

A photograph of a woman with dark skin and braided hair, wearing a red and white patterned shawl, carrying a young child on her back. The child is looking towards the camera. The background is a blurred crowd of people, suggesting a refugee camp or a large gathering. The lighting is bright, possibly from the sun, creating a high-contrast scene.

INTER-AGENCY
REFUGEE EMERGENCY
RESPONSE PLAN
SUDAN: REFUGEE INFLUX
FROM ETHIOPIA

24 November 2020

FRONT COVER PHOTOGRAPH:

Ethiopian refugee and her baby crossing the border into Hamdayet crossing point, Kassala state (Sudan), over the Tekeze river. They flee clashes in Ethiopia northern Tigray region and seek asylum in Sudan.

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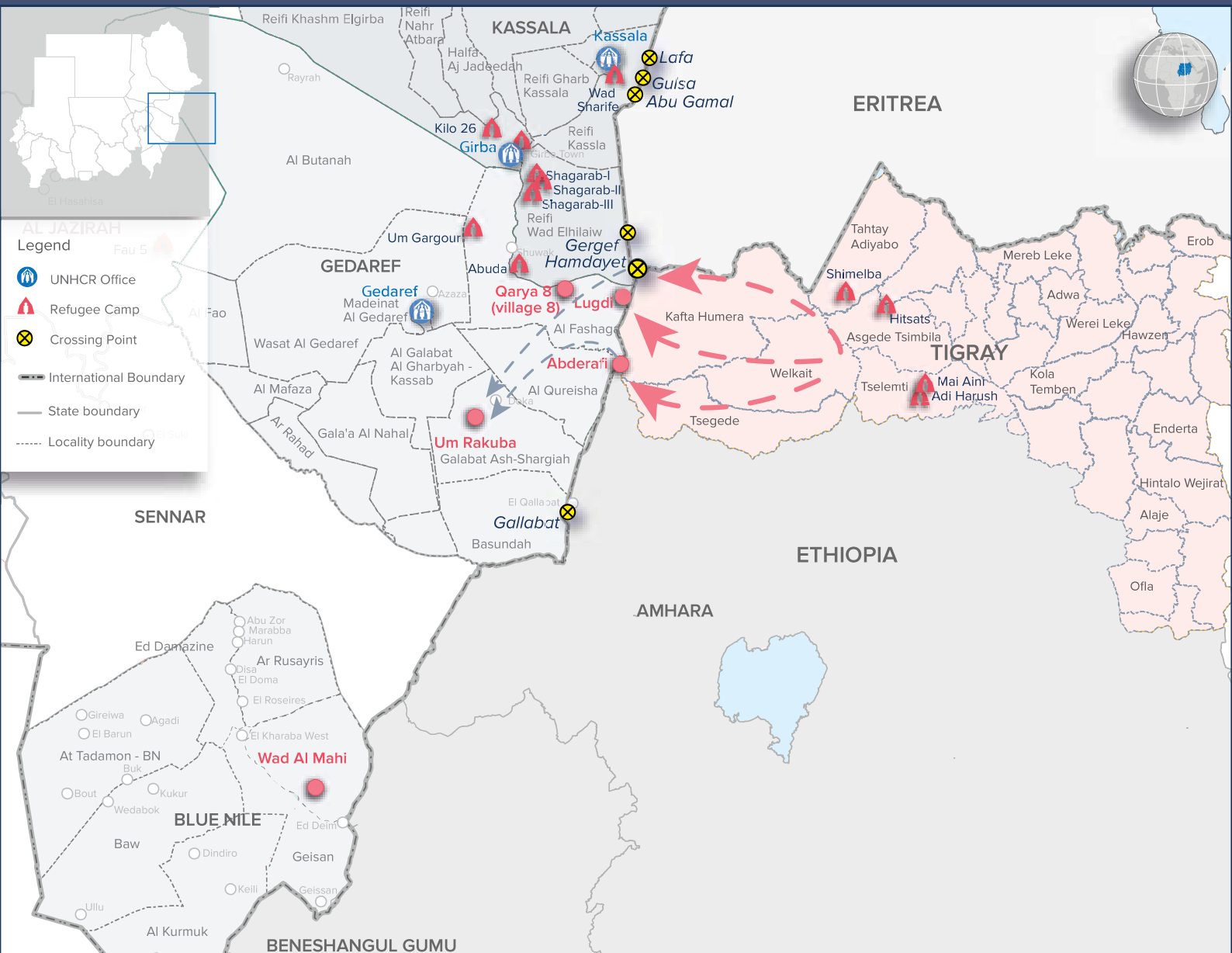
100,000

PROJECTED REFUGEE
POPULATION

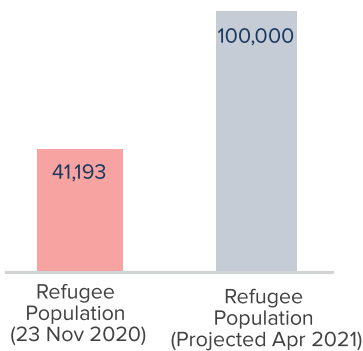
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REQUIREMENTS

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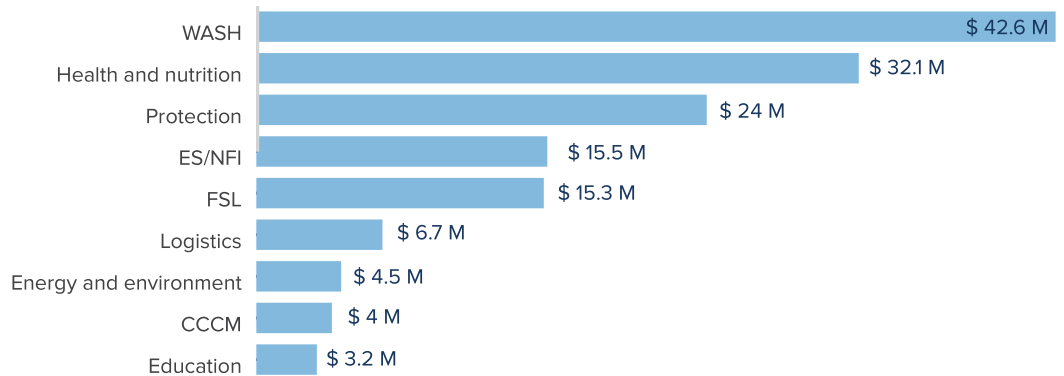
PARTNERS INVOLVED



