveness.

Libya: AAP framework is established, featuring multi-channeled complaint and feedback mechanisms (CFM). CFM allows Sudanese refugees to communicate their needs and serves as a pathway for onward referral. Help pages provide information on procedures, available assistance and services, as well as individual agencies' hotlines and communication channels. Close cooperation and feedback are facilitated through Focal Group Discussions with the Sudanese community and newly arriving refugees, ensuring that targeted assistance is needs-based and that timely adjustments to activities are made. Community-based care arrangements are operational, providing support to individuals with heightened protection needs, including unaccompanied and separated children and women at risk.

South Sudan: RRP partners continued to strengthen community engagement and accountability mechanisms throughout the first half of 2025. Participatory assessments, including focus group discussions and consultations with refugee communities, enabled individuals to voice their priorities and shape programme design. The inter-agency Complaint, Feedback and Referral Tracking Mechanism recorded 1,296 entries, with legal issues emerging as the most frequently raised concern (356 cases). Feedback was used to guide adjustments in programming and service delivery, thereby improving transparency and trust between communities and responders.

To enhance accessibility and responsiveness, partners maintained multiple community reporting channels—including hotlines, suggestion boxes, and help desks—across key locations. These efforts contributed to a more inclusive, responsive, and rights-based refugee response, in line with the Core Humanitarian Standard on Quality and Accountability.

Uganda: Efforts to strengthen accountability to affected persons have focused on enhancing communication with Sudanese refugees and ensuring their voices are heard in service delivery. 132 calls were received through the We.Link (former Feedback, Referral, and Resolution Mechanism (FRRM)) channels, with concerns primarily related to registration, food assistance, and service delivery challenges. In addition, village meetings were conducted to provide feedback and engage communities in dialogue. Despite these efforts, only 0.75 per cent of refugees reported having access to safe feedback and response mechanisms, highlighting a critical gap in awareness, accessibility, or trust in existing platforms. Strengthening two-way communication and scaling up safe, confidential feedback channels remains a priority for the second half of the year.



Protection from Sexual Exploitation and Abuse (PSEA)

Central African Republic: UNHCR and partners conducted awareness sessions with refugee, returnee, and host community leaders on protection sexual exploitation and abuse, and the existing reporting mechanisms in Korsi, reaching 199 women and 167 men. A confidential complaints and feedback mechanism was also established in Korsi to facilitate the reporting of sexual exploitation and abuse allegations.

Chad: Between January and June, UNHCR implemented key activities to strengthen Protection from Sexual Exploitation and Abuse (PSEA) at both organizational and inter-agency levels, despite budget constraints. Staff and personnel from contracted security (56 agents) and hygiene companies (16 workers) received targeted PSEA training. In eastern Chad, 28 UNHCR staff were also trained in response to the Sudan emergency.

As lead of the sub-national PSEA network in the East, UNHCR coordinated the rollout of the inter-agency action plan, including four PSEA training sessions for 102 frontline workers from UN agencies RRP partners. Over 1,000 visibility materials promoting zero tolerance and reporting channels were distributed in high-risk sites, translated into local languages.

In response to the escalating emergency in Wadi Fira, a dedicated PSEA response plan was developed for implementation in the second half of 2025. However, challenges remain, particularly in mainstreaming PSEA across sectors and the urgent need for a joint risk assessment in refugee-hosting sites.

Egypt: The PSEA Network conducted a comprehensive mapping exercise to assess how member organizations received and responded to complaints and feedback, particularly from affected communities. The review identified significant gaps, notably the need for more accessible, child-friendly, and disability-inclusive reporting channels. In response, a two-day Training of Trainers (ToT) was organized for staff from member organizations. The training covered core PSEA principles, safe handling of gender-based violence (GBV) disclosures, child safeguarding, and the AAP framework, with a strong emphasis on inclusive practices. As a direct outcome of these efforts, the Network moved forward with finalizing interagency sexual exploitation and abuse (SEA) referral procedures to strengthen coordinated responses. However, global funding constraints posed challenges, limiting the capacity of some member organizations to fully implement planned PSEA activities. Despite these limitations, the Network remained committed to enhancing protection mechanisms and ensuring that all community members could safely report concerns and access support.

Ethiopia: In Metema and Assosa, efforts to prevent and respond to sexual exploitation and abuse (SEA) focused on training 70 incentive workers and partners, raising awareness among over 10,500 individuals during food distributions, and promoting community-based reporting. Inclusive messaging targeted vulnerable groups, while multiple confidential reporting channels and referral pathways were strengthened in collaboration with RRP partners, reinforcing a survivor-centred and protective environment.

Libya: All RRP partners in Libya have identified PSEA focal points, and different agencies organized PSEA training for their staff during the reporting period. Furthermore, sexual exploitation, abuse and harassment (SEAH) risk mitigation measures were mainstreamed in all Task Forces' activities, and complaint mechanisms were established. Refugees were made aware of these mechanisms, including on how to report, during awareness sessions and posters and information leaflets were available at the registration centre in Tripoli, the registration centre in Alkufra that is managed by Eastern-based authorities and in all community spaces where refugees would gather, such as the Community Day Centre in Tripoli (prior to its closure due to the suspension of international NGOs in the West), and distribution sites.

South Sudan: RRP partners continued to strengthen PSEA awareness, prevention, and response mechanisms across the response. Between January and June 2025, awareness-raising sessions reached 8,873 individuals, promoting understanding of rights, reporting pathways, and survivor-centred principles. In parallel, 155 staff and community leaders were trained on PSEA core standards, safe disclosure, and referral procedures to reinforce accountability and trust.

Information materials were distributed in English and Arabic across key response locations to ensure accessibility and inclusivity. PSEA Task Force meetings were held regularly in Renk, Maban, Jamjang, and Aweil, providing a platform for inter-agency coordination and case referral.

Despite these efforts, underfunding significantly constrained the scale of assistance to survivors and limited the rollout of community-based reporting mechanisms—particularly in remote and high-risk areas. Sustained investments are required to ensure that all refugees have access to safe, confidential, and effective PSEA reporting and support services.

Uganda: Between January and June, partners implemented targeted actions to strengthen Protection from Sexual Exploitation and Abuse (PSEA) across affected communities. These included training of 30 volunteers from refugee and host communities on protection principles, safe case management, GBV, Child Protection, and safe referrals. In addition, 17 support staff and 12 newly appointed police officers were trained on the Code of Conduct and ethical handling of SEA cases. A joint PSEA risk assessment was conducted to identify key risks and inform planning, with 32 participants—including government officials and partner staff—trained in risk assessment tools. Furthermore, training sessions were held for 42 stakeholders, including local authorities and partners, to strengthen SEA prevention, reporting, and response mechanisms. Approximately 40 community members, including women, persons with disabilities, and the elderly, participated in SEA consultations, with continued awareness sessions conducted for new arrivals. These efforts reinforced safe environments, promoted accountability, and ensured survivor-centered SEA responses.



