

2016

# HUMANITARIAN RESPONSE PLAN

JANUARY-DECEMBER 2016

JAN 2016



SUDAN

TOTAL POPULATION

38.4M

PEOPLE IN NEED

5.8M

PEOPLE TARGETED

4.6M

REQUIREMENTS (US\$)

952M

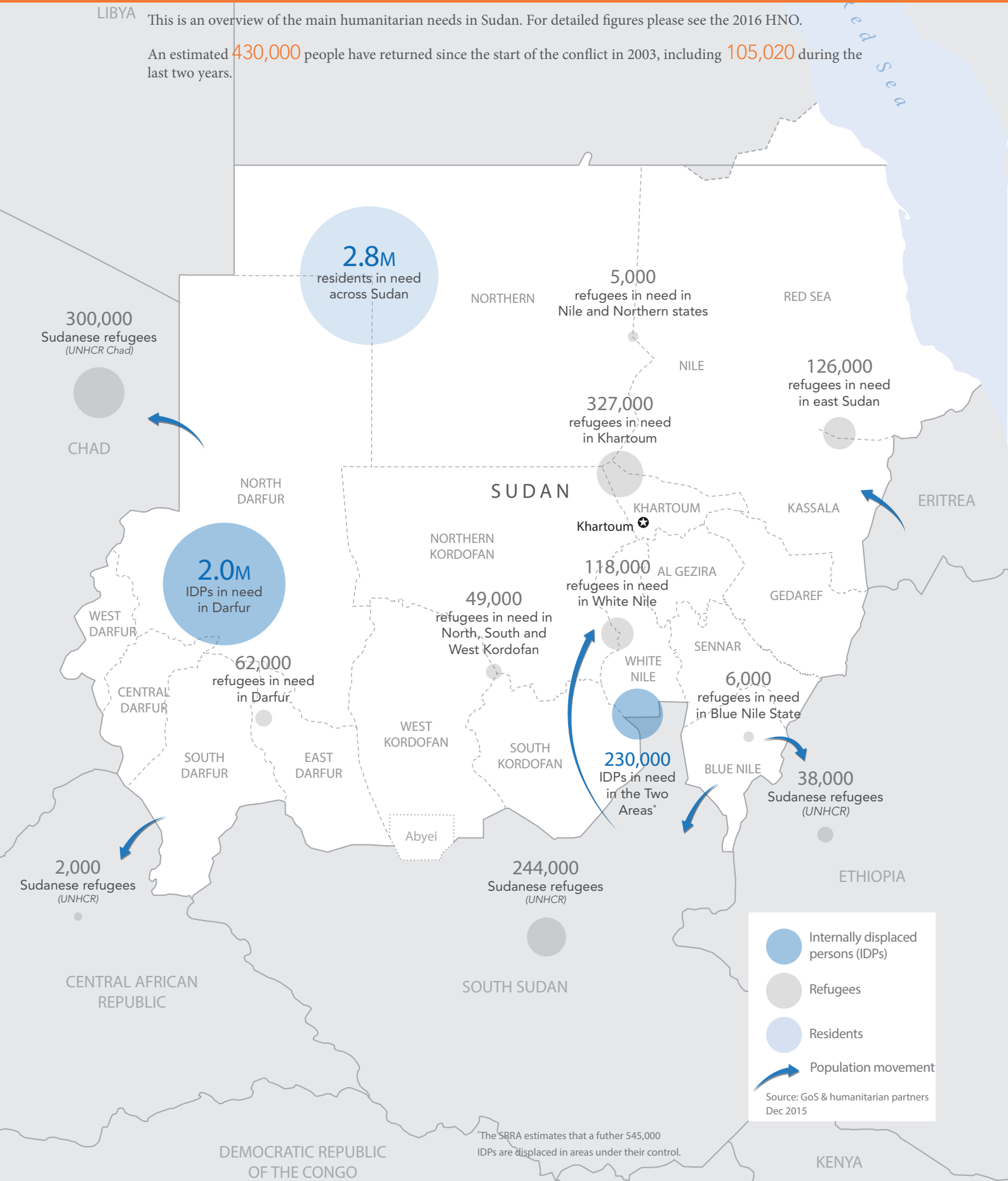
# HUMANITARIAN PARTNERS

80

LIBYA

This is an overview of the main humanitarian needs in Sudan. For detailed figures please see the 2016 HNO.

An estimated 430,000 people have returned since the start of the conflict in 2003, including 105,020 during the last two years.



- Internally displaced persons (IDPs)
- Refugees
- Residents
- ➔ Population movement

Source: GoS & humanitarian partners Dec 2015

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



## FOREWORD BY

# THE HUMANITARIAN COORDINATOR

Despite ongoing efforts by national and international humanitarian actors in recent years, Sudan continues to face significant and diverse humanitarian needs. In order to focus the delivery of humanitarian aid on the most vulnerable, the 2016 Humanitarian Response Plan reflects an attempt to identify the needs of people using criteria of vulnerability rather than status. In particular, rather than assuming that all internally displaced persons (IDPs) are in need because they are displaced, the life-saving and protection needs of vulnerable IDPs have been prioritised.

The main humanitarian needs in Sudan result from several factors. New and protracted displacement due to conflict affects access to basic services and disrupts the livelihoods and food security of many people. In many areas, food insecurity is also exacerbated by adverse climatic phenomena. Acute malnutrition among children under the age of five is above emergency thresholds in several areas across the country. Moreover, refugee movements into Sudan continue, and unfortunately show no sign of abating. As a result of conflict and food insecurity in South Sudan, refugees continue to cross into Sudan seeking protection and assistance, stretching already limited resources in host communities. The generosity that Sudan has shown towards refugee arrivals is to be thoroughly commended.

The approach of the 2016 HRP is to target the most vulnerable, including the South Sudanese refugees. The Plan thus seeks US\$952 million to address the humanitarian needs of up to 4.6 million people targeted by this plan: \$581 million for IDPs; \$225 million for refugees; and \$146 million for vulnerable residents.

In line with a strong commitment to principled humanitarian action, humanitarian partners will seek to address humanitarian needs wherever they may be located in Sudan, including in hard-to-reach areas of the Darfur states, South Kordofan and Blue Nile states.

Strong partnerships between national and international actors are also critical to ensuring people receive the life-saving assistance they need.

Although the primary role of humanitarian aid is to help people survive and maintain their dignity, the humanitarian response integrates approaches where and when possible to reduce communities' dependency on external aid. This is in particular true with regard to the response provided for the protracted displaced communities. In 2016 and in the years to come, the humanitarian and development actors in Sudan will work towards enhancing coherence and synergies between the development and humanitarian responses, so that they can work jointly with the government to ensure the sustainable delivery of basic services to those in need, and particularly those living in protracted displacement.

The 2016 Humanitarian Response Plan provides a way forward to tackle the challenges inherent in planning and responding to large-scale needs in a protracted and crisis setting. All the force of our efforts must now combine to open up humanitarian access, bolster national capacity and deliver a calibrated and efficient response.

Ms. Marta Ruedas  
Resident and Humanitarian Coordinator

## FOREWORD BY

# THE HUMANITARIAN AID COMMISSIONER GENERAL

The Humanitarian Response Plan (HRP) for 2016 has been developed in collaboration with the United Nations and partners in order to respond to humanitarian needs across Sudan. This plan involves efforts of almost all humanitarian actors in the country, considers government strategies for humanitarian work and places national priorities at the centre of the plan.

We commend the level of coordination and cooperation among all humanitarian partners including the relevant governmental bodies and the United Nations, which has achieved outstanding outcomes and resulted in significant humanitarian contributions to address many crises and emergencies. We appreciate the contributions of the United Nations, its various agencies and donors and the national and international non-governmental organizations in providing assistance to those affected and we emphasize our satisfaction with the level of coordination with the United Nations in developing the 2016 HRP where work has been conducted with effective and transparent partnership with the Government National Mechanism established to follow up the joint plan.

The Government of Sudan will remain committed to facilitating the implementation of this response plan. Coordination and partnership between the Government, the UN and other international and national NGOs are crucial to ensuring people in need receive the humanitarian protection and relief assistance they require in a timely and systematic manner. This will enable humanitarian partners to respond to humanitarian needs, strengthen resilience of local communities and support sustainable solutions.

The Government of Sudan appreciates the efforts being made to strengthen national capacities to address the humanitarian needs in a comprehensive manner. Combined efforts to strengthen national capacities in the field of humanitarian planning and response are critically important.

While acknowledging the challenges faced in information sharing, monitoring and evaluation, we nonetheless highlight the need for proactive partnership among humanitarian actors to promote the integration of roles and exchange of knowledge.

Promoting integration of roles and exchange of knowledge is key for ensuring that humanitarian support is tied to early recovery and development.

We call for the establishment of balanced and effective partnerships with all actors, governmental and non-governmental organisations in Sudan to serve the strategic objectives and national objectives of strengthening the capacity of families, groups and host communities to mitigate risks and better endure shocks, promote and facilitate sustainable solutions for displaced persons as well as affected communities in the targeted localities to ensure the effectiveness of voluntary, national and humanitarian action. Effective partnerships are important in accessing and supporting those affected and those in need of humanitarian services.

We take this opportunity to emphasize the need and importance of the joint and regular monitoring process of periodic follow-up of programmes and projects of the HRP, the importance of assessing and evaluating progress, in order to maximise the impact of the available resources.

Finally, I would like to thank all those who have contributed to the development of this plan. Our special thanks go to the members of the Government National Mechanism and the United Nations. With sincere wishes for the continuation of active participation as well as efforts to serve people in need.

H.E. Mr. Ahmed Mohamed Adam  
Humanitarian Aid Commissioner General

THE HUMANITARIAN RESPONSE PLAN

# AT A GLANCE

STRATEGIC OBJECTIVE 1

Protect the lives and fundamental well-being of civilians affected by conflict or natural disasters



STRATEGIC OBJECTIVE 2

Strengthen self-reliance and facilitate durable solutions, including through integration and voluntary return



STRATEGIC OBJECTIVE 3

Ensure life-saving emergency relief is provided to the most vulnerable people affected by conflict and disaster



STRATEGIC OBJECTIVE 4

Reduce food insecurity and malnutrition to below emergency levels



PEOPLE IN NEED



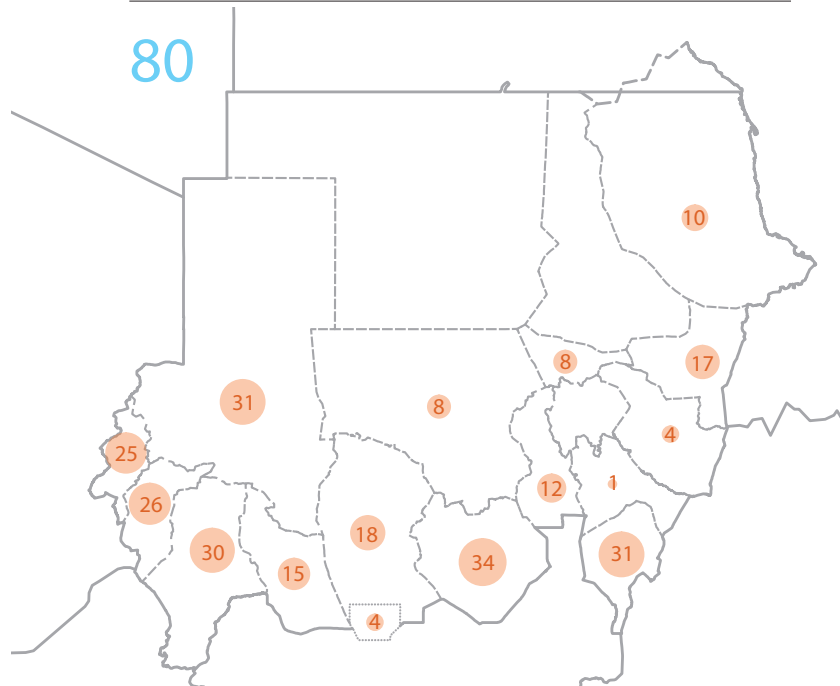
PEOPLE TARGETED



REQUIREMENTS (US\$)

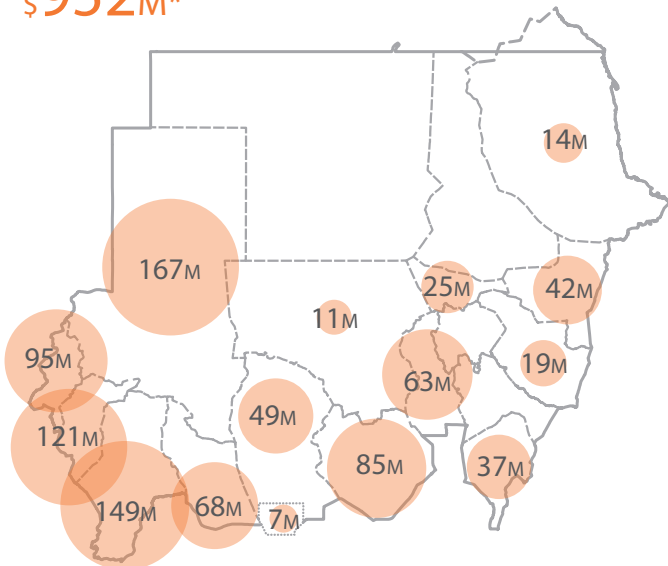


OPERATIONAL PRESENCE: NUMBER OF HRP PARTNERS



FINANCIAL REQUIREMENTS HRP 2016 (US\$)

\$952M\*

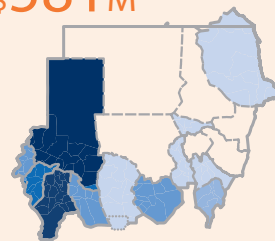


\* Estimated figures.