Refugee Population Trends



Requirements by Sector



Context

Context

Situation in Ethiopia

In early November 2020, military confrontations between federal and regional forces in Ethiopia's Tigray region, which borders both Sudan and Eritrea, led the Government to declare it in a State of Emergency. Since then, Ethiopia's Tigray region has reportedly continued to be affected by incidents of armed conflict. Since early November, Eastern Sudan received large numbers of refugees through at least three border points, and there are currently no clear signs that this refugee flow is coming to an end.

The population in the Tigray region of Ethiopia includes approximately 600,000 people dependent on food relief assistance (more than 400,000 food insecure, 100,000 IDPs and 95,929 Eritrean refugees). In addition, 1 million people receive safety net assistance.

Refugee Mass Influx to Sudan

The refugee influx to East Sudan started on 9 November with 146 individuals arriving from Humera (Ethiopia) through two border entry points, Lugdi and Hamdayet. Since then, the movement dramatically increased with a daily average of over 2,700 individuals crossing into Kassala and Gedaref. The majority of the arrivals enter through Hamdayat (Kassala State) and in proximity to "Village 8" in Gedaref State, including for example Lugdi border point. These entry points are located in extremely remote locations, only accessible via sand tracks and other non-paved roads. In addition, since 15 November, some Ethiopians have come across the border to Sudan further South in the country's Wad Ali Mahi region of Blue Nile State. As of 22 November 2020, and within just two weeks, Sudan has received over 40,000 new Ethiopian refugees.

Operational Context

As of November 2020, Sudan hosts over 1 million refugees from South Sudan, Eritrea, Central African Republic, Ethiopia and other countries, including over 133,000 refugees, mainly Eritrean and Ethiopian, living in nine camps and urban areas in East Sudan.

The country faces multiple challenges, including over 200% annual inflation, currency depreciation and fuel shortages, further compounded by lockdown restrictions due to COVID-19 earlier in 2020. According to the latest International Food Security Phase Classification (IPC) report food insecurity levels are the highest ever recorded in Sudan. The 2021 Humanitarian Needs Overview (HNO) estimates that over 12.7 million people are in need of assistance, including one million refugees, an increase of a third compared to 2020.

UNHCR has an existing sub-office in Kassala, and a field office in Girba, which is located in close proximity to current border entry points. UNHCR/COR manage a small transit centre at Hamdayet where wet feeding, screening and onward transportation to a designated camp are provided. Protection and assistance services target the protracted and newly arriving Eritrean refugees located in several camps. It also seeks to address the onward movements of refugees. Prior to the start of the new refugee influx, 6 UN agencies, 8 INGOs and 3 NNGOs have had ongoing refugee related programming in Eastern Sudan aimed at providing humanitarian assistance services, addressing mixed movements, and responding to protection needs of children (particularly UASC) and persons with special needs. In summary, while there is operational capacities on the ground, this needs to be scaled to respond to a fast-evolving refugee emergency situation. The presence of additional response actors is also required to bolster the overall implementation capacity.



A worsening crisis is unravelling in northern Ethiopia, where clashes between the Ethiopian army and forces from the Tigray region are driving thousands of people to flee – more than half of them children.

Planning Scenario

Planning Scenario

Risk Analysis

The fighting in the Tigray region in Ethiopia could lead to large scale displacement with influx across the border into East Sudan. The costed planning scenario is for 100,000 arrivals within six months, given that 40,000 refugees have already arrived within 14 days of the start of the fighting. Should arrivals exceed the planning scenarios, partners will amend the Emergency Refugee Response Plan. While Hamdayet, Kassala is the official border crossing from Ethiopia's Tigray region to Sudan, new arrivals are also entering Sudan across the Lugdi area in Gedaref, and possibly at other entry points. Overall, the border is porous and many informal crossing points are possible. Past experience of refugee influxes in Eastern Sudan also indicates that informal border points will be used and thus the scenario includes the arrivals at other points. In this scenario, transportation will be arranged to collect refugees and transport them to either transit centres or reception centres whichever is closer.

The Tigray region of Ethiopia is also host to 95,929 Eritrean refugees who might decide to move to Sudan in case of close fighting or due to reduced humanitarian assistance as a result of supply constraints and the evacuation of humanitarian workers.

The operation will take a proactive and dynamic approach to risk management. The key risks and mitigation actions are detailed in the table below.

S/N	RISK	IMPACT	PROBABILITY	RISK LEVEL	MITIGATION
CONTEXT RISK					
1	Large scale influx of refugees has negative impact on local communities through use of land and increased demand on local markets	Major	Likely	Major	1. Consultations with host community on site selection 2. Host community in proximity to refugees sites are benefiting from the provided assistance
2	During the rainy season refugees hosting sites become inaccessible	Major	Likely	Major	1. Site selection takes accessibility into account 2. Prepositioning of relief items
3	Risk of influx of armed elements mixed with civilian arrivals	Major	Possible	Likely	1. Screening of new arrivals by Sudanese authorities 2. Separation of armed elements and civilians at the border entry
4	Risk of resources are diverted from current refugee caseload to new arrivals	Major	Possible	Likely	1. Advocacy at RCF and East Sudan RWG to maintain current assistance for existing caseload 2. Timely restocking and replacement of diverted resources