Sub-sector: Mental Health and Psychosocial Support (MHPSS)

Central African Republic: MHPSS was integrated across sectors including child protection, education, GBV, and health. In Korsi, refugee children benefited from recreational, cultural, and creative sessions at the child-friendly space, contributing to emotional recovery and social connection. Survivors of GBV and children with specific needs received case management and psychosocial support, with referrals to medical services where needed. Refugee youth also contributed to peer-led activities that strengthened wellbeing. In collaboration with the health district, mental health support was delivered through community health structures, with severe cases referred to secondary care. Across all sectors, a total of 442 individuals were supported received individual MHPSS consultations. Despite these efforts, gaps remain in specialized services, including for adolescents and survivors with complex trauma histories.

Chad: The MHPSS needs of over 1.2 million Sudanese refugees in Eastern Chad, particularly women and children (85 per cent of new arrivals), have escalated, with widespread cases of psychological distress, depression, anxiety, PTSD, and substance use disorders. Despite funding constraints (only 30 per cent of required resources secured), the Chadian government, UNHCR, and partners are working to meet urgent MHPSS needs.

Key interventions included the coordination via the MHPSS Technical Working Group at national and field levels, deploying 14 psychologists and reaching 13,000+ individuals with Psychological First Aid and basic support; integration of MHPSS into primary health care, with a 200 per cent increase in mental health consultations in Oure Cassoni and Iridimi camps; support to survivors of SGBV, with 100 per cent of reported cases receiving psychosocial care; capacity building, with a new MHPSS expert (funded by the Netherlands) supporting staff and community training.

The scale of needs continues to outpace resources. Urgent funding and coordination are required to ensure sustained, quality mental health services for both refugees and host communities in Eastern Chad.

Egypt: MHPSS services were delivered by a wide range of sector partners, including CBP, Child Protection, Health, and Education actors. These services aimed to promote the mental well-being and resilience of refugees affected by conflict, displacement, and trauma. MHPSS interventions included psychological first aid, individual and group counselling, structured recreational and psychosocial activities for children and youth, and community-based peer support. Specialized mental health care was provided through referrals to trained professionals within the health sector. In addition, MHPSS was integrated into schools and community centres to ensure safe spaces for emotional expression and healing. Capacity building for frontline workers, teachers, and community volunteers was a key component, enhancing their ability to identify and support individuals in distress. These efforts were coordinated across sectors to ensure a holistic, culturally appropriate, and accessible response that strengthened community coping mechanisms and supported long-term recovery.

Ethiopia: During the reporting period, 1,280 mental health consultations were conducted across Ura (692) and Aftit (588). Common conditions included depression, anxiety, acute stress, psychosis, and PTSD. Seven suicide attempts were recorded: four in Ura (1 male, 3 females) and three in Aftit (all female). MHPSS awareness sessions reached 5,054 individuals in Ura and 2,846 in Aftit. In Aftit, 81 individuals, including 14 MHPSS committee members were trained in psychological first aid. In Ura, 396 caregivers and 394 incentive workers were trained in basic psychosocial skills, enhancing community-based support and referrals. Additionally, 12 health staff in Ura were trained under the Mental Health Gap Action Program (mhGAP) program to improve identification and management of mental, neurological, and substance use conditions. Child and adolescent-focused interventions included 391 counselling sessions in Aftit (82 per cent improvement rate) and 96 in Ura, along with support for 33 GBV survivors. Key challenges include limited psychotropic supplies, lack of private counseling spaces (Ura), and absence of youth programs, contributing to increased substance use and risky behaviors among youth and women resorting to harmful coping mechanisms to manage stress. Sustained funding is urgently needed.

Libya: Protection case management is a vital and often long-term process under general protection, aimed at supporting individuals facing serious protection risks. It involves assessing individual's needs and referral to appropriate services, such as MHPSS, legal aid, or healthcare. Psychosocial support is a core element throughout the entire case management process. Since the suspension of international NGOs in the West, the lack of available specialized MHPSS services is particularly alarming, especially as levels of distress among the Sudanese population remain high. Without adequate mental health support, the effectiveness and positive outcomes of case management are significantly reduced.

South Sudan: Despite growing needs, MHPSS services remained limited due to funding shortfalls. Between January and June 2025, 286 individuals—mainly GBV survivors—received psychosocial support, including counselling, safe spaces, and community-based activities. Partners worked to maintain essential services by training frontline workers and reinforcing referral pathways. However, access remains critically low, especially in overcrowded transit sites, where the psychological toll of displacement is acute. Additional resources are urgently needed to meet the scale of demand.

Uganda: Between January and June, targeted MHPSS interventions were implemented to address the needs of new arrivals from Sudan. A total of 41 individuals (34 females, 7 males) experiencing psychosocial distress were enrolled in case management and linked to essential services, receiving structured support and follow-up to foster resilience. Additionally, 40 female clients with moderate mental health challenges participated in interpersonal group therapy sessions, which provided safe spaces for emotional healing, peer support, and coping skill development—particularly for youth and survivors of trauma. Furthermore, 500 new arrivals (250 females, 150 males) were reached through community-based para-counsellor-led household awareness campaigns, enabling early identification of at-risk individuals, provision of psychological first aid, and referrals to appropriate services, thereby strengthening community-based care pathways.



Localization

Central African Republic: In 2025, UNHCR adopted a new partnership model in the Central African Republic to reinforce national capacity and foster equitable collaboration. By pairing international and national NGOs in consortiums, the model enabled joint planning, resource sharing, and capacity-building, expanding national actors' roles in protection, education, WASH, and shelter. Refugee and host community participation was central to service delivery, with community committees participating in local initiatives in child protection, shelter construction, and hygiene promotion. A new mixed committee of refugees and host-community leaders was also created to strengthen intercommunal communication, collaboration and solutions. Local authorities remained key partners, facilitating land allocation, authorizing use of local materials, and supporting cross-sectoral coordination. The protection monitoring project applies a community-based protection (CBP) approach aimed at strengthening and revitalizing community liaison structures and protection committees. The model has improved operational efficiency, strengthened community trust, and helped shift the response toward locally led, sustainable solutions.

Chad: As part of localization efforts, a database of 282 RLOs across both old and newly established refugee sites in eastern Chad is being utilized. Meanwhile, the legal registration process for six additional RLOs is underway with the Ministry of Territorial Administration in N'Djamena to obtain official authorization, a prerequisite for accessing funding.