OPERATIONAL RESPONSE

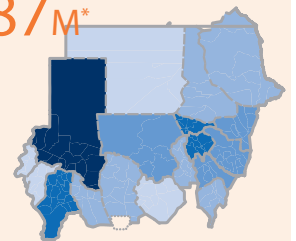
IDPs

\$581M\*



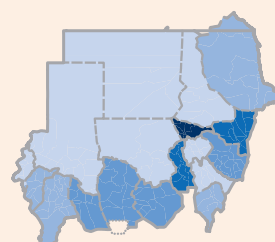
MALNUTRITION (Vulnerable Residents)

\$87M\*



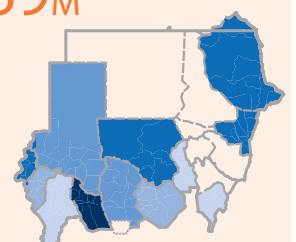
REFUGEES

\$225M\*

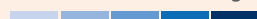


EL NIÑO (Vulnerable Residents)

\$59M\*



Severity of needs: Low Med High



## SUMMARY OF

## NEEDS, TARGETS &amp; REQUIREMENTS

The 2016 Humanitarian Response Plan (HRP) for Sudan targets 4.6 million people of the 5.8 million people in need in Sudan. This decrease of 800,000 people targeted compared to the 2015 HRP, is a result of strict prioritisation that addresses multi-sector or multiple needs, focusing predominantly on levels of vulnerability rather than status. Humanitarian need

in Sudan arises primarily due to new displacement, including the displacement of refugees from South Sudan, malnutrition, and food insecurity exacerbated by El Niño. The 2016 HRP appeal is US\$952 million, 8 per cent less than the 2015 appeal, reflecting the reduced targeted population and the common approach to prioritisation across sectors.

	TOTAL		BY STATUS				BY SEX & AGE		REQUIREMENTS	
	People in need	People targeted	IDPs	Refugees	Returnees	Vulnerable Residents	% female	% children, adult, elderly*	Total for refugees	Total (US\$)
Education	1.6M	0.42M	0.3M	0.12M	0.02M	0.1M	50%	99   1   0%	6M	50.0M
ES/NFI <sup>1</sup>	1.5M	1.5M	1.08M	0.35M	0.1M	0.01M	50%	60   35   5%	0.5M	29.9M
FSL <sup>2</sup>	4.6M	4.6M	1.97M	0.35M	0.11M	2.21M	51%	40   55   5%	8.3M	321.5M
Health	3.9M	3.4M	2.23M	0.35M	0.07M	0.97M	51%	53   38   9%	6.9M	66.0M
LET <sup>3</sup>	-	-	-	-	-	-	-	-	-	27.8M
Nutrition	2M	1.46M	0.16M	0.02M	0.01M	1.3M	51%	85   15   0%	-	97.1M
Protection	3.3M	2.5M	1.97M	0.7M	0.05M	0.51M	55%	60   33   7%	2M	47.2M
RRR <sup>4</sup>	2.3M	0.31M	0.23M	-	0.09M	-	40%	69   26   5%	-	27.3M
WASH <sup>5</sup>	5.4M	3.5M	1.6M	0.35M	0.15M	1.6M	55%	60   33   7%	10M	78.5M
Common Services	-	-	-	-	-	-	-	-	-	16.0M
RMS <sup>6</sup>	0.7M	0.7M	-	0.7M	-	-	54%	62   34   4%	190.9M	190.9M

1. Emergency Shelter/Non-Food Items
2. Food Security & Livelihoods
3. Logistics & Emergency Telecommunications
4. Recovery, Return & Reintegration
5. Water, Sanitation & Hygiene
6. Refugee Multi-Sector

\*Children (<18 years old), adult (18-59 years), elderly (>59 years)

## STRATEGIC

## OBJECTIVES

The Humanitarian Country Team seeks to achieve four strategic objectives which are supported by short term and long term programmatic approaches.



**1** Protect the lives and fundamental well-being of civilians affected by conflict or natural disaster



**2** Strengthen self-reliance and facilitate durable solutions, including through integration and voluntary return



**3** Ensure life-saving emergency relief is provided to the most vulnerable people affected by conflict and disaster



**4** Reduce food insecurity and malnutrition to below emergency levels

1. The over-arching strategic objective of this HRP is to **protect the lives and fundamental well-being of civilians affected by conflict or natural disaster**. This objective focuses on the protection of civilians from violence and abuse, particularly by parties to the conflict, and the prevention of further exposure to violence and abuse by promoting full respect for the rights of individuals. People's needs extend beyond material assistance and require the provision of specific counselling and humanitarian protection activities. The humanitarian community works in cooperation with the Government of Sudan (GoS) and other partners to ensure that people in need are assisted and supported in line with the fundamental principles of humanity, impartiality, neutrality and independence. Through this objective, the Humanitarian Country Team (HCT) further commits to fully take into consideration the specific needs of women and men; boys and girls; as well as vulnerable groups such as the elderly, the disabled and the chronically ill. Protection, as a concept, is mainstreamed throughout programmatic interventions.

2. A cross-cutting strategic objective is to **strengthen self-reliance and, for conflict-affected people, facilitate durable solutions, including through integration and voluntary return**. For the vast majority of people who have been displaced for over a year, the priority is to deliver relief aid in a more sustainable manner to enhance self-reliance. In particular, partners in this plan commit to develop emergency programmes in a way that empowers affected people to become more self-reliant, consequently reducing

aid dependency, and builds the capacity of national partners. Humanitarian partners will continue to engage and encourage relevant government and development partners to ensure that humanitarian action is complemented by the development and governance actions that are needed to address the root causes of humanitarian need for those people who have been displaced for over a year.

3. In the face of recurrent population displacement from within or outside the country, as well as natural disasters, this HRP continues to **prioritize life-saving emergency relief to the most vulnerable people affected by conflict and disaster**. The emergency relief needs of displaced people, whether from within or outside Sudan, are similar. Saving lives of vulnerable people requires maintaining their food security and livelihoods, attending to the critical needs of acutely malnourished children, ensuring vulnerable people are sheltered from the elements, and providing access to basic services such as water and sanitation, health, humanitarian protection and education. The most vulnerable people (women, children, the elderly and people with disabilities) will need specific support.

4. The last strategic objective is to **reduce food insecurity and malnutrition to below emergency levels across Sudan**. This objective is in recognition that, while compounded by conflict and displacement, the food security and malnutrition crises have distinct causes, including socio-economic and climatic factors. These require tailored responses.



## RESPONSE

## STRATEGY

Recognising that the drivers of humanitarian needs in Sudan are multiple and complex and can only be tackled over a period of years, the Humanitarian Country Team has developed four distinct humanitarian response strategies. An important common feature of these response strategies is that they provide a multi-sectoral framework for humanitarian response, and facilitate connecting the short and medium-term humanitarian activities with the required long-term recovery and development activities that are implemented outside the Humanitarian Response Plan.

## RESPONSE STRATEGIES

Humanitarian needs around the world are increasing, while funding to respond to these needs is not keeping pace with demand.

Globally, most humanitarian resources are going to a very small number of acute emergencies. As a result, the capacity of the HCT to respond to needs in Sudan has been reduced, despite new and protracted displacement and natural disasters. The protracted humanitarian needs are multi-dimensional, and cannot be addressed through humanitarian action alone.

Recognising that the drivers of humanitarian needs in Sudan are multiple and complex and can only be tackled over a period of years, the HCT has developed four distinct humanitarian response strategies. An important common feature of these response strategies is that they provide a multi-sectoral framework for humanitarian response, and facilitate connecting the short and medium-term humanitarian activities with the required long-term recovery and development activities that are implemented outside the HRP. By providing a long-term framework, the HCT also aims to facilitate better multi-year programming, and foster programming approaches among all partners that take into consideration - from the onset - the risk of aid dependency.

## 1. Response Strategy for internal displacement.

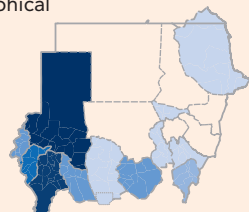
Estimated Financial Requirements:

**\$581 M**

People targeted:

**2.23 million**

Geographical focus:



In line with its strategic objectives and with Sudan's National Policy on Internally Displaced Persons (IDPs), the HCT has reinforced its commitment to provide life-saving humanitarian aid and protection, promote self-reliance and contribute to finding durable solutions for people affected by conflict

or natural disasters. This strategy for tackling internal displacement combines two components, one targeting new displacement and one focusing on protracted displacement.

**1a. Response Strategy for new, sudden-onset displacement.** The HCT's Emergency Response Framework (ERF) constitutes the core of the international aid community's commitment to provide a coordinated response to sudden-onset crises in Sudan. It directs predictable, timely, and coherent multi-sector assistance.

Regular violence and unrest in Darfur and the 'Two Areas' of South Kordofan and Blue Nile recurrently leads to population displacement.

New displacements, both temporary and long-term, have ranged between one and four hundred thousand people per year over the last decade. Although some people are able to flee with personal belongings, many are in urgent need of shelter, water, food and medicine. The period of time until displaced people can make an informed decision on whether to return varies widely, but it is estimated that the majority of displaced people return to their place of origin within a year.

In light of these acute humanitarian needs, the HCT's strategic objective for sudden-onset displacement is to prevent excess morbidity and mortality by providing protection and lifesaving relief. The HCT adopted in 2015 an ERF to identify context relevant emergency response targets which the HCT commits to achieve during the first weeks of a new disaster. It identifies roles and responsibilities to implement pre-agreed communal approaches to life-saving activities, thereby ensuring transparent, principled and coherent humanitarian action.

Triggered by a sudden-onset emergency, the ERF covers a period of three months from the onset of a new crisis. It comprises three inter-linked stages:

- Stage 1: ten days (community level basic response and quick needs assessment)
- Stage 2: one month (initial response and detailed sector-specific assessment)
- Stage 3: three months (improving the quality of the response, increasing response standards, and identifying the

transition/exit strategy from the emergency mode)

Each stage of the process prescribes to Inter-Agency Standing Committee (IASC) partners a specific set of activities which have been pre-agreed to maximize timeliness, efficiency, accountability and cross-sectoral synergies. This is considered a key priority, given the decreasing number of implementing partners and the geographical spread of new crises. As IASC partners report against the ERF standards, critical gaps can be identified and addressed swiftly.

#### Examples of Sudan ERF targets and related key activities after one month:

**Food Security:** Initial provision of emergency food assistance

- Standard food assistance ration according to assessment-recommended food security intervention (300g of food per person per day).

**Shelter:** Distribution of ES/NFIs to verified households

- One kit per household of five: one plastic sheet, one kitchen set.
- One jerry can, two blankets, two sleeping mats.

**Water Supply:** Construction of new water points/sources

- 250 persons per tap at a flow rate of 7.5l per minute.
- Provision of 7.5 - 10 litres per person per day (7.5l/p/d if water trucking is the means of provision).
- Distance to farthest user no more than 500m in camps and 1500m for IDPs in host communities and returnees.