S/N	RISK	IMPACT	PROBABILITY	RISK LEVEL	MITIGATION
DELIVERY RISKS					
5	The inter-agency refugee response with existing capacities on the ground is overwhelmed by the scale and speed of the mass influx	Major	Likely	Major	<ol style="list-style-type: none"> 1. Comprehensive mobilisation of emergency response capacities by all actors including advocacy on HCT level for timely visa and travel issuance. 2. Apply a risk-based approach to partner selection and monitoring. 3. Preposition relief stocks in Eastern Sudan. 4. Supply frame agreements established. 5. Inter-agency response plan and donor appeal issued. 6. Additional partners deploy emergency teams to Eastern Sudan. 7. Consultation with authorities on sufficient and adequate land allocation to establish new refugee settlements (in line with Sudan pledges at GRF) 8. Level 2 registration of all refugees. 9. Clear roles and responsibilities for coordination and response.
6	Serious supply chain disruptions in sourcing, procuring or transporting relief items due to COVID-19-related movement restrictions	Major	Likely	Major	<ol style="list-style-type: none"> 1. Revised frame agreements with transporters. 2. Joint HCT advocacy with the Government for quick release of emergency related relief items through customs. 3. Review of access routes to anticipated operational locations and road repairs initiated 4. Submit request for blanket customs clearance request to MoFA 5. Consider market-based approaches to programming 6. Plan procurement with partners.
7	Insecurity in border areas	Major	Possible	Major	<ol style="list-style-type: none"> 1. Ongoing contextual security analysis 2. Staff safety mitigating measures 3. Organize accelerated movement of refugees away from the border areas.

S/N	RISK	IMPACT	PROBABILITY	RISK LEVEL	MITIGATION
SECURITY AND SAFETY RISK					
8	Risk of COVID-19 outbreak or outbreak of other communicable diseases	Major	Likely	Major	<ol style="list-style-type: none"> 1. Implementation of strict health protocols 2. Quick decongestion of transit and reception centres 3. Integrated vector control measures
9	Mobile and inherently vulnerable target group, resulting in their being subject to sexual exploitation and abuse and sexual and gender-based violence	Major	Likely	Major	<ol style="list-style-type: none"> 1. Conduct PSEA refresher training for UNHCR, partner and Government counterpart staff participating in the response. 2. Prepare a PSEA Action Plans for camp settings. 3. Establish Community-Based Complaints Mechanism. 4. Agencies and NGOs commit to IASC Accountability to Affected Populations principles
10	High levels of anxiety and exhaustion amongst staff due to heavy workload, inadequate accommodation, the stress of working in a COVID-19 environment and disruptions to R&R and annual leave, leading to reduced field presence, decreased productivity and possible burn-out.	Major	Likely	Major	<ol style="list-style-type: none"> 1. Prioritize duty of care to staff and implement active internal communications plan. 2. Regularly advise staff on psychosocial support available, including peer advisor network and Telehealth. 3. Regularly review field office BCPs to ensure operational coverage

Planning Scenario

The overall worst-case planning scenario foresees an influx of 200,000 refugees from Ethiopia within six months. This includes Ethiopian nationals, Eritrean refugees hosted in Ethiopia's Tigray region, and possibly other third-country nationals (Somalis, Yeminiis). The likely planning scenario for the costed response plan is 100,000 arrivals. This costed response plan may be revised further should this scenario be surpassed.

The response to this mass refugee influx will cover the following operational sites:

- At least three major border entry points (Hamdayat (Kassala), Lugdi (Gedaref) and Abdrafi (Gedaref) which are already witnessing large movements);

- With an average size of 20,000 individuals per settlement / camp, the response may require the establishment of some ten new refugee camp or settlement sites, at different locations; this may also include the re-opening of former refugee camp sites throughout the region;
- The influx could also possibly spread beyond the border points in Kassala and Gedaref into other States of Sudan, including Blue Nile.

The profile of asylum seekers is expected to be from the Tigray and Amhara regions in Ethiopia. Eritrean refugees residing in Ethiopia are likely to move to existing camps and seek asylum. Initial population profiles from ongoing influxes indicate over 40% are children. The scenario also accounts for health and protection concerns similar to those in previous waves of arrivals, namely persons with special needs (PWSN), SGBV, malnutrition, and possibly TB and HIV. Large numbers of unaccompanied or separated children (UASC) are also anticipated, along with persons in need of psycho-social support. COVID-19 precautionary measures will be taken into consideration when defining response plan, particularly in high concentration zones like transit and reception centres.

REFUGEE POPULATION PLANNING FIGURES (WORST CASE SCENARIO)		
Refugee mass influx from Ethiopia since 9 November 2020, as of 22 November 2020	Additional influx anticipated under the planning scenario in 6 months	Total Planning Figure (6 months)
40,000	160,000	200,000

REFUGEE POPULATION PLANNING FIGURES (LIKELY SCENARIO AND BASIS FOR THE COSTED RESPONSE PLAN)		
Refugee mass influx from Ethiopia since 9 November 2020, as of 22 November 2020	Additional influx anticipated under the planning scenario in 6 months	Total Planning Figure (6 months)
40,000	60,000	100,000

DISAGGREGATED DATA	% of expected new arrivals (based on refugee population profile of protracted refugees in Eastern Sudan) – caveat: profile of the new Ethiopia influx may be different
Women and Girls	43% of new arrivals
Men and Boys	57% of new arrivals
Children (0<18 years old)	45% of new arrivals
Elderly (>60 years old)	4% of new arrivals

Response Objectives

Response Objectives

Strategic Objective (1): : Support the Government of Sudan in maintaining access to territory and asylum for all individuals who seek to flee to the country, through the provision of related refugee protection services, including registration.

Strategic Objective (2): Timely decongestion of border entry points, and settlement of refugees in designated sites suitable for hosting large numbers of people.