A localization strategy has been developed and validated for eastern Chad. Upcoming steps include developing an action plan to implement the strategy, designing community project proposals by the RLOs, and providing technical support to help them meet funding requirements. These efforts aim to strengthen the role and capacity of refugee-led organizations in humanitarian response, promote sustainable solutions, and enhance community ownership and participation in addressing local needs.

Egypt: Localization efforts in Egypt have focused on supporting RLOs to take a leading role in protection activities. In line with this, partners have promoted community-driven solutions that put refugees at the centre of decision-making. A key example took place in Alexandria in April 2025, where 45 RLOs took part in targeted capacity-building sessions. As a result, five community committees were formed, covering health, development, special needs, psychosocial support, and relief, each led by elected refugee representatives. This initiative marked a shift from receiving aid to leading community efforts. RLOs began conducting needs assessments, coordinating services, and mobilizing resources. The experience strengthened refugee leadership and created a sustainable, community-led model that continues to guide protection work along Egypt's North Coast. In addition, RLOs are participating more and more in the Refugee Coordination Model in Egypt at sectoral level.

Ethiopia: Local authorities, regional governments, and host communities in Ethiopia have played a central role in responding to the Sudan crisis, providing essential services at border areas and transit centres, and participating in the selection of new settlement sites through inclusive assessments involving refugees, host communities, and all levels of government.

In 2025, beyond the two RRP-appealing national partners, national NGOs, government entities, refugee representatives, incentive workers, and volunteers have supported service delivery in areas such as WASH, protection, and awareness-

raising on health, GBV, and child protection. Ongoing insecurity in the Amhara region has further underscored the need to localize protection and assistance efforts. To strengthen this approach, a nationwide mapping of community-based organizations (CBOs), including forcibly displaced-led and host community organizations was conducted, identifying 241 CBOs across Ethiopia. In the Sudan refugee-hosting regions, 15 CBOs in Benishangul-Gumuz and 12 CBOs in Amhara were mapped. While funding limitations have constrained deeper engagement, the mapping provides a strong foundation for future collaboration, capacity building and inclusion of CBOs in the response. This offers a comprehensive picture of grassroots structures that can be leveraged for more localized and sustainable programming.

Libya: In Libya, 20 partners, comprising seven UN agencies and 13 INGOs, are a part of the RRP. While many national organizations are implementing activities funded by these partners, none are directly listed as RRP actors. In March, the operations of 10 out of 13 RRP-participating INGOs were suspended and offices in Western Libya officially sealed. The authorities have indicated a desire to see greater engagement and implementation of activities through national partners. Through expanded partnerships, the RRP partners are engaging further with national NGOs, which have become increasingly engaged in delivering emergency assistance.

South Sudan: In 2025, the South Sudan RRP engaged 13 national NGOs—including one refugee-led organisation (RLO)—reflecting a continued commitment to localization and community-driven response. Working with RLOs ensures that refugees are not only recipients but also active agents in the design and delivery of services, bringing deep contextual knowledge and trust within communities.

Through a dedicated programme supported by UNHCR, five RLOs received targeted funding to implement community-based activities, particularly in protection, GBV prevention, and peaceful coexistence. These partnerships enabled more inclusive, locally grounded interventions that responded directly to the priorities of affected populations.

However, funding constraints led to a reduction in the number of local partners compared to 2024, risking setbacks in local ownership and sustainability. Strengthening the role of local actors remains essential to building a more accountable, equitable, and resilient refugee response.

Uganda: Uganda's refugee response continues to prioritize the advancement of a locally led approach. In line with its pledge made during the 2023 Global Refugee Forum, and under the leadership of the Ministry of Local Government, the Government of Uganda is currently developing a comprehensive Localization Strategy. This strategy aims to clearly define what localization means within the Ugandan context and to articulate the roles and responsibilities of local actors in the response.

Additionally, and as part of these ongoing efforts, four national non-governmental organizations (NNGOs) and one refugee-led organization have been actively engaged in the Sudan response. This engagement is facilitated through a twinning arrangement with international NGOs, designed to promote skills transfer, enhance the capacity of local actors to mobilize resources, strengthen accountability mechanisms, and elevate the leadership role of local organizations in humanitarian response.



Climate Action

Central African Republic: Sustainable energy and natural resource management were integrated into several sectors in the Central African Republic. In Birao, solar installations are used for water borehole systems to reduce reliance on generators. Local construction materials were prioritized for emergency shelters, reducing environmental impact. Community-based gardening initiatives combined agricultural training with water conservation strategies, including construction of a borehole and water tower for dry-season irrigation. These efforts have helped strengthen climate-resilient livelihoods among refugees and host communities. However, further investment in reforestation, energy-efficient cooking, and flood preparedness is needed to mitigate environmental risks and build greater resilience.

Chad: Notable progress has been made in advancing a national strategy to improve energy access and environmental protection, particularly in areas hosting refugees in the east. New initiatives launched in 2025 include the installation of off-grid and mini-grid solar systems to provide clean, reliable electricity, as well as the promotion of clean cooking solutions, such as improved cookstoves, eco-charcoal, gas, and solar cookers, to reduce reliance on fossil fuels and improve health outcomes.

Despite pressure on natural resources due to the influx of refugees, targeted reforestation efforts have begun, including tree-planting campaigns. While financial constraints have limited the rate of implementation, these efforts mark a step toward sustainability.

The initiatives aim to reduce carbon emissions and enhance community resilience by improving energy access, lowering resource-related tensions, and fostering dignified living conditions. However, challenges remain, including minimal funding, low awareness of sustainable practices, and the need for stronger local capacity. Expanding partnerships and mobilizing resources are crucial for achieving a lasting and desired impact.

Ethiopia: In Benishangul-Gumuz, natural resources in all refugee camps have been safeguarded through systematic guarding and close supervision. Soil and water conservation measures were implemented across 9 km of erosion-prone areas within camps and host communities. Additionally, 2 km of terracing was constructed to reduce soil erosion and enhance groundwater recharge. Preparations are underway to plant 125,000 multipurpose tree seedlings across 5 hectares of degraded land in Sherkole, Tsore, Bambasi, and Ura settlements during the upcoming planting season. Community engagement was central to these efforts, with participatory awareness sessions reaching 1,438 refugees and host community members on environmental protection and sustainable resource use. To reduce reliance on unsustainable fuel sources, over 107,623 kg of firewood was harvested and distributed to 3,617 households—25 kg per household per month. In Aftit (Amhara region), an Environmental and Social Impact Assessment conducted by Lihket Design and Supervision Corporation confirmed the site is not flood prone. The assessment provided key recommendations for sustainable stormwater management, including drainage design improvements to prevent flood-related disruptions in the settlement.