**Sanitation:** Construction/Rehabilitation of new latrines

- 1 latrine for 50 people.

**1b. Response Strategy for addressing humanitarian needs in situations of protracted displacement.** While protecting lives and human well-being, the HCT aims to strengthen IDPs' self-reliance by ensuring humanitarian aid programmes move away from emergency response approaches and delivery modalities to more sustainable ones, especially by empowering vulnerable people to choose and manage themselves the support activities they need.

Long-term conflict in Darfur and the 'Two Areas' has resulted in widespread displacement. Despite returns, the Government estimates that in 2016, well over two million people are still displaced, mainly across Darfur where 1.6 million people live in camps. In armed opposition-controlled areas, several hundreds of thousands more people could also be in need of humanitarian assistance. Insecurity, disputes over land ownership and weak public services are the most often cited reasons for displaced persons not returning to their place of origin. After many years in camps, some of which are located adjacent to urban population centres, a sizable portion of IDP households have been able to develop coping and livelihood strategies that allow them to no longer solely depend on humanitarian aid. At the same time, new displacement has overstretched host community and aid partners' resources

and capacity to meet the needs of vulnerable displaced people. In this context, building the self-reliance of protracted displaced people is an immense challenge.

The HCT's strategic objective to address the humanitarian needs of protracted IDPs is to ensure that the needs of the most vulnerable people are met in a way that facilitates or strengthens their self-reliance and resilience, and facilitates achieving durable solutions. Special efforts are made to ensure that gender, age and environmental issues are mainstreamed when developing new activities.

The Darfur Protracted Displacement Strategy (DPDS), a 2016-2018 HCT strategy, aims to increase self-reliance of IDPs in Darfur, through a multi-sectoral, coordinated and targeted approach while promoting a protective and inclusive environment, with emphasis on vulnerable IDPs, and their access to services as well as livelihoods enhancement. The strategy will be accompanied by a multi-sectoral operational plan of action aimed at enhancing access to basic services (co-location of health, education, WASH facilities), promoting a protective environment (protection, shelter), as well as fostering economic empowerment and sustainable livelihood solutions (food security, livelihood, early recovery).

The three key objectives of the strategy are:

- To link assistance to identified needs through vulnerability-based targeting.
- To improve sustainable access to quality basic services for IDPs in camps and in host communities.
- To increase knowledge and skills of IDPs to access income and livelihood opportunities.

The overall approach of the aid community is to shift the emphasis from unconditional status-based short-term assistance to an approach focused on strengthening self-

#### Example: WASH Sector

In 10 out of 38 sampled Darfur IDP camps, 100 per cent of the running costs of water systems are covered by the displaced community. With the aim to boost self-reliance while also strengthening community assets and services, a step-by-step approach is used, consisting of:

- A vulnerability study in selected IDP camps, to understand vulnerabilities and rationale for contribution by community members.
- A cost-recovery system, tailored to each camp/location and including effective operation and maintenance of WASH supply infrastructure considerations.
- Guidelines for the implementation of the tariff system and capacity development of partners.
- Piloting guidelines in selected camps.
- Scaling up to areas with a similar context.

reliance and putting livelihoods, strengthening of community assets and services, partnerships and social cohesion at the centre of programming. In particular, the proposed approach will involve targeting IDPs based on their assessed capacities, vulnerabilities and needs rather than their status as IDPs. In addition, access to basic services such as health and education will be supported. At the same time, very vulnerable IDP households who remain in need of relief assistance will continue to receive support in a more targeted manner. Special focus will be placed on the use of innovative means of assistance, including cash transfer programmes as well as on ensuring categories of people considered most vulnerable, such as unaccompanied children, single-headed households, elderly people and people with disabilities, continue to receive the support they need.

Importantly, the strategy seeks to build strong linkages with national policies and plans at the federal, state and locality level, as well as with development aid initiatives planned by inter-governmental (e.g. the Intergovernmental Authority on Development/ IGAD) and international organizations (e.g. the World Bank). The strategy will also aim to seek synergies with the 2013 – 2019 Darfur Development Strategy and the upcoming UN Development Assistance Framework for 2018 – 2022.

## 2. Response Strategy for refugees

While the legal basis, accountability and response mechanisms to the protection needs of refugees are unique, activities in terms of material assistance may be the same as those for IDPs. Meeting refugees' emergency relief needs, enhancing their self-reliance and supporting durable solutions are shared with IDP response strategy objectives, while the enjoyment of refugees' rights remains governed by a very distinct set of national and international legal frameworks.

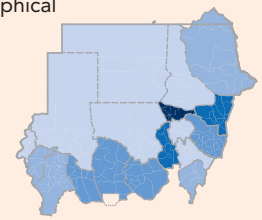
Estimated Financial Requirements:

**\$225 M**

People targeted:

**0.7 million**

Geographical focus:



Sudan hosts over 130,000 refugees and asylum seekers from nearby countries, namely Eritrea, Ethiopia, Chad, Central African Republic, Syrian and Yemen; and over 220,000 South Sudanese have sought refuge in Sudan following the outbreak of violence in South Sudan in December 2013. In addition, the legal status of an estimated 350,000 South Sudanese who remained in Sudan following the secession of South Sudan in 2011 remains unclear, leaving these individuals at a continued risk of statelessness.

Responding to the emergency needs of South Sudanese remains a top priority. The strategic objective for new refugee arrivals is to protect their lives and ensure their essential life-saving needs are met, whilst recognizing their unique protection needs. Having fled dire situations and travelled long distances, most refugees from South Sudan arrive in urgent need of protection, food, water, shelter, and health assistance. While UNHCR has maintained that post-December 2013 arrivals from South Sudan are prima facie refugees in line with the 1951 Refugee Convention to which the GoS is a party, the South Sudanese were considered as “brothers and sisters” until recently, allowing them freedom of movement and access to public services throughout Sudan.

The presence of refugees is placing increasing pressure on host communities, as well as on the response capacity of humanitarian partners and the government. An additional strategic objective is therefore to ensure that new arrivals become independent of external assistance as quickly as possible, local conditions permitting. Over 90,000 of the new South Sudanese arrivals reside in White Nile State, of whom 72,000 people live in seven designated sites where

### Cash Transfer Programming in Sudan

Where appropriate and following thorough research and market analyses, Cash Transfer Programming (CTP) will be included into humanitarian response activities in Sudan. A number of sectors currently already use CTP for key components of their interventions. The Food Security and Livelihood Sector, for example, partly relies on CTP in the form of cash-for-work or vouchers, while the implementation of parts of the Nutrition Sector strategy will involve conditional cash transfers and livelihood assistance to families with malnourished children. Conditional cash transfers to vulnerable households to ensure their access to water and sanitation will be used by WASH Sector partners, along with vouchers. In Khartoum, vulnerable refugees and asylum seekers are being assisted through cash-based interventions. Overall, a number of actors, including UNICEF, UNHCR, WFP and IOM, are currently relying on CTP for programme implementation. Applied in the right context, CTP has the potential to facilitate and strengthen self-reliance, particularly for protracted displaced communities, such as in Darfur. At the same time, CTP is flexible and may be scaled up in situations where new displacement occurs. As a next step, a Cash Working Group, which includes representatives from sectors and front-line responders, will be established in 2016 to design, test and coordinate cash-based interventions, targeting the most vulnerable crisis-affected households.

no pre-existing infrastructure existed. Women and children comprise 88 per cent of the population. With a limited availability of space and resources and a continuing flow of arrivals, it is a challenge to maintain response and protection standards. Additional sites are being established in White Nile State to ease congestion and ensure services meet UNHCR post-emergency standards in the existing sites, but also to allow for the absorption of 50,000 new arrivals anticipated over the course of the year. Since January 2016, heightened food insecurity in South Sudan has intensified the rate of arrivals. In just over two months, approximately 48,000 South Sudanese have arrived in a very poor state of nutrition and health in East Darfur, South Darfur and West Kordofan, the majority of whom are women and children. This new influx is anticipated to continue and the scaling up of response activities in East Darfur, where current response capacity is weak and direct access remains limited, is a priority.

In eastern Sudan, the presence of over 93,000 refugees and asylum seekers has put pressure on the availability of local resources. Over 78,000 refugees have lived for decades in the region's nine camps. Due to limited access to livelihood opportunities, many refugees live in chronic poverty and depend on humanitarian assistance to meet their basic needs. In addition, about one thousand people continue to cross the border into eastern Sudan each month, most of them young Eritrean males. Around 80 per cent of these new arrivals soon move to Khartoum or onwards through North Africa, often with the use of smuggling networks that put them at risk of exploitation, abuse and human trafficking. To provide sustainable alternatives to onward movements and increase refugees' self-reliance, the aid community will improve the provision of basic services throughout the camps and new arrivals' reception centres, seek more synergies with development actors present in the area, enhance resettlement opportunities, while also scaling up livelihood and education programmes, and continue to advocate for issuance of work permits, freedom of movement, and promoting urban centres as a legal alternative to camps.

Darfur is home to 8,800 Chadian refugees residing in two camps in Central Darfur and 1,300 refugees from Central African Republic living in urban settlements around Nyala. Some 60 per cent of the Chadian refugees have expressed intent to return, and spontaneous returns continue to be supported while a formal repatriation agreement between the GoS and Chad is finalised. In the meantime, ongoing assistance is necessary to support these refugees, particularly for health, education and livelihoods.

### 3. Response Strategy for malnutrition

A comprehensive multi-sectoral approach to tackle both the humanitarian consequences and underlying socio-economic and developmental causes of malnutrition is needed to achieve a notable reduction in global acute malnutrition (GAM) rates. The malnutrition situation in Sudan has not improved over the last decade but in 2015, Sudan joined the global Scaling Up Nutrition (SUN) movement, reflecting the government's commitment to tackle malnutrition.

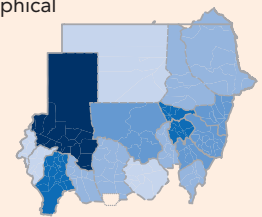
Estimated Financial Requirements:

**\$87 M**

People targeted:

**1.46 million**

Geographical focus:



Malnutrition results in short and long term consequences. Increased risk of mortality and morbidity are the short term consequences of child malnutrition. Sudan has one of the highest prevalences of wasting in the Middle East and North Africa (MENA) region with a 16 per cent GAM rate among children under five years old. About 2 million children suffer from wasting annually, of whom over 555,000 are severely malnourished. The malnutrition problem in Sudan is not limited to conflict-affected areas; the majority (52 per cent) of acutely malnourished children live in nine non-conflict affected states. Undernutrition is the result of multiple underlying structural causes: food security, health, water and sanitation, as well as a lack of a protective and enabling environment. The HCT's multi-sector approach to addressing the emergency needs of malnourished children is designed to also contribute to the long-term efforts of the government and partners to tackle malnutrition in Sudan. The approach - in addition to contributing to reducing vulnerability to malnutrition - enhances meeting the HRP multi-sectoral goal of saving lives and reducing morbidity in humanitarian emergency in Sudan.

The HCT's strategic objective is to reduce mortality, morbidity and disability among acutely malnourished children, alleviating the short-term consequences of maternal and child undernutrition by addressing their immediate and underlying causes at the individual and household level. This objective complements current multi-sectoral long-term initiatives to address malnutrition in Sudan, such as the government's commitment to the Investment Case for Nutrition, which also addresses reduced economic productivity.

Reduced mortality and morbidity will be sought by ensuring multi-sectoral nutrition options are available to IASC Sectors. This will act as a force multiplier, improving nutrition outcomes and having a greater impact as compared to sectoral approaches. This includes demarcating so-called nutrition-specific activities within the IASC Nutrition Sector to address the immediate causes of malnutrition. Such nutrition specific activities can include the promotion of breastfeeding; Vitamin A supplementation; maternal balanced energy protein supplementation; maternal multiple micronutrient supplementation; periconceptual folic acid supplementation or fortification. The IASC Nutrition Sector will also ensure that other sectors implement nutrition-sensitive activities to address the deeper, underlying and basic systemic causes of malnutrition. Conditional cash transfers and livelihood assistance to families with malnourished children; family planning and reproductive health services; deworming of children; prevention and early treatment of diarrheal diseases; hygiene promotion; treatment and safe storage of drinking

water and many other activities will be promoted to this end.