Strategic Objective (3): Provision of multi-sectoral life-saving humanitarian assistance for all new arrivals at border points and in designated settlement sites as well as for vulnerable host communities.

Strategic Objective (4): Persons with specific needs and vulnerable persons are identified and provided with targeted services.



Operational Response Strategy

Operational Response Strategy

1. Border Entry Points (Collection Points and Transit Centres in the Border Area):

Given the ongoing and anticipated fast paced mass influx, the main assistance objectives are to provide essential life-saving assistance services and ensure refugees do not stay longer than 24 hours at these locations. Timely onward transport of new arrivals will ensure physical safety and prevents issues related to congestion and overcrowding, as well as risks of SGBV, family separation and communicable diseases. Should the decongestion efforts not keep up with the pace of the influx, additional assistance services at these sites may be provided.

The Government of Sudan will conduct screening at entry points to maintain the civilian character of asylum. Identified combatants will be separated and transferred to a separate facility.

The following assistance services will be provided at border entry points:

SECTOR	RESPONSE / ACTION
PROTECTION	<ul style="list-style-type: none"> • Initial refugee registration (household level, given the fast pace of the influx) by COR / UNHCR • Referral of third-country nationals • Wrist-banding to fix the population and prevent family separation • Border monitoring • Child protection, including identification of UASC, family reunification • Referral pathway and support for SGBV survivors; Psychosocial First Aid, SGBV prevention and provision of PEP kits • Protection desks, with referral to adequate services and identification of persons with specific needs • Provision of information and counselling on access to essential services • MHPSS and Children Associated with Armed Conflicts and CB CP mechanism
LOGISTICS	<ul style="list-style-type: none"> • Refugee transport from border points to designated settlement sites (buses/trucks; convoy security escort; convoy ambulance) • Transport of relief items to border points • Warehousing of relief items
SHELTER/ NON-FOOD ITEMS (NFIS)	<ul style="list-style-type: none"> • Communal shelter and shades; • Dignity kits for all women and girls; • Standard NFI kit per household (HH): <ul style="list-style-type: none"> o 3 Sleeping mats. o 3 Blankets. o Face mask (COVID-19 prevention): 1 / ind. o 2 Jerry can. o Soap bar (250g): 1 / ind. o Mosquito net 2 / HH.

SECTOR	RESPONSE / ACTION
WASH	<ul style="list-style-type: none"> • Safe drinking water according to emergency standards (15 l/pers/day). While this may initially include water trucking, the response will prioritise from the start the establishment of sustainable water sources, so that water trucking can be phased out as soon as possible. This may include repair / rehabilitation of existing water systems, expanding pipe networks, new boreholes, and putting in place additional water storage. • Communal latrines according to emergency standards (1 latrine / 50 ind.; separate for women and men). • Water treatment, including chlorine and purification tablets. • Bath shelters, separate for women and men. • Solid waste bins and solid waste disposal. • Handwashing stations. • Hygiene promotion. • Integrated vector management at the entry sites.
FOOD	<ul style="list-style-type: none"> • Wet feeding (cooked meals) • High Energy Biscuits • Cooking fuel (for communal kitchen in transit centres)
HEALTH & NUTRITION	<ul style="list-style-type: none"> • Health and nutrition screening on arrival. This will include medical triage, Covid-19 screening and risk communication, identification and referral of malnourished children, identification of individuals on long term treatment for chronic illness such as diabetes, hypertension, tuberculosis, acquired immunodeficiency syndrome. • Vaccination. • Primary health care services including services for sexual and reproductive health, RUTF and MUAC supplies. • Emergency Referrals.
LIVELIHOODS	<ul style="list-style-type: none"> • Management of livestock. • Holding place / fodder for larger animals or large numbers of animals. • Provide lifesaving livestock support applying (Livestock Emergency Guidelines and Standards) LEGS. • Distribution of appropriate containers for seed storage.

2. Designated Settlements Sites for Refugees (Settlements or Camps):

The Government of Sudan will designate land areas where refugee settlement or camp sites can be constructed to host the new arrivals. This may tentatively involve up to ten separate site locations. Land ownership determination and host community consultations should be carried out to ensure local acceptance of the sites. As of 17 November 2020, two new sites have been identified, both of which are in Gedaref State: Um Raquba; Tenedba (Mafaza locality).

The sites will include a reception centre, where new arrivals from border will be provided with initial services. Refugees will spend maximum 72 hours, possibly less, at the reception centre to prevent the site from becoming congested. From there, refugees will be relocated to home plots in the settlement site, where multi-sector assistance services will be made available. Only refugees identified at the border entry points (fixed with wristbands) will be

entitled to assistance services at the settlement sites. When allocating camps and plots, due consideration will be given to the potential intercommunal tensions.

Services provided at the reception centres in settlement / camp sites include:

SECTOR	RESPONSE / ACTION
PROTECTION	<ul style="list-style-type: none"> • Household pre-registration and issuance of ID cards by COR / UNHCR. • Identification of persons with specific needs; initial assistance and referral; • Child protection, including identification of UASC, family tracing and reunification, child friendly spaces and birth registration; • Prevention and referral pathway/support for SGBV survivors, including safe houses. • Protection desks. • Solutions, including voluntary repatriation, resettlement, relocation within Sudan. • Community based protection. • Dissemination of awareness messages and information's about the available GBV services. • Peaceful co-existence activities, involving host community. • RST for most sensitive and urgent cases (example – high profile cases without exclusion concerns, active cases of former Eritrean refugees from Ethiopia, etc.)
SITE COORDINATION & MANAGEMENT	<ul style="list-style-type: none"> • Management of the reception centre and coordination of all actors. • Establish two-way communication/complaint & feedback mechanisms. • Establish information management systems. • Establish community representation structures. • Monitor service delivery and standards.
SITE CONSTRUCTION SHELTER/ NON-FOOD ITEMS (NFIS)	<ul style="list-style-type: none"> • Communal shelter and shades; • Construction of all site infrastructure; site preparation for capacity of minimum 1,000 individuals. • Agency offices in proximity to reception centre
WASH	<ul style="list-style-type: none"> • Safe drinking water according to emergency standards (15 l/ pers/day). While this may initially include water trucking, the response will prioritise from the start the establishment of sustainable water sources, so that water trucking can be phased out as soon as possible. This may include repair / rehabilitation of existing water systems, expanding pipe networks, new boreholes, and putting in place additional water storage. • Communal latrines according to emergency standards (1 latrine / 50 ind.; separate for women and men). • Bath shelters, separate for women and men. • Solid waste bins and solid waste disposal. • Hygiene promotion. • Hand washing stations. • Soap provision (at least 450g/p/m). • Water quality testing (Bacteriological H2S kit). • Integrated vector control management.
FOOD	<ul style="list-style-type: none"> • Wet feeding (cooked meals) • High Energy Biscuits if needed • Fuel for cooking