South Sudan: Climate resilience activities continued in Maban during the first half of 2025, focusing on reforestation, disaster risk reduction, and infrastructure upgrades to mitigate the impact of seasonal flooding. A total of 25,558 tree seedlings were raised and distributed to over 121 households as part of household-level tree planting and agroforestry efforts, contributing to environmental restoration and reducing reliance on firewood.

To strengthen preparedness, four Disaster Risk Reduction (DRR) committees were activated and trained across Maban's refugee camps. These committees now support early warning systems and facilitate timely communication of flood risks to communities.

Flood control measures included the rehabilitation of 3.69 km of protective dykes, helping reduce the vulnerability of low-lying camp areas. The improvement of key access infrastructure further supported these efforts: 8.1 km of minor roads and 7.9 km of major roads were rehabilitated through grading and drainage upgrades, alongside enhancements to 4.8 km of minor and 1.6 km of major airstrips. These upgrades improve not only year-round accessibility but also ensure more effective water drainage during heavy rains, reinforcing the overall climate preparedness of refugee-hosting areas.

Uganda: In Kiryandongo, refugees and host communities are facing erratic weather patterns, making it difficult to prepare and adapt. Limited forest cover forces women to travel long distances to collect firewood, exposing them to risks of violence and attacks by wild animals. To address these challenges, 4,024 energy-efficient cookstoves, including fixed Lorena cookstoves, were distributed to refugees and host community members. Local artisan groups are also being trained to construct Lorena cookstoves, enhancing local skills and supporting sustainability. In addition, 141,905 seedlings were provided to support household greening activities and maintain woodlots to help restore the environment and strengthen community resilience. Training on Farmer Managed Natural Regeneration (FMNR) was provided to equip communities with skills to restore degraded land and manage trees effectively. In the water sector, 34 per cent of water was pumped using renewable energy, contributing to reduced carbon emissions and operational costs. Additionally, the response leveraged 4.3 MW of installed renewable energy capacity for water supply systems, reinforcing the shift toward greener infrastructure and climate-resilient service delivery.



Cash Assistance

Central African Republic: Cash was used as the modality for WFP monthly rations, enabling vulnerable individuals — including women and persons with disabilities — to meet their basic nutritional needs. The cash assistance reached over 34,000 Sudanese refugees in Birao and members of host communities. In addition, some households received targeted support for shelter materials, such as tarpaulins. Cash assistance was adapted to local market conditions and delivered in a coordinated manner.

Chad: Between January and June 2025, cash-based interventions (CBIs) reached 21,151 individuals (approximately 3,868 households), with a total disbursement of 177.9 million XAF (approximately USD 317,035). The livelihoods sector dominated, supporting 94 per cent of all beneficiaries and accounting for 77 per cent of total funds. Refugees were the primary recipients, with 14,402 individuals receiving a total of USD 176,295, while 5,549 Chadian nationals received a total of USD 68,068. Other sectors included education (44 individuals; USD 25,090), multi-purpose cash for protection (1,118 beneficiaries in Amdjarass; USD 31,876), and reinstallation support (38 individuals; USD 15,706).

The impact of these CBIs has been significant: beneficiaries gained autonomy, improved their living conditions, and invested in income-generating activities. Refugees and host communities alike benefited from improved economic resilience, reduced negative coping strategies, and better access to basic services. Support in education and protection enhanced safety and long-term opportunities, especially for vulnerable groups.

This approach not only addressed urgent needs but also aligned with resilience and self-reliance strategies, reinforcing social cohesion and inclusion across communities. However, challenges arose, such as the lack of funds to assist other vulnerable individuals.

Egypt: Refugees and asylum-seekers in Egypt continued to face significant challenges in meeting their basic needs due to rising living costs and limited access to formal employment opportunities. Between January and June 2025, Cash-Based Intervention (CBI) sector partners provided bimonthly Multi-Purpose Cash Assistance (MPCA) to 55,964, vulnerable households, enabling them to cover essential expenses such as food, rent, and healthcare. In addition, 173 newly arrived and highly vulnerable individuals received emergency and transportation cash assistance. This included seasonal support such as winter cash assistance, cash for unaccompanied and separated children, and in-kind distributions like winter jackets. These interventions aimed to enhance the dignity and resilience of affected populations by allowing them to prioritize their own needs. Coordination among partners was strengthened to ensure fair targeting, avoid duplication, and maximize the impact of available resources. Despite funding constraints, the CBI sector remained a critical lifeline for many refugee families during the reporting period.

Ethiopia: Between January and June, Multi-Purpose Cash Assistance (MPCA) was provided to a total of 502 returnee households, comprising 1,317 individuals (636 females and 681 males), in Benishangul Gumuz and Tigray regions. A total of ETB 11,635,200 (approximately USD 93,003) was disbursed through the contracted Financial Service Providers, Commercial Bank of Ethiopia.

Libya: Emergency cash assistance continues to face significant obstacles due to restrictions imposed by the Central Bank of Libya, which, amid ongoing political challenges, has limited the ability of international financial service providers to operate in the country. A persistent cash liquidity crisis further complicates the situation, prompting efforts to explore alternative payment methods. Additionally, authorities in Western Libya have prohibited the distribution of cash to refugees, making vouchers the more viable and acceptable option. Despite these challenges, over 2,000 Sudanese refugees received cash-based assistance during the first half of the year.

South Sudan: Between January and June, 143,091 refugees received some form of cash assistance, including 1,108 individuals who benefited from multipurpose cash grants (MPCA) to meet essential needs such as food, household items, and shelter. Sectoral cash assistance—particularly cash-for-food and individual protection assistance (IPA)—remained the primary delivery modality in locations where markets were functioning, enabling more flexible and dignified access to critical goods and services.




In Renk, where new arrivals continue to settle in informal and transit sites, cash-for-food has become the preferred modality for covering immediate needs. Partners utilized systems like ProGres V4 and biometric verification tools to enhance targeting accuracy, reduce duplication, and expedite delivery.

However, the effectiveness of cash assistance was undermined by inflation and market volatility, which eroded purchasing power and disrupted price predictability, particularly in hard-to-reach and border areas. Monitoring of local markets remains critical to ensuring cash remains a viable response option. Despite these challenges, cash assistance remains a cornerstone of the refugee response, supporting resilience, restoring dignity, and stimulating local economies in refugee-hosting areas.