HCT partners will strengthen multi-sectoral approaches by a combination of the following implementation modalities:

- **Defining a common outcome:** To reduce malnutrition levels and improve mortality and morbidity rates. This requires partners from various sectors to share assessments of needs, strategy development, implementation and monitoring.
- **Geographical convergence:** Populations with multiple needs are identified through cross-sectoral needs and joint vulnerability prioritization. IASC Sectors organize themselves together to support a population by providing services to the same location.
- **Enhancing contribution from other sectors:** Each IASC Sector is asked to show how it can contribute to the delivery of nutrition services.
- **Consolidation of Services (Essential Package approach):** A comprehensive set of initiatives and activities from several IASC Sectors is combined into one plan.

The implementation modalities are applicable in all stages of humanitarian programme cycle (HPC). The HCT, through various humanitarian coordination mechanisms, ensures the application of the multi-sectoral approach in strategic and operational decision-making.

#### 4. Response Strategy for the impact of El Niño

A multi-sectoral response is essential in tackling the impact of El Niño in the short term and long term. Sudan's Humanitarian Response Plan considers El Niño-induced needs in its broader response context in order to build on existing capacities in an effort to prevent the deterioration of the humanitarian situation for the most vulnerable people. An El Niño Mitigation and Preparedness Plan which was developed by the international humanitarian community and the Government of Sudan is complemented by the activities in the HRP.

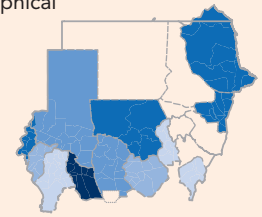
Estimated Financial Requirements:

**\$59 M**

People targeted:

**2.21 million**

Geographical focus:



The current global El Niño event is considered one of the strongest on record. In Sudan, El Niño significantly impacted the 2015 rainy season with delayed rains, below-average rainfall and intermittent dry spells. Preliminary estimates indicate that the 2015/2016 harvest was 15 per cent below the 5-year average. Over 90 per cent of all 600 haffir dams across Sudan were dry by the end of April 2016. As over 70 per cent of the rural population relies on rain-fed agriculture for their food and income and over 80 per cent of the population relies on rainfall for their water supply, the impacts of El Niño have severely affected the coping capacities of vulnerable populations. It is estimated that 1.9 million people will face reduced agricultural and livestock production due to smaller cultivation areas, delayed planting, poor pastures and limited water availability, including for livestock. An estimated 3.2 million people will face water shortages, causing further deterioration of already fragile sanitation and hygiene conditions in affected localities. The impacts of El Niño may increase malnutrition trends especially during the lean season, as poor nutritional status is associated with household food insecurity, poor access to water, and diseases.

Response to the impact of El Niño will require a holistic response across sectors targeting small-scale farmers and pastoralist communities in addition to already vulnerable groups who will be affected through low availability of food, higher market prices, and reduced pasture, fodder and water for livestock. A substantial response is required to avoid a drastic deterioration of the food insecurity felt at household level, aiming at preventing negative short-term coping strategies such as selling off the households' productive assets and supporting those dependent on agriculture and livestock. In addition to addressing short-term hunger and negative

#### Mainstreaming gender in humanitarian response

The majority of people in need of humanitarian assistance in Sudan, including those affected by displacement or returning voluntarily to their area of origin after a period of displacement, are women and children. Female-headed households are also commonplace, triggered by the separation of men and adolescent boys during conflict-induced displacement. According to IOM, in North and South Darfur 80 per cent of single person-headed households are indeed headed by women (IDPs in 2016, North & South Darfur). As a result, there has been a shift in traditional gender roles, exposing women and young girls to increased levels of burden and risks. Mainstreaming gender and focusing specifically on gender-related issues is one of the priorities of this HRP, reflecting the commitments articulated in the Sudan Humanitarian Country Team Gender Strategy 2016-18. In applying a gender sensitive approach to humanitarian response, there will be particular emphasis on implementing assistance modalities that directly engage women and girls not just as direct beneficiaries, but as leaders in crises and recovery.

The HCT-anchored Gender Task Force is currently supporting the IASC Sectors to develop context-specific gender guidance that can be applied throughout the humanitarian programme cycle.

coping behavior, the response will aim at reducing climate risk in the medium to long term, and lay the foundation for sustainable self-reliance.

There will be a focus on immediate life-saving emergency water provision through water trucking. Potential frequent breakdown of water pumps due to increased pumping depth and increased fuel consumption will require a response. Multiplier effects related to water shortage such as disease outbreaks will be addressed through community sensitization, vector control and solid waste management. In large displacement camps, water pumping hours will be reduced appropriately without compromising health.

Food assistance will constitute an important component of the overall, multi-sector response. The duration of assistance will depend on the severity of the effect observed at locality level. The recommended response is based on analysis of factors contributing to food insecurity at household level, including pre-existing food insecurity level and estimated level of crop loss from the 2015/2016 harvest. Acknowledging that not all households in affected areas will be affected by the shock to the same extent, the response will be tailored to address the most urgent needs.

Beyond an emergency food assistance response to fill the immediate food gap and avoid coping behavior that negatively affects future productivity, the FSL Sector will in the immediate and medium term scale up support to small scale farmers and herders affected by El Niño through Food Assistance for Assets (FFA) programmes, water harvesting schemes, agricultural inputs and extension services, to improve crop production, diverse livestock support services and kits, and improve post-harvest storage and handling facilities. Livelihoods diversification support in the form of skills trainings and start up kits will be provided to improve the income generating potential of the affected vulnerable population.

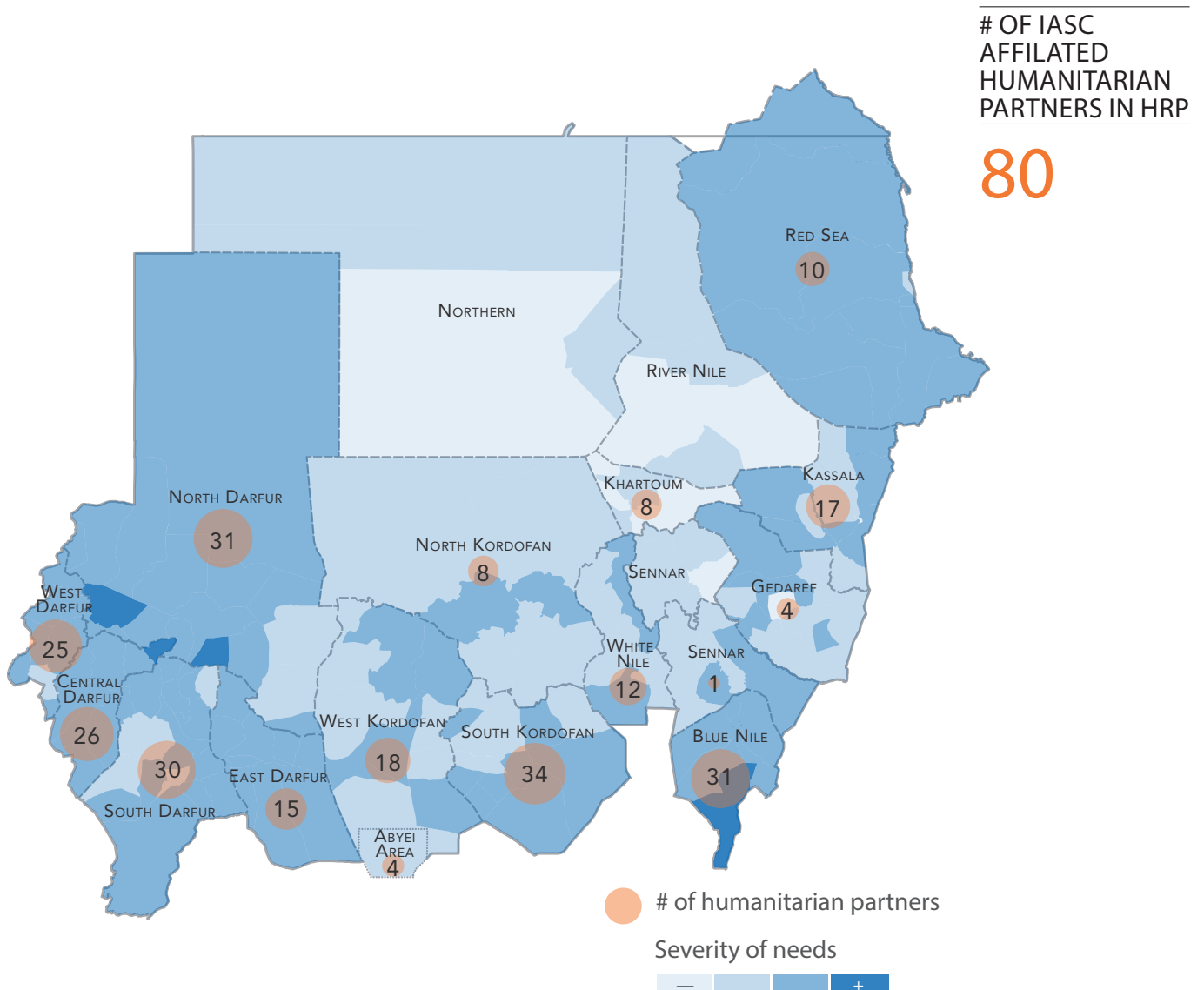
Humanitarian partners including UN agencies, NGOs and the Government of Sudan have an operational presence in most of the El Niño-affected localities (52 of 82 localities). In areas where there is no partner presence, support will be extended through the local community and administration arrangements.

## OPERATIONAL

## CAPACITY

Today there are 220 international and national humanitarian organisations operating in Sudan, of whom 80 are partners of this HRP. About 70 per cent are operational in the Darfur region (155 organisations). Among these 155 organisations in Darfur, there are 13 UN agencies and other international organisations, 42 International Non-Governmental Organisations (INGOs) and 100 National Non-Governmental Organisations (NNGOs). The number of aid personnel working for UN agencies and INGOs in Darfur has been decreasing, from 17,700 in 2009 to 5,000 in 2015 (98 per cent

of the 5,000 are national staff). In addition, in recent years a number of INGOs have closed their operations in parts of Darfur, especially West Darfur, either due to a lack of funding or a restricted operating environment. Indeed, the operational capacity of humanitarian partners is closely linked to sustained and unfettered access, the ability to maintain necessary staff where the needs are largest, as well as funding from donors. The map below highlights the presence of 2016 HRP partners and severity of needs by state and locality.



HUMANITARIAN

# ACCESS

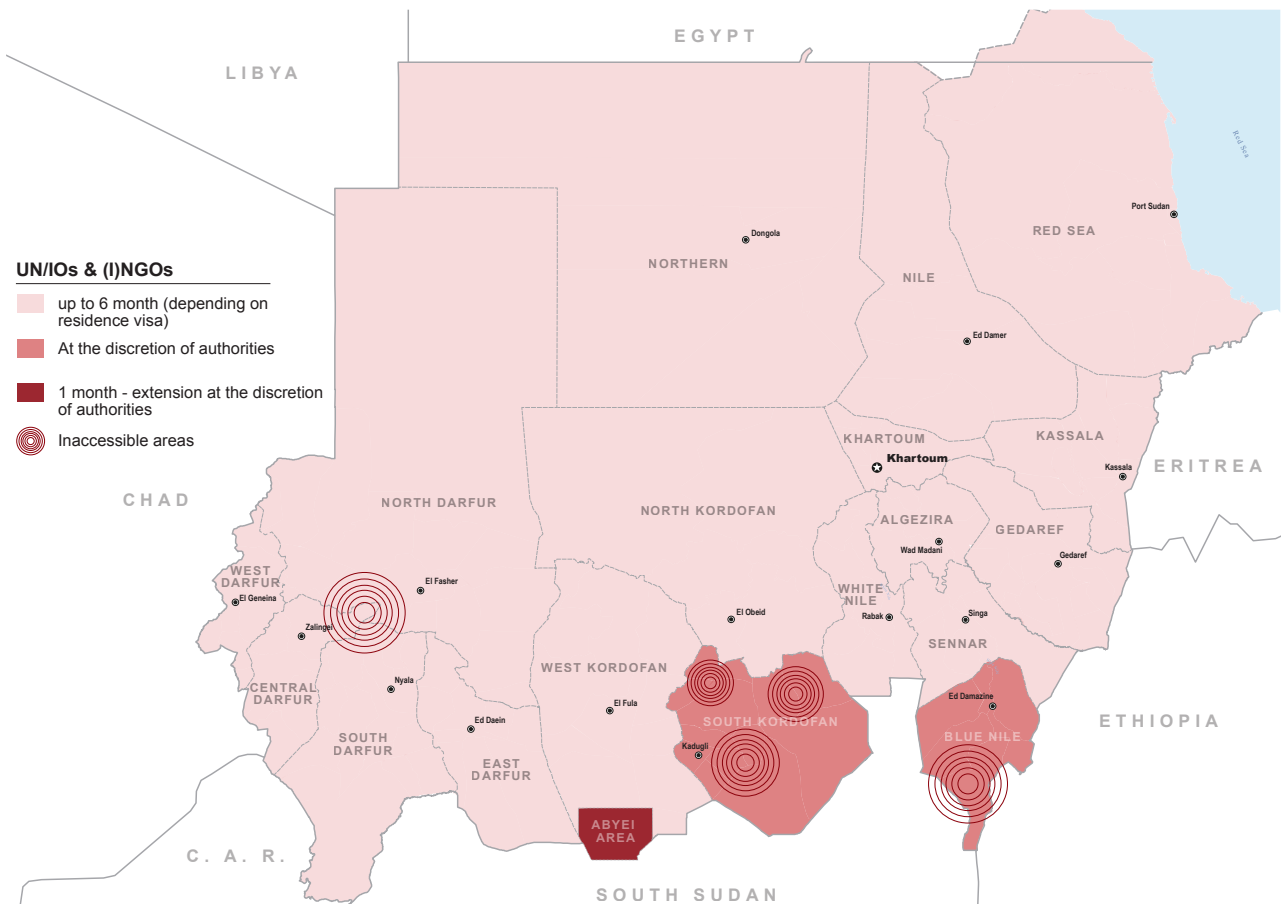
Access constraints will likely continue to impact the timeliness, quality, scale and reach of humanitarian response in 2016. Humanitarian operations are frequently restricted due to a confluence of factors, including travel permit denials/delays and insecurity in certain areas. This slows down and limits operational effectiveness. A diminished humanitarian presence, caused by a reduction in funding, also limits the capacity of humanitarian programmes, especially in the Health and Protection Sectors.