SECTOR	RESPONSE / ACTION
HEALTH & NUTRITION	<ul style="list-style-type: none"> • Health and nutrition screening and triage on arrival and distribution of essential supplies such as clean delivery kits for visibly pregnant women. • Emergency referral for primary and secondary health services. • Reproductive health services. • COVID-19 prevention and control interventions including risk communication, contact tracing and isolation and referral of suspected cases. • Promotion of best practices in Infant and Young Children Feeding (IYCF). • Psychological first aid. • Disease surveillance. • EPI services and coverage of the <5 children by ongoing vaccination campaign in response to cVDPV2 outbreak.

Services provided in the home plot areas of the settlement / camp sites:

SECTOR	RESPONSE / ACTION
PROTECTION	<ul style="list-style-type: none"> • Individual biometric refugee registration by COR / UNHCR • Identification of persons with specific needs; initial assistance and referral; • Child protection, including identification of UASC, child friendly spaces and birth registration; • Referral pathway and support for SGBV survivors; SGBV prevention; • Establishment of community based GBV referral mechanisms to available services • Mental health and Psychosocial support • Protection desks • Provision of information and counselling on access to essential services • Collaborative dispute resolution mechanism for potential conflict over resources • Positioning of CMR kits for medical response to sexual violence cases
SITE COORDINATION & MANAGEMENT	<ul style="list-style-type: none"> • Management of the camp / settlement, and coordination of all actors • Establish two-way communication/complaint & feedback mechanisms • Establish information management systems • Establish community representation structures • Monitor service delivery and standards
SITE CONSTRUCTION SHELTER/ NON-FOOD ITEMS (NFIS)	<ul style="list-style-type: none"> • Site planning and layout • Site preparation, including levelling if necessary, access roads • Construction of communal facilities • Plot demarcation • Distribution of emergency shelter & NFI kits in home plot areas; standard NFI kit per HH of 5 ind. (assuming that a partial kit was received at the border point; if not: full kit of border point + camp distribution scale): <ul style="list-style-type: none"> o plastic sheets: 2 / HH o kitchen set: 1 / HH o jerry can: 2 / HH o mosquito nets: 2 / HH o Face masks: 2 / ind. (COVID-19 prevention) • Distribution of dignity kits for all women and girls • Distribution of shelter kits (local materials) or tents • Distribution of fuel-efficient stoves and supply of fuel. • Solar lantern: 1 / HH

SECTOR	RESPONSE / ACTION
WASH	<ul style="list-style-type: none"> • Safe drinking water according to emergency standards (15 l/pers/day), if needed establishment/rehabilitation of water sources • Initial: Communal latrines according to emergency standards (1 latrine / 50 ind.; separate for women and men) • Establishment and training of water management committees • Medium term: shared household latrines (1 latrine / 20 ind.) • Hygiene promotion • Solid waste management and solid waste bins • Hand washing stations • Soap provision (at least 450g/p/m). • Water quality testing (Bacteriological H2S kit) • Laundry area • Supply and distribution of household water treatment products • Integrated vector control management
FOOD	<ul style="list-style-type: none"> • Distribution of monthly dry rations
LOGISTICS	<ul style="list-style-type: none"> • Provision of safe, effective and efficient access to beneficiaries and project implementation sites to NGOs, UN agencies, donor organizations and diplomatic missions in Sudan; • Transportation of light cargo such as medical supplies, high energy foods and information and communications technology (ICT) equipment as well as PPEs; • Provision of adequate capacity for medical and security evacuations of humanitarian staff.
HEALTH & NUTRITION	<ul style="list-style-type: none"> • Primary health care services (initially possibly mobile clinics before construction of semi-permanent structures), reproductive health services • Prevention and control of communicable diseases including vaccination and mainstreaming of Covid-19 interventions (risk communication, identification, isolation and management of individuals with Covid-19 infection) • Management of non-communicable diseases • Emergency referrals with adequately equipped ambulances • Mental Health and Psychosocial Support • Community Management of Acute Malnutrition (CMAM) • Promotion of best practices in Infant and Young Children Feeding (IYCF) • Event based disease surveillance • Health promotion • Emergency blanket supplementary feeding for the first three months • Targeted supplementary feeding for three months • EPI services and coverage of the <5 children by ongoing vaccination campaign in response to cVDPV2 outbreak • Scale up of TB and HIV services
EDUCATION	<ul style="list-style-type: none"> • Primary and secondary schools • Construction of semi-permanent structures • Provision of teaching and learning materials • Identification, engagement, capacity building and compensation of education facilitators (incentive teachers) • Emergency WASH in school interventions • Psychosocial support (including Child Friendly Spaces)