Uganda: Partners continued to strengthen the use of cash to deliver humanitarian aid in the Uganda refugee response. Between January and June 2025, a total of UGX 17.5 billion (approximately USD 5 million) was disbursed to 14,554 Sudanese refugee households received some form of cash assistance, with 7,094 of them benefiting specifically from multipurpose cash assistance amounting to UGX 2.6 billion (approximately USD 740,000). The majority of this support was delivered through mobile money (84.7 per cent) and bank accounts (8.5 per cent), highlighting these as primary

delivery mechanisms. From April to June, UNHCR extended support to an additional 3,314 newly arrived Sudanese households, disbursing UGX 1.2 billion (approximately USD 340,000) in cash assistance. Across the first two quarters of 2025, food assistance represented the largest share of cash transfers to refugee households, largely driven by WFP's ongoing expansion of cash-based transfers. However, these gains are now under threat due to funding cuts, prompting WFP to prioritize assistance modalities – whether cash or in-kind – based on the availability of resources.

2025 RRRP Monitoring framework (January - June 2025)

| | Sector | Indicator | Central African Republic | Chad | Egypt | Ethiopia | Libya | South Sudan | Uganda | Total |
|---|---|---|--------------------------|---------|---------|----------|--------|-------------|---------|---------|
|  | Protection | # of people registered on an individual basis | 10,602 | 162,183 | 148,814 | 20,762 | 15,518 | 67,585 | 19,854 | 445,318 |
| | | # of people who received protection services | 17,238 | 183,000 | 100,628 | 8,375 | 87,667 | 46,416 | 19,854 | 463,178 |
| | | # of people transported from border crossings to final destinations | NA | 108,290 | NA | 1,656 | NA | 42,202 | 7,080 | 159,228 |
| | | Proportion of people who have access to safe feedback and response mechanisms | 89% | 77% | NA | 50% | NA | 95% | 75% | 77% |
| | Sub-sector: Child Protection | # of children and caregivers who received child protection services | 673 | 71,550 | 63,170 | 5,598 | 26,745 | 9,888 | 2,886 | 180,510 |
| # of unaccompanied and separated children | | 103 | 2,027 | 5,015 | 1,183 | 1,331 | 378 | 19 | 10,056 | |
| Sub-sector: Gender-based Violence | Extent that the national child protection system is inclusive of refugee children | Yes | Yes | Yes | Yes | No | Yes | Yes | | |
| | # of identified GBV survivors and persons at risk assisted with appropriate support (including dignity kits, life-saving services, psychosocial support, case management, referral) | 340 | 27,757 | 24,073 | 108 | 1,875 | 30,163 | 49 | 84,365 | |
| | # of people reached through GBV prevention activities | 3,272 | 150,361 | 6,104 | 5,645 | 24,808 | 17,088 | 20,000 | 227,278 | |
|  | Basic Needs | # of people benefitting from the multipurpose cash assistance (CBI) | 4,357 | 29,917 | 55,814 | 1,317 | 1,098 | NA | 12,120 | 104,623 |
| | | # of people supported with emergency transportation cash allowance | NA | NA | 346 | NA | NA | NA | NA | 346 |
|  | Education | Proportion of children enrolled in primary education | 30% | 39% | 50% | 98% | NA | 39% | 22% | 46% |
| | | Proportion of children enrolled in secondary education | 14% | 66% | 46% | 36% | NA | 11% | 3% | 29% |

SUDAN REGIONAL REFUGEE RESPONSE PLAN 2025
Mid-Year Report | January-June 2025

| | | | | | | | | | | |
|--|----------------------------------|--|--------|---------|---------|---------|--------|---------|--------|-----------|
| | | # of children enrolled in tertiary education | 58 | 1,400 | NA | 20 | 8,594 | 358 | 5 | 10,435 |
| | | # of people who benefitted from education programming | 7,712 | 3,109 | NA | 49,901 | NA | 58,581 | 3,956 | 123,259 |
| | Food Security | # of people receiving food assistance (in-kind/CBI/hybrid) | 19,471 | 868,000 | 172,072 | 81,884 | 52,758 | 143,091 | 51,269 | 1,245,454 |
| | | # of individuals consultations supported in health care services | 17,736 | 375,754 | 62,883 | 59,448 | 43,199 | 192,745 | 61,531 | 813,296 |
| | Public Health & Nutrition | Refugees are included in national health policies and plans | Yes | Yes | Yes | Yes | No | Yes | Yes | |
| | | Proportion of births attended by skilled health workers | 100% | 88% | NA | 100% | NA | 94% | 93% | 95% |
| | Livelihoods & Economic Inclusion | # of children admitted to therapeutic feed program (TFP) | 206 | 38,043 | NA | 1,635 | 9,303 | 5,597 | 114 | 54,898 |
| | | # of people who received livelihood support (productive assets, training and/or business support in cash or in kind) | 1,005 | 16,980 | 1,994 | 7,015 | 458 | 7,012 | 15,639 | 50,103 |
| | | # of emergency shelter provided/maintained | 72 | 5,234 | NA | 1,582 | NA | 2,996 | 9,342 | 19,226 |
| | Settlement & Shelter/Housing | # of people who received non-food items | 1,818 | 21,197 | 741 | 9,523 | 49,783 | 14,193 | 9,342 | 106,597 |
| | | # of people supported with more sustainable shelter/housing | 195 | 1,973 | NA | 3,600 | NA | 532 | NA | 6,300 |
| | | # of people per communal toilet/latrine | 56 | NA | NA | 16 | NA | 49 | 50 | 43 |
| | WASH | Average # of litres of potable water available per person per day | 10 | 11.5 | NA | 13.6 | NA | 17 | 10 | 12 |
| | | # of people supported with access to sustainably produced water | 26,750 | 938,000 | 325,000 | 147,128 | 63,000 | 327,018 | 75,859 | 1,902,755 |
| | Partnership | # of RRP partners able to deliver in the response | 10 | 35 | 29 | 24 | 20 | 47 | 29 | 111 |

NA denotes the indicator is not available for the response in that country.
* 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.

2025 RRRP Monitoring framework (January - June 2025) – AGD Breakdown of persons receiving targeted assistance

| Country | Male | Female | Boys 0-17 | Girls 0-17 | Men 18+ | Women 18+ | People with Disabilities |
|--------------------------|------------|------------|------------|------------|------------|------------|--------------------------|
| Central African Republic | 42% | 58% | 27% | 36% | 15% | 21% | 2% |
| Chad | 49% | 51% | 32% | 33% | 17% | 18% | 2% |
| Egypt | 46% | 54% | 19% | 23% | 27% | 31% | 1% |
| South Sudan | 46% | 54% | 33% | 38% | 13% | 16% | 4% |
| Uganda | 25% | 75% | 14% | 22% | 24% | 40% | 2% |
| Ethiopia | 50% | 50% | 0% | 0% | 50% | 50% | 2% |
| Libya | 60% | 40% | 20% | 24% | 26% | 30% | 2% |
| Total | 45% | 55% | 21% | 25% | 25% | 29% | 2% |

During the reporting period (Jan – Jun 2025), out of the total people who received assistance in different sectors, females average around 55% vs 45% male, with the largest female inclination in Uganda (75% female) and the largest male inclination in Libya (60% male) while Ethiopia is evenly distributed among male and female. Boys and girls range from 0% in Ethiopia to 33% and 38% in South Sudan. South Sudan has the highest child composition overall (71% combined), suggesting a very young displaced/served population. People with disabilities are consistently reported at about 1–4%, with most entries at 2%. South Sudan reports the highest rate (4%). Disability prevalence is consistently low in the data but may be underreported due to different technical benchmarks at the country level.