Opposition-held areas remain largely inaccessible due to ongoing violence or insecurity. Delays and denials of travel permits, but also delays of entry/exit visas and subsequent stay permits continue to disrupt the effective and efficient conduct of operations in these areas.

Overall, the presence of international actors, specifically INGOs, is shrinking across Sudan. Implementation modalities have significantly evolved over the years with a marked increase in using local organisations and structures as well as in some cases using more indirect partnership and management approaches.

Respect for international humanitarian law and sustained commitment by all humanitarian actors to provide principled humanitarian assistance remains paramount. In particular, strict adherence to the key humanitarian principles of humanity, neutrality, impartiality and independence, are prerequisites to ensure the acceptance of humanitarian aid delivery by all parties to conflict.

## TRAVEL PERMIT PROCEDURES AND DIRECTIVES



INGOs operating in the 'Two Areas' are to work using national staff through partnership with national organisations. (HAC Directives, 2016)



## RESPONSE

## MONITORING

Inter-Agency Standing Committee partners in Sudan are committed to implementing a monitoring system that informs operations and feeds into continued planning and adaptation of response, based on changing needs and a dynamic operating environment.

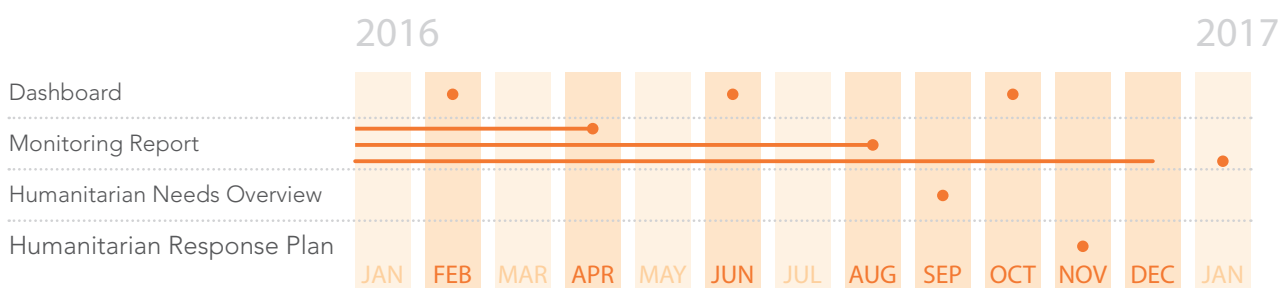
IASC partners in Sudan are committed to implementing a monitoring system that informs operations and feeds into continued planning and adaptation of response, based on changing needs and a dynamic operating environment.

A monitoring framework has been developed for the HRP with clear and measurable indicators that focus on impact and improved service delivery. As part of the accountability framework and the collective decision-making process, IASC Sectors, under the strategic direction of the Humanitarian Coordinator (HC), will adhere to this monitoring framework to ensure enhanced effectiveness of the humanitarian response. The overall goal is to provide a structure for the humanitarian community to assess progress achieved against targeted actions, as set out in this document. The monitoring results will support humanitarian actors in providing an evidence base for making decisions regarding required actions

to address shortcomings, fill gaps and/or adjust response plans, thus contributing to a more effective and efficient humanitarian response in Sudan in the short and long term.

Sector objectives, targets and indicators have been developed to encompass the strategic objectives and response strategy of the HRP. In order to track progress against sector objectives, IASC Sectors will compile reports on projects and their implementation, including state and locality level breakdowns of programme delivery and targeted beneficiaries (disaggregated by sex and age, where possible). Monitoring reports will be issued during 2016, to ensure full transparency and accountability. In hard-to-reach areas, engagement with local leaders, local organisations and other key actors is expected to improve situation awareness and alert partners to critical gaps.






## HUMANITARIAN PROGRAMME CYCLE TIMELINE



NOTES

# PART II: OPERATIONAL RESPONSE PLANS

## SECTOR RESPONSE PLANS

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

## REFUGEE RESPONSE

-  Refugee Multi-sector

## EDUCATION



### PEOPLE IN NEED



### PEOPLE TARGETED



### REQUIREMENTS (US\$)



### # OF PARTNERS



### OBJECTIVE 1:

**1** Increase access to inclusive and protective lifesaving education (formal and non-formal) for children and adolescents affected by emergencies.

### OBJECTIVE 2

**2** Improve the quality of education (formal and non-formal) to ensure continuity of relevant education during and after emergencies for the most vulnerable pre-school and primary school aged children and adolescents.

### OBJECTIVE 3

**3** Strengthen the response capacity of education actors (PTA, headmasters, government officials and partners) to mitigate the impact of emergencies including natural disaster and conflict on education service delivery.

The Education response aims to ensure children in conflict and disaster-affected areas have access to learning and recreational activities. Areas affected by new and protracted displacement and areas affected by El Niño and other climate hazards will be targeted.

In particular, the sector aims to restore access to education for newly displaced communities while maintaining education support for the protracted caseload. Improving existing learning structures will be prioritised where facilities are already overstretched as a result of new arrivals. Where no suitable structures for learning and teaching exist, temporary learning structures will be established, with consideration for protection issues. Safety and dignity and ensuring meaningful access in terms of distance, location and design of education facilities, will be prioritized. WASH facilities will be installed to promote health and hygiene and in order to address a variety of health and protection issues; specifically, facilities will be gender-segregated in order to ensure access to education for girls. Recreational opportunities will promote the well-being and recovery of vulnerable children and youth. School feeding will be implemented to retain children and youth in schools/learning programmes, particularly in areas of displacement and in vulnerable communities where school dropout rates are high. Volunteer teachers may be included in feeding programmes in order to attract and/or retain qualified teachers who may otherwise flee to other areas in search of livelihoods.

Communities hosting large IDP populations, whose resources are often overstretched, will also

receive education support including through the provision of supplies and teacher training on psychosocial support. In El Niño-affected areas, water supply to drought-affected schools will be ensured.

In support of returnees in Um Baru (North Darfur), the sector will support the Ministry of Education in rehabilitating schools, building capacity of teachers and Parent / Teacher Associations (PTAs) and providing one-time basic education supplies, as part of a pilot multi-sectoral response coordinated by the RRR sector.

Cross-sectoral links with WASH, Nutrition, Health and Protection Sectors will support the holistic development and well-being of girls and boys in schools. WASH will work to connect the 100 most highly prioritized schools with water sources, while Nutrition will assist 50 pre-school (Early Child Development) centres in the screening of malnourished children in Darfur, a pilot initiative between the two sectors. Collaboration on health screening, immunization and identification of referral pathways will be prioritized in IDP camps and vulnerable host communities.

By training more female teachers and including more women in PTAs, partners will work towards achieving gender parity. PTAs, as community representatives, will be consulted throughout all phases of the Education in Emergencies response.

Partners will be encouraged to minimise environmental impact, including through use of responsibly-sourced alternative materials such as zinc sheets, instead of wood or grass.

### BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

	BY STATUS				BY SEX & AGE	
	Refugees	IDPs	Returnees	Vulnerable Residents	% female	% children, adult, elderly*
PEOPLE IN NEED	0.12M	0.93M	0.04M	0.46M	50%	100   0   0%
PEOPLE TARGETED	0.12M	0.3M	0.02M	0.1M	50%	99   1   0%
FINANCIAL REQUIREMENTS	6M		44M		*Children (<18 years old), adult (18-59 years), elderly (>59 years)	

**Sector Objective 1:** Increase access to inclusive and protective lifesaving education (formal and non-formal) for children and adolescents affected by emergencies.

Indicator	Location	Baseline	Target
Number of targeted children (by age and gender) supported to access protective learning spaces.	All targeted states.	92,850	180,000
Number of children (by age and gender) with access to gender sensitive WASH facilities (in line with Inter-Agency Network for Education in Emergency (INEE) and Sphere minimum standards) in schools/learning spaces.	All targeted states.	59,189	175,000
Number of children (by age and gender) provided with fortified school meals.	All targeted states.	n/a	428,000

**Sector Objective 2:** Improve the quality of education (formal and non-formal) to ensure continuity of relevant education during and after emergencies for the most vulnerable pre-school and primary school aged children and adolescents.

Indicator	Location	Baseline	Target
Number of targeted children (by age and gender) receiving improved quality learning through provision of teaching, learning materials, and quality teaching.	All targeted states.	155,361	400,000
Number of children (by age and gender) provided with appropriate seating (desks, benches, and chairs).	All targeted states.	40,739	100,000
Number of teachers by gender who have been trained on core subjects and Education in Emergency (EiE) topics according to need including life skills, inclusive education and health and hygiene.	All targeted states.	820	4,000

**Sector Objective 3:** Strengthen the response capacity of education actors (PTA, headmasters, government officials and partners) to mitigate the impact of emergencies including natural disaster and conflict on education service delivery.

Indicator	Location	Baseline	Target
Number of education actors (PTA, headmasters, and government officials) by gender that have been trained on education and school management in emergencies.	All targeted states.	2,758	4,500
Number of education actors by gender collecting data, participating in assessments and contributing in education coordination in the field.	All targeted states.	75	100

PEOPLE IN NEED



PEOPLE TARGETED



REQUIREMENTS (US\$)



# OF PARTNERS



OBJECTIVE 1:

**1** To ensure timely shelter provision to newly displaced people in the location of gathering or camp.

OBJECTIVE 2

**2** To provide needs-based and timely emergency shelter and non-food items to people affected by conflict and disaster, returnees/integrated IDPs and vulnerable protracted IDPs.

OBJECTIVE 3

**3** To expand the provision of environmentally-friendly and locally acceptable transitional shelters using regionally produced materials with simultaneous capacity building.

EMERGENCY SHELTER/NON-FOOD ITEMS



Sector strategy continues to focus on saving lives and providing protection to affected populations with the timely provision of ES/NFIs through the NFI Common Pipeline and partner stocks, targeting some 700,000 people in 2016. This includes families displaced due to conflict; disaster (fire and flood) and returnee/reintegrated households. Since the NFI items are not intended for long-term use, 200,000 vulnerable protracted IDPs (people with specific needs or PSNs) will be targeted within this overall caseload for needs-based renewal NFIs. The sector will provide communal shelters to older people, pregnant and lactating women and children who are displaced from the harsh elements, while they await registration and verification. The sector will strengthen programmes which focus on provision of appropriate and durable environmentally friendly transitional shelters to communities of protracted IDPs and to returnees to stabilize the returns. Simultaneous training on alternate building techniques and technical guidance will contribute to building resilience of communities and increasing livelihood opportunities thereby consolidating durable solutions.