SECTOR	RESPONSE / ACTION
EDUCATION	<ul style="list-style-type: none"> • School feeding (targeted for malnourished school age children) for referral to WFP/ partners • PTAs establishment/capacity building • Teacher training – life skills, teacher preparedness for COVID -19, PSS including play-based learning • Engagement with State MoEs on Education provision for refugee children
LIVELIHOODS	<ul style="list-style-type: none"> • Provide Lifesaving Livestock support applying (Livestock Emergency Guidelines and Standards) LEGS • Lifesaving agricultural support • Income generating activities • Awareness raising and training on fuel efficient stoves • Rehabilitation of pasture and rangeland (refugees owning livestock) • Support the development of natural resource management plans (NRM) in collaboration with relevant institutions at State level • Extending technical assistance/inputs to hosting communities to mitigate possible conflicts over use of natural resources. • Distribution of appropriate containers for seed storage
MULTI-SECTOR	<ul style="list-style-type: none"> • Host community support • Multipurpose cash assistance based upon minimum expenditure basket

3. Covid-19 Protocols at All Sites and Assistance Points:

The mass influx takes place in the context of the COVID-19 pandemic, and it is likely that individuals involved in this response, including persons of concern, may be affected by COVID-19. While social distancing in the context of a mass influx is difficult to maintain, the following COVID-19 prevention measures will be implemented:

- COVID-19 risk communication and sensitisation at all operational sites (in the language of the refugees, or in pictures)
- Distribution of soap and installation of hand washing facilities
- Health screening at all transit locations and the health facilities
- Distribution of face masks as part of the NFI kit at all sites
- Provision of face masks during transportation for the border entry point to the camps
- Establishment of COVID-19 isolation facilities at all transit sites and in the camp
- Establishment of clear pathways for testing suspected patients, case management and referrals.
- Referral system to isolation centres with ICU units with adequately equipped ambulances and with trained staff for severe Covid-19 patients
- Scale up of NPHL laboratory testing facilities in Gedaref and Kassala
- COVID-19 SOP for first line responders

4. Accountability to Affected Populations:

Refugees will be included in the planning, implementation and evaluation of all response activities by soliciting, hearing and acting upon the voices and priorities of women, girls, boys, men, including the most marginalized and at-risk people among affected communities. All sectors of the community have the right to participate in and play an active role in decisions that will impact their lives, well-being, dignity and protection. Assistance will be standardized, and refugees will receive clear and tailored information about the content of provided and available assistance. Partners will consult with and integrate host communities in their humanitarian response planning and implementation to avoid social tension and address existing vulnerabilities. Partners will also establish and support the implementation of accessible, confidential communication mechanisms in each camp for refugees to provide feedback on received services, and report complaints including SEA-related complaints.

5. Modality of assistance provision:

Especially at the border points, the modality for initial support to households is in-kind, as refugees often arrive with few belongings and need immediate material help. The capacity of local markets at the borders is surpassed by the needs of refugees in terms of essential household and food items. Similarly, at the new camp locations designated by the Government, which are in very remote areas, there are currently no markets which could support arriving refugees with the required household, shelter and food items. However, as this may change over time, cash-based interventions may be considered over time, and could eventually replace certain in-kind services.



Ethiopian refugees, fleeing clashes in the country's northern Tigray region, cross the border into Hamdayet cross point in Kassala state Sudan, over the Tekeze river.
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Staff Safety and Security

Staff Safety and Security

The current security situation in Kassala state is normal, but unpredictable. The area witnessed tensions and security incidents recently. The Kassala State government declared a state of emergency in the state for three months effective from Sunday 30th August 2020. The emergency State law allows security forces to carry the following measures.

1. Restrict movement of suspected personnel and vehicles during emergency period.
2. Access and conduct search operations at any building
3. Search/screen of people suspected of carrying firearms and crude weapons.
4. Confiscation of money, property and goods obtained through unlawful ways.
5. Arrest of people suspected of involvement in a crime or any activity that poses a threat to security and social co-existence in the state.
6. Confiscation of land, property, vehicles, communication equipment, electronic devices as per the Emergency law.

Travel outside of Kassala and Gadaref city needs to be carefully planned. It is advised to track team movements and maintain regular radio contact with the office. It is advised to have a Sat phone and satnav in all vehicles. All field teams should be equipped with sat phones. Road travel should only be carried out after sunrise and before sunset. Field accommodation should be preapproved.



Hamdayet border point in Kassala state, where the largest number of refugees cross into Sudan to seek asylum.
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Inter-Agency Coordination

Coordination of The Response

Through Ministerial Resolution N. 102 of 2020, the Sudanese Minister of Cabinet Affairs formed a Committee “to respond to the potential influx of refugees from neighbouring countries”. The Committee has since been formed and met for the first time on 24 November 2020 in Khartoum, under the chairmanship of the Commissioner for Refugees (COR). Participation in the inter-Ministerial committee includes several Line Ministries, representatives of security authorities, UNHCR and other UN partners, and NGO representatives. The purpose of the Committee is to coordinate the refugee response within Government, and with the support provided by UN and NGOs. The Committee will convene on a regular basis

In terms of inter-agency coordination, the Refugee Coordination Model is implemented in Sudan. COR and UNHCR lead the refugee response and work in close partnership with UN and NGO partners. At national level, COR and UNHCR co-chair the Refugee Consultation Forum (RCF), attended by all UN and NGO partners working on refugee issues. The RCF is the main forum for macro-level response planning, coordination and policy as well the development of guidance. The RCF is supported by technical advisory groups, with engagement of the IASC sector coordination groups on standards and technical specifications. COR/UNHCR will continue to lead inter-agency planning, monitoring and reporting of the Country Refugee Response Plan (CRP) for Sudan, as well as related preparedness and contingency planning.

Operational coordination at field level takes place in the Refugee Working Groups (RWGs), co-chaired by UNHCR and COR. Specifically, the inter-agency response to the refugee influx from Ethiopia is coordinated by the Kassala based RWG for the entire Eastern region. A sub-group RWG has been established in Gedaref. The RWGs coordinate the multi-sector refugee response and should be attended at senior management level. The Kassala RWG will ensure regular participation in the AHCT in Kassala.