Partnership & Coordination

In line with the Global Compact on Refugees, the RRP supported host countries in the region to lead and coordinate the response to those fleeing the conflict in Sudan. Following the Refugee Coordination Model, coordination of the plan was developed and implemented in close collaboration with 111 inter-agency partners and other stakeholders, including UN agencies, national societies of the Red Cross and Red Crescent, national and international non-governmental organizations, faith-based organizations and other civil society actors.

Central African Republic: For the response to the Sudan emergency, together with government counterpart CNR, UNHCR leads or co-leads refugee coordination structures in the Central African Republic 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. Coordination meetings were held regularly in Bangui and at field level with partners including other UN agencies and NGOs in order to ensure effective joint planning, response and information sharing.

Chad: The response to the needs of Sudanese refugees and affected host communities in eastern Chad is jointly led by the Government, UNHCR, and IOM. The National Commission for Refugee Reception and Reintegration (CNARR) serves as the government liaison with humanitarian partners, national authorities, ministries, and decentralized provincial and local services.

In the four provinces (Ouaddaï, Wadi Fira, Sila and Ennedi Est), sector coordination has been strengthened through the leadership or co-leadership of UN agencies and NGOs under the RCM framework. In 2025, this coordination model has been extended to all the provinces in eastern Chad to promote a more inclusive and harmonized response especially in the wake of a second wave of influx of Sudanese refugees. Information gathering and data sharing among partners have also been improved using the Ajala platform – Chad's major online coordination tool.

Egypt: The Inter-Agency Working Group (IAWG), co-chaired by UNHCR and UNDP, serves as the main strategic coordination platform for the Refugee and Resilience Response Plan (RRP) in Egypt. It brings together donors, UN agencies, NGOs, and refugee representatives to discuss key policy issues, protection concerns, and programmatic gaps. Reporting to the IAWG, the Inter-Sector Working Group (ISWG) functions as an operational coordination forum. It brings together the coordinators of 11 sector and subsector working groups, including: Protection, Child Protection, Community-Based Protection, Gender-Based Violence, Health, Education, Food Security, Livelihoods and Economic Inclusion, Cash-Based Interventions, Settlements/NFIs, and WASH. The ISWG ensures cross-sector collaboration and alignment of efforts across the response.

Ethiopia: In line with the Refugee Coordination Model (RCM), UNHCR and RRS co-chaired the National Inter-Agency Coordination Forum (IACF), ensuring coherence in the multi-sectoral refugee response. While fewer national-level meetings were held than usual largely due to the ambiguity and uncertainty surrounding the US funding situation, field level coordination remained active and consistent. Camp coordination and field-level sectoral working groups continued to operate, feeding into nine national sector and sub-sector groups, including cross-cutting platforms on PSEA, AAP, and cash assistance. The period between February and May was particularly challenging, as funding cuts and shifting directives disrupted planned activities and disoriented coordination efforts. The inter-agency assessed a widespread operational impact across key sectors. Despite this, response partners reprioritized and focused on what could be achieved with the resources available. Such collective efforts enabled harmonized interventions and joint advocacy, while fostering resilience to the extent possible.

Libya: In 2025, UNHCR led and coordinated the humanitarian refugee response for Sudanese refugees and asylum-seekers in Libya, supporting the State of Libya. Underpinned by an Inter-Agency Working Group, eight Task forces, chaired by UN agencies and INGOs, comprising Protection (with Child Protection and Gender-Based Violence sub-Task Forces within), Shelter & NFI, Food Security, WASH, Health & Nutrition, Education, Livelihoods and Economic Inclusion, and Access, ensured coherence, avoided duplication, and strengthened monitoring. An Information Management Task Force supports the collection and management of data.

South Sudan: In the face of unprecedented funding cuts, RRP partners engaged in joint prioritization under the 2025 Humanitarian Needs and Response Plan (HNRP), focusing on life-saving refugee interventions. Of the total USD 468 million needed, a prioritised request of USD 345 million was identified for urgent response. The operational environment was further shaped by the establishment of an OCHA presence in Renk in March, resulting in a co-lead coordination arrangement that bridged refugee and returnee responses in one of the most affected areas.

However, funding shortfalls forced many partners to scale back or suspend activities, leading to a notable reduction in the number of active and funded refugee response actors. Despite these challenges, continued engagement from development partners remains a positive development, reinforcing the humanitarian-development nexus and opening opportunities for more sustainable solutions over time.

Uganda

Coordination of the Sudan RRP was integrated into Uganda's broader refugee coordination structure, co-led by UNHCR and the Office of the Prime Minister (OPM). Six national coordination meetings were held, with sub-national coordination led by OPM, UNHCR, and District Local Governments. Sector coordination was also strengthened to improve decision-making and promote a coherent, multi-sectoral inter-agency response.

In the first quarter of 2025, Uganda received 86,000 new refugee arrivals from the DRC, South Sudan, and Sudan. In response, RRP partners launched an [emergency appeal](#) from April – September 2025, focusing on urgent needs such as reception capacity and essential services in refugee settlements. While the majority arrived from the DRC, the ongoing needs related to the Sudan and South Sudan situations remain critical and underfunded. A joint prioritization exercise was carried out to focus limited resources on lifesaving activities for new arrivals and the overstretched settlements hosting them.

Consequences of Underfunding

Central African Republic: The reduction in funding has significantly affected the GBV response in the Central African Republic, with interventions decreasing by 75 per cent compared to the first quarter of 2024. The number of safe spaces for women and girls has also declined sharply, from 31 in 2024 to just 14 in the first quarter of 2025.

Due to the severe underfunding, some RRP partners halted the construction of water facilities in Korsi. As a result, the daily water supply per person in Korsi, the refugee neighborhood in Birao, is half that of the standard in emergencies.