Sector coordination will be continued through regular meetings to ensure collaboration among all partners in the provision of ES/NFI and transitional shelters, including the sharing of technical knowledge and expertise. The identification of partners in priority areas is key to ensuring that geographic gaps are covered; whilst

mapping of existing partners avoids overlap in service provision.

Gender and protection mainstreaming are emphasized in all sector activities including assessments, distributions of NFIs and in the provision of environmentally friendly shelters, to ensure that the needs of all groups of beneficiaries are considered and met. Awareness of the impact of ES/NFI activities on the environment will be raised and mitigation measures reinforced. The sector will engage the beneficiaries in all stages of the humanitarian programme cycle, and establish open channels of communication for feedback, complaints and information sharing so that assistance is delivered while adhering to principles of neutrality, and 'do no harm,' so as to not jeopardize the safety of any beneficiary.

On site monitoring ensures equitable and fair distribution, whilst post distribution monitoring shortly after distributions ensures that the items have been distributed as planned, are of sufficient quality, are appropriate and have the desired impact on beneficiaries' ability to mitigate health threats and protect their families. The tracking of response activities to affected populations is published in monthly reports shared with partners, donors and other stakeholders and ascertains that beneficiaries are effectively supported while funding is used efficiently.

BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

	BY STATUS				BY SEX & AGE	
	Refugees	IDPs	Returnees	Vulnerable Residents	% female	% children, adult, elderly*
PEOPLE IN NEED	0.35M	1.09M	0.11M	-	50%	60   33   7%
PEOPLE TARGETED	0.35M	1.08M	0.1M	0.01M	50%	60   35   5%
FINANCIAL REQUIREMENTS	0.5M			29.4M		*Children (<18 years old), adult (18-59 years), elderly (>59 years)

**Sector Objective 1:** To ensure timely shelter provision to newly displaced people in the location of gathering or camp.

Indicator	Location	Baseline	Target
Number of communal shelters erected at camps or sites of gathering of newly displaced people for protection from the elements.	All targeted states.	n/a	30

**Sector Objective 2:** To provide needs-based and timely emergency shelter and non-food items to people affected by conflict and disaster, returnees/ integrated IDPs and vulnerable protracted IDPs.

Indicator	Location	Baseline	Target
Number of households newly displaced due to conflict or natural disaster receive emergency shelter and non-food items for protection from the elements to mitigate health threats (household heads disaggregated by gender).	All targeted states.	n/a	75,000
Number of returnee / integrated IDP households receive emergency shelter and non-food items for protection from the elements to mitigate health threats (household heads disaggregated by gender).	All targeted states.	n/a	25,000
Number of most vulnerable pre-existing IDP households (PSNs) receive renewal NFIs for protection from the elements to mitigate health threats (household heads disaggregated by gender).	All targeted states.	140,000	40,000

**Sector Objective 3:** To expand the provision of environmentally-friendly and locally acceptable transitional shelters using regionally produced materials with simultaneous capacity building.

Indicator	Location	Baseline	Target
Number of long-term IDP and returnee /integrated IDP households provided with suitable environmentally friendly transitional shelters (household heads disaggregated by gender).	All targeted states.	16,000	5,000
Number of long-term IDPs and returnees/integrated IDPs are trained on construction techniques including brick making (disaggregated by gender).	All targeted states.	n/a	10,000

## FOOD SECURITY & LIVELIHOODS



### PEOPLE IN NEED



### PEOPLE TARGETED



### REQUIREMENTS (US\$)



### # OF PARTNERS



### OBJECTIVE 1:

**1** Reduce food insecurity of vulnerable people affected by natural disasters and conflict (life-saving).

### OBJECTIVE 2

**2** Restore and sustain food and livelihood security of vulnerable households (IDPs, residents/host communities) in affected areas.

### OBJECTIVE 3

**3** Build resilience of food and livelihoods insecure population and reduce vulnerability to climate change-induced disaster risks.

The sector aims to reduce food insecurity, decrease malnutrition and strengthen livelihoods by improving the dignity and well-being of vulnerable men, women, boys and girls. This will be done by meeting immediate food needs; enhancing food availability and access; restoring and sustaining livelihoods; promoting climate change adaptation activities; building capacity of national partners; building resilience and reducing the risk of disasters to food security and livelihoods.

The sector aims to contribute towards achieving three of the four strategic objectives of the 2016 Sudan HRP; namely: “save lives of vulnerable people affected by conflict and disaster”; “reduce acute food insecurity and malnutrition below emergency levels across Sudan”; and “strengthen resilience and facilitate durable solutions”.

The first sector objective “reducing acute food insecurity and saving lives of vulnerable people affected by conflict and disasters” aims at ensuring provision of life-saving support to address critical vulnerabilities of most in need populations with a focus on newly displaced populations (in camps, gatherings and on host communities). Planned interventions include support services in food assistance, emergency agricultural inputs, livestock veterinary services, and emergency livelihoods trainings and start-up kits.

The second sector objective “restoring and improving food and livelihood security of households in affected areas of the country” covers a wide range of livelihood restoration and safeguarding interventions aimed at addressing needs of severely vulnerable people with a focus on relatively stable but protracted resident/settlement areas, including host communities and returnees. Planned interventions include FFAs, food production through agricultural inputs,

livestock support services, natural resource management, provision of on- and off-farm livelihoods diversification inputs and trainings. Reconstruction of livelihoods and asset building for affected populations will be emphasized, with special consideration of the differential impacts of disasters on women, men boys and girls.

The third FSL objective “building resilience of food and livelihoods insecure population and reducing vulnerability to climate change-induced disaster risks” focuses on strengthening multi-hazard early warning systems, improving data and information management and investing in Disaster Risk Reduction (DRR) at national, state and community levels. DRR and climate change adaptation programs will focus on the impact of El Niño in Sudan, building the resilience of communities and local institutions.

The FSL Sector will specifically target vulnerable populations such as IDPs and resident communities/returnees in South Central Areas (Kordofans, Abyei, Blue Nile and White Nile) as well as eastern Sudan and Darfur, taking into account the different needs of men, women, boys and girls. Capacity building of local institutions and national partners through trainings and experience exchange will constitute a major focus. Coordination at national and state levels will equally be strengthened, to ensure an effective and efficient humanitarian response.

Throughout the entire project cycle, Accountability to Affected Populations will be ensured by involving target communities, including through a continued dialogue with communities and feedback mechanisms. The sector will ensure mainstreaming of environment, protection and gender using appropriate tools, for example, gender sensitive indicators to monitor sector partners’ project implementation.

### BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

	BY STATUS				BY SEX & AGE	
	Refugees	IDPs	Returnees	Vulnerable Residents	% female	% children, adult, elderly*
PEOPLE IN NEED	0.35M	1.97M	0.11M	2.21M	51%	40   55   5%
PEOPLE TARGETED	0.35M	1.97M	0.11M	2.21M	51%	40   55   5%
FINANCIAL REQUIREMENTS	8.3M			313.2M		*Children (<18 years old), adult (18-59 years), elderly (>59 years)



**Sector Objective 1: Reduce food insecurity of vulnerable people affected by natural disasters and conflict (life-saving).**

Indicator	Location	Baseline	Target
Number of beneficiaries supported with General Food Distribution (GFD).	Abyei, Blue Nile, Darfur states, eastern Sudan, Kordofan states, White Nile	0	1,756,465 [individuals]
Number of households supported with agricultural inputs and services .	Abyei, Blue Nile, Darfur states, eastern Sudan, Kordofan states, White Nile	0	340,000 [HHs]
Number of households supported with veterinary and livestock inputs .	Abyei, Blue Nile, Darfur states, eastern Sudan, Kordofan states, White Nile	0	267,000 [HHs]
Number of capacity development programmes held and coordination and information management service products/documentation produced.	Abyei, Blue Nile, Darfur states, eastern Sudan, Kordofan states, White Nile	0	100 [Training programmes/products]

**Sector Objective 2: Restore and sustain food and livelihood security of vulnerable households (IDPs, residents/host communities) in affected areas.**

Indicator	Location	Baseline	Target
Number of people reached with FFA.	Abyei, Blue Nile, Darfur states, eastern Sudan, Kordofan states, White Nile	0	1,283,786 [individuals]
Number of households benefited from trainings and assisted with packages of agriculture and livestock based livelihoods start-up kits (e.g. restocking, agro-food processing, fisheries).	Abyei, Blue Nile, Darfur states, eastern Sudan, Kordofan states, White Nile	0	46,600 [HHs]
Number of households supported with livestock services (household heads disaggregated by gender).	Abyei, Blue Nile, Darfur states, eastern Sudan, Kordofan states, White Nile	0	50,000 [HHs]
Number of farmers engaged in seed multiplication (disaggregated by gender).	Abyei, Blue Nile, Darfur states, eastern Sudan, Kordofan states, White Nile	0	2,000 [Farmers]

**Sector Objective 3: Build resilience of food and livelihoods insecure population and reduce vulnerability to climate change-induced disaster risks.**

Indicator	Location	Baseline	Target
Number of Integrated Food Security Phase Classification Technical Working Group (IPC TWG) Supported.	Abyei, Blue Nile, Darfur states, eastern Sudan, Kordofan states, White Nile	7	18
Number of households received intermediate technologies in livestock, agriculture and natural resources through extension services to farmers and pastoralists.	Abyei, Blue Nile, Darfur states, eastern Sudan, Kordofan states, White Nile	0	10,000 [HHs]
No of tree seedlings produced, planted and survived.	Abyei, Blue Nile, Darfur states, eastern Sudan, Kordofan states, White Nile		2,000,000 [pcs of seedlings]
Number of women trained on, produced and utilising fuel efficient stoves (FES) and Safe Access to Firewood and alternative Energy (SAFE).	Abyei, Blue Nile, Darfur states, eastern Sudan, Kordofan states, White Nile		10,000 [individuals]

PEOPLE IN NEED



PEOPLE TARGETED



REQUIREMENTS (US\$)



# OF PARTNERS



OBJECTIVE 1:

**1** Provide primary health care services including referral services for vulnerable population affected by conflict and natural disasters.

OBJECTIVE 2

**2** Strengthen the capacities to prepare, detect and respond promptly to public health risk or events at federal, state and locality level.

OBJECTIVE 3

**3** Ensure Maternal and Child Health (MCH) services for the reduction of maternal and child morbidity and mortality among vulnerable populations.

HEALTH

Health needs remain high in Sudan where overstretched health systems struggle to meet the needs of various vulnerable groups including newly displaced and protracted IDPs; this situation is exacerbated by disease outbreaks and inadequate funding and capacities of the existing health system.

In 2016, the sector response will build on gains made during 2015 under the leadership of the Ministry of Health (MoH) and will be based on findings from a joint needs analysis, conducted in collaboration with partners. The sector strategy aims to improve access to essential health services for crisis-affected people. This will be achieved by improving primary healthcare services including maternal and child healthcare, ensuring adequate and equitable access to clinical and public health interventions and improving referral systems in high priority localities. In particular, the sector will support the delivery of a standardized primary healthcare package for women, men, boys and girls that includes outpatient consultations, free of charge/affordable medicine, immunizations and treatment of endemic and chronic diseases. These services will be provided through existing health facilities or where health units do not exist/are insufficient, through mobile clinics, particularly for newly displaced communities. The sector will target vulnerable IDPs (protracted and new) in camps and gatherings and vulnerable affected host

communities and returnees, with a special focus on women and children.

To ensure the provision of adequate health services and to strengthen the disease surveillance system, knowledge and skill development of male and female health staff will be prioritized. In particular, the capacity of the MoH and local partners in using an all hazards approach to emergency and disaster risk management will be developed. The sector will integrate community-based approaches in its health promotion and prevention efforts and a core pipeline of health supplies will be pre-positioned in hubs in order to ensure preparedness. Crosscutting themes such as gender, environment, Disaster Risk Reduction and HIV/AIDS will be mainstreamed into all health programming. In order to enhance monitoring and supervision of projects, standard monitoring tools, regular reporting, and feedback mechanisms will be employed.

National, state and locality level coordination, as well as inter-sector synergies will be key in 2016 in ensuring an effective and efficient health response. Complicated Severe Acute Malnutrition (SAM) cases and environmental health hazards (including El Niño) will be addressed in synergy with the Nutrition and WASH Sectors respectively, while the development and implementation of protracted displacement and malnutrition strategies will be supported.



BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

	BY STATUS				BY SEX & AGE	
	Refugees	IDPs	Returnees	Vulnerable Residents	% female	% children, adult, elderly*
PEOPLE IN NEED	0.35M	2.23M	0.11M	1.2M	49%	53   38   9%
PEOPLE TARGETED	0.35M	2.23M	0.07M	0.97M	51%	53   38   9%
FINANCIAL REQUIREMENTS	6.9M		59.1M		*Children (<18 years old), adult (18-59 years), elderly (>59 years)	

**Sector Objective 1: Provide primary health care services including referral services for vulnerable population affected by conflict and natural disasters.**

Indicator	Location	Baseline	Target
% of health facilities providing minimum basic package of primary health care services.	Abyei, Blue Nile, East Darfur, North Darfur, South Darfur, South Kordofan and West Darfur	31%	40%
Number of health workers trained (disaggregated by gender).	Abyei, Blue Nile, East Darfur, North Darfur, South Darfur, South Kordofan and West Darfur	0	2300
Number of outpatient consultations, sex and age disaggregated (SADD).	Abyei, Blue Nile, East Darfur, North Darfur, South Darfur, South Kordofan and West Darfur	0	3,400,000

**Sector Objective 2: Strengthen the capacities to prepare, detect and respond promptly to public health risk or events at federal, state and locality level.**

Indicator	Location	Baseline	Target
% completeness and timeliness of weekly surveillance reporting from sentinel sites.	Abyei, Blue Nile, East Darfur, North Darfur, South Darfur, South Kordofan and West Darfur	70%	85%
% of emergency events reported, investigated and response initiated to within 72 hours after reporting.	Abyei, Blue Nile, East Darfur, North Darfur, South Darfur, South Kordofan and West Darfur	80%	100%
Number of rapid response teams trained (disaggregated by gender).	Abyei, Blue Nile, East Darfur, North Darfur, South Darfur, South Kordofan and West Darfur	0	52

**Sector Objective 3: Ensure Maternal and Child Health (MCH) services for the reduction of maternal and child morbidity and mortality among vulnerable populations.**

Indicator	Location	Baseline	Target
% health facilities providing Integrated Management of Childhood Illness (IMCI) services.	Abyei, Blue Nile, East Darfur, North Darfur, South Darfur, South Kordofan and West Darfur	51 %	60%
% of birth assisted by skilled birth attendants (all female).	Abyei, Blue Nile, East Darfur, North Darfur, South Darfur, South Kordofan and West Darfur	65%	75%
Coverage of measles vaccine in children below one year of age.	Abyei, Blue Nile, East Darfur, North Darfur, South Darfur, South Kordofan and West Darfur	75%	85%

PEOPLE IN NEED



PEOPLE TARGETED



REQUIREMENTS (US\$)



# OF PARTNERS



OBJECTIVE 1:

**1** Provide humanitarian air services to support the response of the humanitarian community, filling identified gaps in logistics capacity.

OBJECTIVE 2

**2** Provide logistics and emergency telecommunication services and information to enhance coordination, predictability, timeliness and efficiency of the logistics response within the 2016 strategic response plan boundaries.

LOGISTICS & EMERGENCY  
TELECOMMUNICATIONS



Diverse political, security, environmental and socioeconomic factors contribute to a constrained humanitarian operating environment in Sudan, generating the need for well-facilitated and coordinated logistics solutions, encompassing common logistics services, logistics information management, geographical information systems and mapping, supply corridors, and cross-border procedures.

The LET Sector strives to strengthen inter-agency coordination to enhance the predictability, timeliness and efficiency of the logistics response. It identifies and addresses logistics gaps, bottlenecks and duplication of humanitarian operations to ensure an appropriate response within targeted localities defined by strategic objectives boundaries.

Sector activities are demand-driven and customized to meet the expressed requirements of the humanitarian community. The LET Sector provides services to organizations, based on a 'full cost recovery' model. When organisations need operational assistance such as provision of transport, or availability of warehouse space, WFP may enter into a Service Level Agreement (SLA) with the organization, after which services are provided at cost including a small percentage charge for overheads. It is anticipated that organisations will actively seek funding to undertake their own logistics planning and implementation, seeking LET support if and when challenges arise.

Within the scope of the LET Sector, UNHAS will provide air services to the humanitarian community in Sudan. This enables the transportation of humanitarian workers to field locations and in particular constitutes an efficient and safe transport option for humanitarian workers into areas where security is a challenge.

UNHAS provides evacuation and relocation services, improving the operational security environment for staff and assets. In addition, all logistics services facilitated by LET are subject to the WFP Greenhouse Gas (GHG) Emissions Reduction Strategy and to internal GHG monitoring systems, aligned to UN-wide policies and efforts.

In 2016, capacity development of the Humanitarian Aid Commission (HAC), in particular in the context of its Technical Cooperation Department, will be prioritized. This will be done through on the job training of selected HAC staff and support for strengthening logistics procedures.

The UN and partners' existing security telecommunications infrastructure in Sudan is part of LET's activities, and is covered by an existing inter-agency cost-sharing model. It lies outside of the emergency telecommunications (ETC) remit. However, ETC services will provide data and telecommunication services where there are identified issues with existing telecommunications infrastructure.

**Sector Objective 1:** Provide humanitarian air services to support the response of the humanitarian community, filling identified gaps in logistics capacity.

Indicator	Location	Baseline	Target
To provide and facilitate vital access to field and deep field locations to the humanitarian community through the provision of air transport.	All targeted states.	n/a	40,200
Transport light cargo such as medical supplies, high energy foods and information and communications technology equipment.	All targeted states.	n/a	180 MT
Provision of medical and/or security evacuation air transport services to all agencies with access to the services.	All targeted states.	100%	100%
Number of service requests duly submitted and processed for logistical services	All targeted states.	100%	100%

**Sector Objective 2:** Provide logistics and emergency telecommunication services and information to enhance coordination, predictability, timeliness and efficiency of the logistics response within the 2016 strategic response plan boundaries.

Indicator	Location	Baseline	Target
Number of HAC staff trained to enhance logistics capacity.	All targeted states.	n/a	20

PEOPLE IN NEED



PEOPLE TARGETED



REQUIREMENTS (US\$)



# OF PARTNERS



OBJECTIVE 1:

**1** Provision of quality lifesaving nutrition services for acutely malnourished children (boys and girls 6-59 months of age) and pregnant and lactating women (PLW) among highly vulnerable communities.

OBJECTIVE 2

**2** Improve equitable access to integrated program interventions for the prevention of under nutrition among affected communities.

OBJECTIVE 3

**3** Improve national capacity of the partners to ensure effective, efficient and coherent multi-sectoral response in emergency.

NUTRITION



The Nutrition Sector response strategy will focus on ensuring timely and comprehensive response to the lifesaving needs of children and pregnant and lactating women (PLW). The prevalence of malnutrition is often high in conflict-affected areas due to displacement related factors. High rates of malnutrition also exist in areas with heightened food insecurity and inadequate access to healthcare and to quality water and sanitation facilities. The sector estimates that 2.0 million children are acutely malnourished, of whom over 555,000 have SAM and the remainder have Moderate Acute Malnutrition (MAM).

In 2016 the sector, led by the Ministry of Health, and in cooperation with partners will focus on provision of lifesaving nutrition and preventive nutrition services through an integrated multi-sectoral approach for some 1.4 million vulnerable boys, girls (0-59 months) and PLWs. Key nutrition activities include active case finding; screening; referral of malnutrition cases; treatment of acute malnutrition; prevention of MAM among children 6-24 months; emergency blanket supplementary feeding for children under five and PLW in vulnerable communities; dissemination of Infant and Young Child Feeding (IYCF) promotion messages and provision of micronutrient supplements to children 6-59 months and PLW.

With regard to response to the impact of El Niño, which is anticipated to lead to an increased caseload of acute malnutrition as well as more life-threatening, severe and complicated cases, the provision of timely lifesaving interventions among affected populations will be prioritized. Assessments and programme monitoring will allow timely and effective decision-making, in order to facilitate an adequate nutrition response.

In line with the HRP strategy, a multi-sectoral approach will be used. Common service delivery platforms and multi-sectoral partnerships will be promoted in order to ensure geographical convergence and improved targeting of beneficiaries, enhancing efficiency and cost effectiveness. Building national capacity in preparedness and contingency planning will be key, including strengthening information management to ensure a predictable, timely and effective Nutrition in Emergency (NiE) response.

During all stages of planning and implementation, the sector will integrate cross-cutting issues, including environmental considerations and age and gender-sensitive programming. Community participation and Accountability to Affected Populations principles will be essential.

BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

	BY STATUS				BY SEX & AGE	
	Refugees	IDPs	Returnees	Vulnerable Residents	% female	% children, adult, elderly*
PEOPLE IN NEED	0.02M	0.17M	0.01M	1.86M	51%	100   0   0%
PEOPLE TARGETED	0	0.16M	0.01M	1.3M	51%	85   15   0%
FINANCIAL REQUIREMENTS	0			97.1M	*Children (<18 years old), adult (18-59 years), elderly (>59 years)	

**Sector Objective 1:** Provision of quality lifesaving nutrition services for acutely malnourished children (boys and girls 6-59 months of age) and PLW among highly vulnerable communities.

Indicator	Location	Baseline	Target
# of targeted acute undernourished girls, boys 6-59 month and PLW admitted to therapeutic and supplementary feeding programs.	All targeted states.	SAM: 167,178 SAM inpatient: 17,000 MAM: 144,727 PLWs: 33,474	SAM: 250,000 SAM inpatient: 25,000 MAM: 328,700 PLWs: 109,550
# of emergency-affected boys and girls 6-59 month and PLW admitted to special emergency Blanket Supplementary Feeding Programme (eBSFP).	All targeted states.	U5: 45,386 PLWs: 15,128	At least 80% At least 80%

**Sector Objective 2:** Improve equitable access to integrated program interventions for the prevention of under nutrition among affected communities.

Indicator	Location	Baseline	Target
# of boys and girls 6-59 months and PLW with acute malnutrition provided with micronutrient supplementation (Vitamin A / Iron and folic acid).	All targeted states.	U5: 0 PWs: 0	U5: 573,131 PWs: 160,150
# of mothers /caretakers of girls and boys 6-59 months who received IYCF counseling and attended awareness sessions.	All targeted states.	n/a	Male: 400,000 Female: 588,250
# of at risk malnourished girls, boys (6-23 months) and PLW admitted to MAM prevention program.	All targeted states.	U2: 82,302 PWs: 27,434	U2: 151,802 PWs: 50,600

**Sector Objective 3:** Improve national capacity of the partners to ensure effective, efficient and coherent multi-sectoral response in emergency.

Indicator	Location	Baseline	Target
# of health workers trained on NiE package.	All targeted states.	n/a	Male: 700 Female : 700
# of localities with multi-sectoral interventions to tackle malnutrition.	All targeted states.	Localities: n/a	Localities: 24

PEOPLE IN NEED



PEOPLE TARGETED



REQUIREMENTS (US\$)



# OF PARTNERS



OBJECTIVE 1:

**1** Respond to emergency humanitarian protection needs of vulnerable people, in particular women and children, among communities newly affected by conflict or disasters.

OBJECTIVE 2

**2** Prevent and mitigate protection risks in areas affected by conflict or disasters.

OBJECTIVE 3

**3** Enhance the protection capacity of governmental social protection institutions and humanitarian organisations.

PROTECTION

The Protection Sector and its subsectors (child protection, gender-based violence (GBV), mine action) will focus on vulnerable individuals affected by conflict, violence and natural disasters. Priority will be given to the following groups:

- Children at risk such as unaccompanied or separated children, children associated with armed forces and groups at risk of recruitment, child survivors of physical and sexual violence, child care givers and children in need of psycho-social assistance, children in conflict with the law and children affected by other grave violations. Children represent up to 60 per cent of the displaced population in Sudan, the proportion is even higher among newly displaced communities.

- Women at risk, such as single heads of households, GBV survivors, women in prison, pregnant and lactating women. Women and girls represent about 25 per cent and 30 per cent respectively of displaced populations in Sudan; these percentages may be higher in situations of new displacement. At least 38 per cent of displaced women and girls are heads of households.

- Other vulnerable people and those with special needs including people with disabilities, older people and people with serious medical conditions.