For the Eastern Region, and specifically for this refugee mass influx from Ethiopia, the following refugee sector working groups have been established:

SECTOR	CO-LEADS	SECTOR	CO-LEADS
PROTECTION	CoR and UNHCR	WASH	UNICEF and UNHCR
PROTECTION SUB-SECTOR GROUPS ON: CHILD PROTECTION, SGBV DURABLE SOLUTIONS	TBC TBC UNDP and UNHCR	HEALTH & NUTRITION	ARC and UNHCR
SHELTER, SITE PREPARATION & NFI	UNHCR and WHH	EDUCATION	UNICEF and UNHCR
		FOOD SECURITY & LIVELIHOODS	WFP and FAO
		INFORMATION MANAGEMENT TECHNICAL WORKING GROUP	UNHCR

At all operational sites, COR and UNHCR will convene site specific inter-agency coordination meetings and may activate site specific sector coordination which will report to the corresponding RWG on state level.

Annexes







Annex 1: Financial Requirements:

A. Financial Requirements by Sector:

SECTOR	FINANCIAL REQUIREMENT
PROTECTION	\$ 23,903,835.00
CAMP COORDINATION & CAMP MANAGEMENT (CCCM)	\$ 3,963,296.00
EDUCATION	\$ 3,197,918.00
WASH	\$ 42,547,770.00
HEALTH & NUTRITION	\$ 32,144,889.00
ENERGY & ENVIRONMENT	\$ 4,404,341.00
SHELTER, SITE PREPARATION & NON-FOOD ITEMS (NFIS)	\$ 15,481,804.00
FOOD SECURITY & LIVELIHOODS	\$ 15,271,588.00
LOGISTICS	\$ 6,690,151.00
GRAND TOTAL	\$ 147,605,592.00



An Ethiopian refugee, who fled fighting in Tigray province sits holding a child in a hut at the Um Rakuba camp in Sudan's eastern Gedaref province, on November 16, 2020.
UNHCR/RITZAU SCANPIX

ORGANIZATION										TOTAL
ADRA	43,500	-	-	340,000	-	-	110,000	-	-	\$ 493,500.00
ARC	300,000	-	-	400,000	700,000	-	250,000	-	-	\$ 1,650,000.00
BPWO	-	-	-	-	-	-	434,727	-	-	\$ 434,727.00
CIS	-	-	-	856,000	748,000	-	-	-	-	\$ 1,604,000.00
COOPI	-	-	-	697,455	-	-	-	-	-	\$ 697,455.00
CWW	-	-	-	213,300	732,000	-	140,000	-	-	\$ 1,085,000.00
DRC	675,000	270,000	-	920,000	-	-	1,485,000	-	-	\$ 3,350,000.00
FAO	-	-	-	-	-	-	-	2,875,050	-	\$ 2,875,050.00
HOPE SUDAN	-	-	-	420,000	-	-	-	130,000	-	\$ 550,000.00
IOM	100,000	-	-	5,000,000	800,000	-	600,000	-	500,000	\$ 7,000,000.00
IRW	18,182	-	-	1,818,818	-	-	700,000	688,000	-	\$ 3,225,000.00
JASMAR	-	-	-	130,160	15,000	-	110,000	-	-	\$ 255,160.00
MEDAIR	-	-	-	100,000	100,000	-	100,000	-	-	\$ 300,000.00
MC	600,000	-	-	300,000	710,000	-	-	-	-	\$ 1,610,000.00
NCA	500,000	-	-	745,000	-	-	-	-	-	\$ 1,245,000.00
NRC	5,000,000	-	1,200,000	-	-	-	1,800,000	-	-	\$ 8,000,000.00
PIS	1,400,000	-	-	500,000	-	-	-	-	-	\$ 1,900,000.00
RI	-	-	-	750,000	1,250,000	-	-	-	-	\$ 2,000,000.00
SCI	2,125,000	-	1,200,000	-	600,000	-	-	-	-	\$ 3,925,000.00
UNDP	-	-	-	150,000	-	140,000	260,000	350,000	-	\$ 900,000.00
UNFPA	1,920,000	-	-	-	2,760,000	-	-	-	-	\$ 4,680,000.00
UNHCR	9,134,406	3,693,296	-	11,020,935	10,236,846	4,264,341	7,492,941	1,849,538	1,618,346	\$ 49,310,650.00
UNICEF	1,317,247	-	567,918	13,439,102	5,114,772	-	-	-	-	\$ 20,439,039.00
UNOPS	-	-	-	-	5,000,000	-	-	-	-	\$ 5,000,000.00
UNWOMEN	528,580	-	-	-	-	-	-	-	-	\$ 528,580.00
UPO	190,000	-	230,000	240,000	-	-	191,000	-	-	\$ 851,000.00
WFP	-	-	-	-	854,571	-	-	9,379,000	4,571,805	\$ 14,805,376.00
WHH	51,920	-	-	3,305,593	-	-	316,712	-	-	\$ 3,674,225.00
WHO	-	-	-	685,000	2,523,700	-	-	-	-	\$ 3,208,700.00
ZOA	-	-	-	516,706	-	-	1,491,424	-	-	\$ 2,008,130.00
GRAND TOTAL										\$ 147,605,592.00



Protection



WASH



Shelter, Site Preparation & Non-Food Items (NFIs)



Camp Coordination & Camp Management (CCCM)



Health & Nutrition



Food Security & Livelihoods



Education



Energy & Environment



Logistics

Annex 2: Map of The Operational Area:

As of 21 Jan 2020



The depiction and use of boundaries, geographic names and related data shown on maps and included in lists, tables, documents, and databases are not warranted to be error free nor do they necessarily imply official endorsement or acceptance by the United Nations. Final status of the Abyei area is not yet determined. Creation date: 17/11/2020 Sources: UNHCR, OCHA. Author: UNHCR Feedback: Information Management "sukhim@unhcr.org"