Chad: In Chad, over 280,000 refugees live in makeshift sites along Chad's eastern border. They face critical shortages of shelter, clean water, healthcare, and protection services, with rising disease risks and limited capacity to relocate or meet basic needs.

Prenatal care for 162,000 people and nutrition support for malnourished children are at risk, primarily as the supply chain relied heavily on USAID funding. Between 21 April and 30 June 2025, more than 18,550 new Sudanese refugees, mostly women and children, arrived, 77 per cent in Wadi Fira and 23 per cent in Ennedi East, areas with minimal humanitarian presence.

Budget cuts have severely limited the ability of RRP partners to respond to 273,000 refugees stranded at the border. In total, 1.3 million refugees in eastern Chad, including 176,800 from CAR, Cameroon, and Nigeria, and 220,600 internally displaced Chadians, risk losing essential services. With an additional 250,000 Sudanese refugees expected in 2025 and 95,000 already arrived, urgent funding is needed to prevent a deepening humanitarian crisis.

Egypt: In April/ May, the Egypt Inter-Agency Coordination and UNHCR Information Management units conducted a survey involving the 30 appealing partners to the Egypt chapter of the 2025 Sudan RRP. It aimed to understand and assess the impact of funding cuts, beyond US fundings, on programs addressed to refugees and host communities and the measures implemented or foreseen to mitigate these impacts. Key findings indicate that funding cuts have had a serious impact on the delivery of essential services to refugees and host communities. The most affected sectors include general protection, health, and education. Organizations have reported increased vulnerability, reduced access to services, and worsening mental health among beneficiaries. Mitigation measures such as temporarily halting non-essential activities, prioritizing essential services, reallocating resources to maintain critical operations, and seeking alternative funding sources have been implemented to address these challenges.

Ethiopia: Underfunding of refugee response efforts in Ethiopia has severe consequences for the 69,232 Sudanese refugees hosted in two regions. In Benshangul-Gumuz, camps are in a protracted situation with minimal livelihood opportunities. Despite the local government's commitment, which was evidenced by the allocation of 314 hectares of land near Ura settlement, livelihood activities remain deprioritized, making it difficult to cultivate the land or secure additional resources for agricultural income. As a result, most refugees lack access to income-generating activities, increasing vulnerability to food insecurity and malnutrition. Young refugees, in particular, are resorting to unsafe economic activities, exposing them to heightened protection risks. Without adequate funding, the potential for self-reliance and integration remains unrealized, undermining both humanitarian goals and local development efforts. Urgent

investment is needed to unlock available resources and support sustainable livelihoods for Sudanese refugees in Ethiopia.

Libya: Severe underfunding has significantly impacted the humanitarian response in Libya. The WASH sector has received only 9 per cent of its required funding in 2025, posing a huge challenge to maintain essential services. As a result, Sudanese refugees in remote areas such as Alkufra face critical shortages of safe water and hygiene facilities, heightening the risk of disease outbreaks and public health emergencies.

In the food security sector, funding shortfalls for August and September will prevent assistance to over 110,000 individuals, including approximately 90 per cent Sudanese refugees and 10 per cent vulnerable host community members. This includes in-kind and cash-based transfers. Furthermore, 5,000 children and 3,000 expecting and breastfeeding mothers will no longer receive preventive nutrition supplements, putting them at increased risk of malnutrition. These shortfalls have forced reprioritization and scaling down of critical life-saving interventions.

Underfunding continues to severely undermine the delivery of gender-based violence (GBV) services in Libya, particularly for Sudanese refugees in overcrowded and underserved areas. Limited access to psychosocial support, case management, safe bathing facilities, and protective shelter leaves women and girls at heightened risk of sexual violence and exploitation. Funding shortfalls, coupled with logistical, security, and data challenges, have significantly constrained service coverage and continuity. Without adequate resources, critical interventions, including mobile outreach, safe spaces for women and girls, and the training of frontline responders, cannot be sustained or expanded. As needs increase, the gap between available services and those in need continues to widen. Without urgent investment, thousands of women and girls will remain exposed to harm, unable to access life-saving support, and the gains made in protection thus far risk being reversed.

South Sudan: Unprecedented funding cuts in the first half of 2025 had a severe impact on the refugee response, resulting in the closure of numerous projects and a broad-scale reduction in humanitarian operations. As of 1 June, onward transport assistance for both refugees and returnees was paused, leaving over 12,000 individuals stranded at the Renk Transit Centre—approximately 9 per cent of whom are refugees. The growing population has placed additional strain on host communities and increased congestion in already overstretched facilities.

Food assistance was reduced across all camps, forcing a shift to targeted distributions that now cover only a portion of the population, heightening the risk of deteriorating food security. Protection services—particularly those related to GBV and child protection—were significantly scaled back, limiting access to case management and safe spaces.

Health and WASH gaps remain critical. The slow rollout of the Health System Transformation Project (HSTP) in refugee-hosting areas has created shortages of medications and health personnel, compounding risks as the rainy season approaches.








Uganda: Between March and April 2025, the Inter-Agency Coordination Unit conducted a rapid survey across all sectors working groups to assess the impact of reduced funding. The [findings](#) reveal widespread consequences across the refugee response in Uganda, significantly impacting the overall capacity to meet life-saving needs. The funding shortfall has led to the phasing out of food assistance for over one million refugees, including more than 48 per cent of Sudanese refugees who rely on this support to meet their nutritional needs. Protection capacity has also been severely affected, with substantial reductions in staffing limiting the ability to respond to child protection and gender-based violence (GBV) concerns among Sudanese refugees. Funding cuts have further forced the scale-down of health, education, livelihoods, and resilience programmes, resulting in a 25 per cent reduction in teachers and a 15 per cent cut in healthcare workers, which is deepening the vulnerability of already at-risk populations.

Regional Financial Requirements

Funding

RRP partners reiterate the message on the importance of flexible funding, which allows partners to prioritize the most pressing needs across the humanitarian response for the Sudan Situation.