Annex 3: Coordination Contact List

AGENCY	NAME	TITLE	EMAIL	PHONE
NATIONAL LEVEL: REFUGEE CONSULTATION FORUM (RCF)				
UNHCR	Jens Hesemann	Emergency Coordinator / Assistant Representative (Programme)	hesemann@unhcr.org	+249 91 214 1168
COR	Dr. Mohammed Yassin El- Tohami	Deputy Commissioner	mohammedyassin@yahoo.com	+249 91 239 5299
EAST REGIONAL (KASSALA BASED): REFUGEE WORKING GROUP				
UNHCR	Andrew Mbogori	Principal Emergency Coordinator	mbogori@unhcr.org	+249 90 071 7745
UNHCR	Mamoun Abuarqub	Emergency Coordinator	abuarqub@unhcr.org	+249 91 250 8783
COR	Elsir Khalid	Assistant Commissioner	sirkhalid2000@yahoo.com	+249 91 283 3827
GEDAREF STATE: REFUGEE WORKING GROUP				
UNHCR	Mohammad Rafiq Nasry	Head of Field office	rafiq@unhcr.org	+249 90 090 5087
COR	Abdul Hafiz Khalil	COR Representative	ahafizkh@yahoo.com	+249 91 291 0046
SITE COORDINATORS				
SITE	NAME	EMAIL	PHONE	
Hamdayet	Paul Anthony Muteru	muteru@unhcr.org	+249 90 122 9137	
Lugdi	Tajelsir Abdalla	abdallta@unhcr.org	+249 91 233 3361	
Um Rakuba	Mohammad Rafiq Nasry	rafiq@unhcr.org	+249 90 090 5087	
Roving site Manager	Musa Ahmed Mohamed	mohamedm@unhcr.org	+249 91 233 3405	

SECTOR WORKING GROUPS				
SECTOR	AGENCY	NAME	EMAIL	PHONE
Protection	UNHCR	Akiko Tsujisawa	tsujisaw@unhcr.org	+249 912 141 168
WASH	UNHCR	Pascal Rukundo	rukundop@unhcr.org	+249 900905082
	UNICEF (co-chair)	Eldin Hasan	iehasan@unicef.org	+249 91 216 7937
Health & Nutrition	UNHCR	Mwiti Mungania	mungania@unhcr.org	+249 91 250 3987
	ARC (co-chair)	Dr. Terence Emmanuel P. Francisco	terencef@arcrelief.org	+249 90 090 6848
Shelter/ Non-food Items (NFIs)	UNHCR	Sajida Khan	khansaj@unhcr.org	+249 90 090 5089
	WHH (co-chair)	Shadrack Mutiso	shadrack.mutiso@welthungerhilfe.de	+249 91 253 1760
Food (FSL)	FAO	Ibrahim Ali	ibrahim.ali@fao.org	+249 91 216 6108
	WFP (co-chair)	Hafiz Gadrmay	hafiz.gadrmay@wfp.org	+249 91 680 8769
Education	UNHCR	Linda Akach	akach@unhcr.org	
	UNICEF	Julienne Clare Vipond a.i.	jvipond@unicef.org	
Logistics	WFP	Pamela Onyango	pamela.onyango@wfp.org	+249 90 082 1285
Information Management	UNHCR	Abdelrahman Jaber	jaber@unhcr.org	+249 91 275 3983



A young Ethiopian refugee washes in the Tekeze river after fleeing clashes in the country's Tigray region and crossing the border into Sudan.
© UNHCR/HAZIM ELHAG

Annex 4: Monitoring Framework

Monitoring framework for the initial emergency response, costed scenario of 100,000 refugee arrivals:

INDICATOR	TARGET
# of refugees and asylum seekers receiving food assistance	100,000
# of refugees and asylum seekers registered on an individual basis with minimum set of data required	100,000
# of emergency latrines constructed	5,000
Emergency water supply per person per day	10 litres
# of households receiving on full NFI kit	20,000
# of shelter kits distributed	20,000
# health consultations in health facilities accessed by refugees	100,000
# of persons receiving livelihood assistance	20,000
# of refugee children enrolled in basic school	33,000
# of refugees counselled at protection desks	10,000
Communities and people affected by the crisis have timely access to clear and relevant information about their rights and entitlements, including about issues that may put them at further risk.	
Communities and people affected by the crisis, including vulnerable and marginalized groups, are fully aware of the expected behavior of humanitarian staff, and are aware of complaints mechanisms established for their use.	



Ethiopian refugees, fleeing clashes in the country's Tigray region, rest and cook meals near UNHCR's Hamdayet border reception centre after crossing into Sudan.
© UNHCR/HAZIM ELHAG

List of Organizations

ACRONYM	ORGANIZATION
ADRA	Adventist Development and Relief Agency
ARC	American Refugee Committee
BPWO	Business and Professional Women Organization
CIS	CARE International Switzerland
COOPI	Cooperazione Internazionale
CWW	Concern Worldwide
DRC	Danish Refugee Council
FAO	Food and Agriculture Organization
HOPE SUDAN	Hope and Friendship for Development Organization
IOM	International Organization for Migration
IRW	Islamic Relief World
JASMAR	Jasmar Human Security Organization
Medair	Medair Organization
MC	Mercy Corps
NCA	Norwegian Church Aid
NRC	Norwegian Refugee Council
PIS	Plan International Sudan
RI	Relief International
SCI	Save the Children
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
UNOPS	United Nations Office for Project Services
UNWOMEN	UN WOMEN
UPO	United Peace Organization
WFP	World Food Programme
WHH	Welthungerhilfe
WHO	World Health Organization
ZOA	ZOA International Sudan



Ethiopian refugee children, fleeing clashes in Tigray region, crossing the border into Sudan.
© UNHCR/HAZIM ELHAG

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