The 2025 Sudan RRP is 18 per cent funded as of end July 2025. Underfunding led to critical gaps in many operations, including in protection, food and shelter. Further information on funding levels of the response is available on the [Refugee Funding Tracker](#) which tracks interagency funding levels of the response.

| | Country | Requirements | Funding | Gap | Targeted Population | # of partners | Funded | Gap |
|---|--------------------------|---------------|---------------|---------------|---------------------|---------------|----------------------------|-----|
|  | Chad | \$701,272,279 | \$131,322,603 | \$569,949,676 | 1,593,805 | 35 | <div><div></div></div> 19% | 81% |
|  | South Sudan | \$415,785,945 | \$56,355,380 | \$359,430,565 | 709,345 | 47 | <div><div></div></div> 14% | 86% |
|  | Egypt | \$237,689,497 | \$43,821,372 | \$193,868,125 | 1,487,944 | 29 | <div><div></div></div> 18% | 82% |
|  | Ethiopia | \$160,290,745 | \$37,059,891 | \$123,230,854 | 219,906 | 24 | <div><div></div></div> 23% | 77% |
|  | Libya | \$106,632,000 | \$25,134,745 | \$81,497,255 | 446,000 | 20 | <div><div></div></div> 24% | 76% |
|  | Uganda | \$107,148,480 | \$7,991,362 | \$99,157,118 | 283,963 | 31 | <div><div></div></div> 7% | 93% |
|  | Central African Republic | \$76,436,290 | \$7,482,788 | \$68,953,502 | 80,357 | 10 | <div><div></div></div> 10% | 90% |

RRP partners gratefully acknowledge government donors, private donors, charities, and other organizations for their contributions to RRP 2025 and urge all partners to increase funding levels. RRP partners also acknowledge the generosity of the host countries to Sudanese refugees.

Sudan Regional RRP Partners²

| | | | |
|--|--|---|--|
| ▪ ACROSS | ▪ DanChurchAid | ▪ Integrated Humanitarian Aid | ▪ South Sudan Women United |
| ▪ Action Against Hunger | ▪ Danish Refugee Council | ▪ International Committee for Emergency Aid and Development | ▪ Sudan Volunteer Organization |
| ▪ Action Aid Ethiopia | ▪ Dialogue and Research Institute | ▪ International Committee for the Development of Peoples | ▪ Syria Al Gad |
| ▪ Action for the Needy in Ethiopia | ▪ Egyptian Food Bank | ▪ International Labour Organization | ▪ Tafawol Association for Special Needs and Development |
| ▪ Action pour la Protection, la Santé, l'Environnement et la Lutte contre la Pénurie Alimentaire | ▪ Egyptian Foundation for Refugee Rights | ▪ International Medical Corps | ▪ Terre des Hommes |
| ▪ Action pour le Développement l'Humanitaire, l'Education, la Solidarité et la Cohesion Sociale | ▪ Egyptian Red Crescent | ▪ International Organization for Migration | ▪ Transcultural Psychosocial Organization |
| ▪ Adventist Development and Relief Agency | ▪ Episcopal Development Aid | ▪ International Rescue Committee | ▪ Uganda Refugee Disaster and Management Council |
| ▪ Africa Development Aid | ▪ Ethiopian Orthodox Church, Development and Inter Church Aid Commission | ▪ INTERSOS | ▪ UN Entity for Gender Equality and the Empowerment of Women |

² 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.

SUDAN REGIONAL REFUGEE RESPONSE PLAN 2025
Mid-Year Report | January-June 2025

| | | | |
|---|--|---|--|
| ■ Africa Humanitarian Action | ■ Etijah - Youth And Development Consultancy Institute Etijah | ■ Islamic Relief Ethiopia | ■ UN-Habitat |
| ■ African Community Agency for Development and Relief | ■ Finn Church Aid | ■ Jesuit Refugee Service | ■ United Nations Development Programme |
| ■ African Initiative for Relief and Development | ■ Food Against Hunger | ■ L'Association Humanitaire d'Appui au Développement Locale | ■ United Nations Educational, Scientific and Cultural Organization |
| ■ Agence de Développement Economique et Social | ■ Food and Agriculture Organization | ■ Life Makers Foundation (Egypt) | ■ United Nations High Commissioner for Refugees |
| ■ Agency for Child Relief Aid | ■ Give Directly | ■ Lutheran World Federation | ■ United Nations Humanitarian Air Service |
| ■ Agency for Cooperation and Research in Development | ■ GOAL | ■ Medair | ■ United Nations International Children'S Emergency Fund |
| ■ Agency for Technical Cooperation and Development | ■ Good Neighbors Ethiopia | ■ Medicair | ■ United Nations Population Fund |
| ■ Alight | ■ Greater Upper Nile Organization | ■ Medical Teams Interantional | ■ United Nations Programme on HIV/AIDS |
| ■ ALIMA - Alerte Sante | ■ Guera Touristique | ■ Norwegian Refugee Council | ■ War Child Holland |
| ■ Alliance Forum for Development | ■ Healthcare Foundation Organization | ■ Oxfam International | ■ Water Mission Uganda |
| ■ Association for International Development Cooperation | ■ HealthRight International | ■ Plan International | ■ Welthungerhilfe |
| ■ Association of Volunteers in International Service | ■ Helpcode / ODP | ■ Premier Urgence International | ■ WeWorld-GVC |
| ■ Balqees | ■ Humane-Aid for Community Organization | ■ Refugee Development Organisation | ■ Women Agency for Resilience and Transformation |
| ■ Care Egypt Foundation | ■ Humanitarian and Development Consortium | ■ Relief International | ■ World Food Programme |

SUDAN REGIONAL REFUGEE RESPONSE PLAN 2025
Mid-Year Report | January-June 2025

| | | | |
|-------------------------------|--|---|--------------------------------|
| ▪ CARE International | ▪ Humanitarian Assistance and Development Services | ▪ Remotecoders | ▪ World Health Organization |
| ▪ Catholic Relief Services | ▪ Humanity & Inclusion | ▪ Réseau de Concertation des Acteurs et Promoteurs de Développement Durable | ▪ World Relief |
| ▪ Concern Worldwide | ▪ Impact for Community Development | ▪ Samaritans Purse | ▪ World Vision International |
| ▪ Cooperazione e Sviluppo | ▪ Impact Initiatives | ▪ Save the Children International | ▪ Youth Empowerment Foundation |
| ▪ Cooperazione Internazionale | ▪ Inkomoko | ▪ Secours Islamique | ▪ Youth Relief Organisation |
| ▪ Damas for Development | ▪ Innovative Humanitarian Solutions | ▪ Solidarités International | |

Regional RRP Donors³

| | | |
|---|------------------------------|--------------------------|
| Canada | CERF | Denmark |
| European Union | France | Germany |
| Italy | Japan | Kuwait |
| Netherlands | Norway | Other |
| Other UN Funds | Private donors | Republic of Korea |
| Sweden | Switzerland | UN Delivering As One |
| UN Peacebuilding Fund | UN Trust Fund Human Security | United Arab Emirates |
| United Kingdom | UN OCHA | United States of America |
| Allocations of unearmarked/ broadly earmarked funding | | |

³ The list of donors is primarily drawn from the Refugee Funding Tracker

SUDAN

REGIONAL REFUGEE RESPONSE PLAN

**2025 Mid – Year Progress Report
January – June 2025**

CONTACT

kenrbext@unhcr.org

Published: September 2025