- Victims of Explosive Remnants of War (ERW) or landmines, and communities exposed to ERW or landmines. Over 300,000 people are exposed to ERW in Blue Nile and Kordofan states alone.

Timely and needs-based emergency protection activities targeting the most vulnerable people will include psychosocial counselling, case management and referral, family tracing, interim care and reunification for separated and unaccompanied children, assistance to landmine/ERW victims, and removal of mines or ERW. In

order to strengthen the sector’s rapid response capacity, child-friendly space and recreational materials as well as personal hygiene kits will be pre-positioned in key priority locations.

To reduce protection risks, the sector will: prioritize awareness-raising on specific risks (prevention of family separation, recruitment, GBV, mine risks), organize recreational and/or psycho-social activities for vulnerable women and children, conduct landmine and ERW clearance, advocate to end grave violations against children and provide necessary response for child victims. Advocacy for equal participation and access to services for vulnerable groups will also constitute focus areas of prevention.

In areas of displacement, support to essential social/legal protection mechanisms such as the Family and Child Protection Units, including mobile units, Councils for Child Welfare, Violence Against Women Units, National Mine Action Centres, and Ministry of Social Welfare will be particularly prioritized. They constitute the cornerstone of well-functioning referral systems and case management.

In order to reinforce the resilience of communities and strengthen capacity of selected social/legal institutions, community level structures will be supported, including child protection committees, women centres/safe spaces and mine action networks. Operating in a participatory manner, they serve to disseminate information on relevant services but also contribute to advocacy and as well as to the referral of protection cases.

In return areas, the Protection Sector will focus its efforts on supporting IDPs’ access to information and assessment, as well as on monitoring return conditions, in line with relevant standards. Additionally, where possible and appropriate, programmatic interventions will be extended to



BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

	BY STATUS				BY SEX & AGE	
	Refugees	IDPs	Returnees	Vulnerable Residents	% female	% children, adult, elderly*
PEOPLE IN NEED	0.7M	1.97M	0.05M	0.51M	55%	60   33   7%
PEOPLE TARGETED	0.7M	1.97M	0.05M	0.51M	55%	60   33   7%
FINANCIAL REQUIREMENTS	2M			45.2M	*Children (<18 years old), adult (18-59 years), elderly (>59 years)	



**Sector Objective 1: Respond to emergency humanitarian protection needs of vulnerable people, in particular women and children, among communities newly affected by conflict or disasters.**

Indicator	Location	Baseline	Target
Number of girls, boys, women and men receiving individual or community-based psychosocial support and services.	Abyei, Blue Nile, Central Darfur, East Darfur, Gedaref, Kassala, Khartoum, Kordofan States, North Darfur, Red Sea, South Darfur	General protection: 74,288 Child Protection: 306,868 GBV: 900 Mine Action (MA): 0 Total: 382,056	General protection: 140,000 Child Protection: 358,840 GBV: 1,000 MA: 1,285 Total: 501,125
Number of unaccompanied and separated children, as well as other children in need of protection (such as children survivors) who are identified, documented and provided with interim care or reunited.	Abyei, Blue Nile, Central Darfur, East Darfur, Gedaref, Kassala, Khartoum, Kordofan States, North Darfur, Red Sea, South Darfur	Total: 2,897	Total: 5,600
Number of square metres of landmine/ERW contaminated land cleared through mine action response.	Abyei, Blue Nile, Central Darfur, East Darfur, Gedaref, Kassala, Khartoum, Kordofan States, North Darfur, Red Sea, South Darfur	1,670,477 sqm	6,000,000 sqm

**Sector Objective 2: Prevent and mitigate protection risks in areas affected by conflict or disasters.**

Indicator	Location	Baseline	Target
Number of functional community-based protection networks/structures identified/created and/or supported (such as child protection committees, child friendly spaces, women centres/safe spaces, mine action committees), victims of grave violations identified and supported. Action Plan signed between the UN and the Government for the protection of children supported.	Abyei, Blue Nile, Central Darfur, East Darfur, Gedaref, Kassala, Khartoum, Kordofan States, North Darfur, Red Sea, South Darfur	General protection: 177 Child Protection: 720 GBV: 19 MA: 17 Total: 933	General protection: 120 Child Protection: 815 GBV: 22 MA: 150 Total: 1107
Number of extremely vulnerable women and girls of reproductive age provided with personal hygiene kits and sanitary items.	Abyei, Blue Nile, Central Darfur, East Darfur, Gedaref, Kassala, Khartoum, Kordofan States, North Darfur, Red Sea, South Darfur	66,300	85,000
Number of people reached through protection awareness-raising interventions (by age and gender).	Abyei, Blue Nile, Central Darfur, East Darfur, Gedaref, Kassala, Khartoum, Kordofan States, North Darfur, Red Sea, South Darfur	General protection: 152,130 Child Protection: 98,454 GBV: 25,000 MA: 217,713 Total: 493,297	General protection: 240,000 Child Protection: 201,880 GBV: 30,000 MA: 750,000 Total: 1,221,880

**Sector Objective 3: Enhance the protection capacity of governmental social protection institutions and humanitarian organisations.**

Indicator	Location	Baseline	Target
Number of individuals (by gender) among national/state protection institutions and humanitarian organisations supported through protection-related capacity building.	Abyei, Blue Nile, Central Darfur, East Darfur, Gedaref, Kassala, Khartoum, Kordofan States, North Darfur, Red Sea, South Darfur	General protection: 2,677 Child Protection: 2,450 GBV: 900 MA: 50 Total: 6,077	General protection: 4,000 people Child Protection: 4,500 GBV: 1,200 MA: 83 Total: 9,783
Number of protection-related reference documents/systems developed and disseminated among governmental social protection institutions and services, and humanitarian organisations (such as assessment forms, SOPs, minimum standards, information management systems).	Abyei, Central Darfur, East Darfur, North Darfur, South Darfur, North Darfur, South Darfur, Blue Nile, North Kordofan, West Kordofan	General protection: 8 Child Protection: 5 GBV: 6 MA: 0 Total: 19	General protection: 14 Child Protection: 6 GBV: 7 MA: 0 Total: 27

RECOVERY, RETURNS & REINTEGRATION



PEOPLE IN NEED



PEOPLE TARGETED



REQUIREMENTS (US\$)



# OF PARTNERS



OBJECTIVE 1:

**1** Increased engagement of IDP and returnee communities in timely and coordinated return and (re) integration interventions.

OBJECTIVE 2

**2** Improved economic self-reliance and social reintegration of IDP and returnee communities in areas of return and (re)integration using a multisector approach.

OBJECTIVE 3

**3** Foundations for Durable Solutions are built.

Spontaneous return has taken place in locations where conditions are conducive, however, return communities still face a lack of basic services, viable livelihoods and limited access to land and environmental assets to support sustainable return. It is expected that a significant number of IDPs will opt to remain in or near to the urban areas to which they were displaced. Continued marginalization of IDPs, without a durable solution, risks becoming an obstacle to long-term stability and to recovery, preventing vulnerable groups from becoming resilient to future shocks and stresses. An early recovery approach must be integrated into the response for a more holistic approach to assistance, integrating relief, rehabilitation and development.

To achieve this, the RRR Sector's integrated response framework in areas of return and (re) integration brings together humanitarian and development efforts and links strategic objectives under the HRP, Darfur Development Strategy (DDS) and United Nations Development Assistance Framework (UNDAF). The framework has six outputs and the response consists of three interlinked phases, which cover immediate needs as well as mid and long term elements necessary to allow people to return or to (re)integrate. The framework will be piloted in areas with critical needs while ensuring maximum impact and Value for Money. Prioritized return areas in order

of precedence according to available funding are Um Baru, Um Dukhun, Jebel Moon, Um Dafug, Yassin, Abu Jabaiha and El Tadamon. The development of the RRR integrated response framework for local integration will be initiated. The localities were selected based on the Durable Solutions Indicator from the Humanitarian Needs Overview, which triangulates the conditions of safety and security with access to basic services as well as livelihoods/markets.

With the aim of enhancing resilience through mobilization and support of community-led initiatives, development of community plans and sector-specific capacity building of sector members will be carried out to ensure response programmes are developed and implemented using a collaborative, people-centered approach. Protracted IDPs and returnee communities will be directly targeted and host communities, including nomadic groups, will indirectly benefit.

A gender-sensitive approach will be promoted, seeking to highlight the gender dimensions of impact on different vulnerable groups to illustrate distinct needs, risks, coping mechanisms and capacities as well as how the women and men in the community relate to each other. Prior to any response, a community environmental action plan, developed by the UN Environment Programme, will be created to ensure interventions are based

BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

	BY STATUS				BY SEX & AGE	
	Refugees	IDPs	Returnees	Vulnerable Residents	% female	% children, adult, elderly*
PEOPLE IN NEED	0.34M	1.94M	0.1M	-	55%	65   30   5%
PEOPLE TARGETED	0	0.23M	0.09M	-	40%	69   26   5%
FINANCIAL REQUIREMENTS	0		27.3M			

\*Children (<18 years old), adult (18-59 years), elderly (>59 years)

**Sector Objective 1: Increased engagement of IDP and returnee communities in timely and coordinated return and (re)integration interventions.**

Indicator	Location	Baseline	Target
Number of inclusive communities actively engaged in timely and coordinated return and (re)integration using a people-centered and integrated approach.	Prioritized localities: Darfur, Blue Nile, White Nile, Sennar and South Kordofan	0	5 return communities (of which 50% are women, girls and youth)
Regular distribution of information products (gender & age disaggregated) developed and shared by RRR Information Management Task Force (IMTF) to improve coordination and quality of response in areas of return and reintegration.	Prioritized localities: Darfur, Blue Nile, White Nile, Sennar and South Kordofan	Ad-hoc	Monthly

**Sector Objective 2: Improved economic self-reliance and social reintegration of IDP and returnee communities in areas of return and (re)integration using a multisector approach.**

Indicator	Location	Baseline	Target
Number and percentage of population (gender & age disaggregated) in areas of return and reintegration with improved and sustainable access to basic services and livelihoods through an integrated, multisector and community-led approach.	Prioritized localities: Darfur, South Kordofan and Blue Nile	0	5 areas of return and reintegration
Number of interventions (using multi-sector, gender/environment sensitive and people-centered approach) undertaken to improve economic self-reliance and social reintegration of conflict-affected communities in areas of return and (re)integration.	Prioritized localities: Darfur, South Kordofan and Blue Nile	0	5 areas of return and reintegration

**Sector Objective 3: Foundations for Durable Solutions are built.**

Indicator	Location	Baseline	Target
Number of areas with inclusive community based active recovery, reintegration and return programs.	Prioritized localities: relevant return and reintegration areas in Sudan	0	5 areas of return and reintegration
Number of community reconciliation efforts undertaken to promote a conducive environment for return and reintegration.	Prioritized localities: relevant return and reintegration areas in Sudan	0	10 return communities of which 50% are women, girls and youth consulted and reconciliation initiatives undertaken to promote conducive environment for return and reintegration

PEOPLE IN NEED



PEOPLE TARGETED



REQUIREMENTS (US\$)



# OF PARTNERS



OBJECTIVE 1:

**1** Provide and or sustain WASH services to 3,500,000 (1,029,000 boys; 1,071,000 girls; 1,925,000 women and 1,575,000 men) IDPs and underserved populations in Darfur, Kordofan, Blue Nile and eastern Sudan.

OBJECTIVE 2

**2** Support WASH needs for early recovery processes and durable solutions for 150,000 returnees (44,100 boys; 45,900 girls; 82,500 women and 67,500 men).

OBJECTIVE 3

**3** Strengthen disaster risk management and preparedness in Sudan for 500,000 (122,990 boys; 128,010 girls; 127,000 women and 122,000 men) affected people to anticipate and respond to critical WASH needs interventions through core pipeline as well as sector coordination and capacity building of communities.

WATER, SANITATION & HYGIENE



The IDP WASH response will focus on sustaining WASH services through cost reduction strategies and the employment of cost-sharing models. Vulnerability studies will be undertaken to identify particularly vulnerable persons in need of WASH assistance among protracted displaced communities and to develop and adapt local WASH tariff systems. The sector will support community-based efforts to maintain WASH services by installing low cost maintenance infrastructure and by providing capacity development. In addition to supporting protracted displaced communities, addressing the needs of newly displaced communities will be prioritized. A core pipeline of WASH supplies will be pre-positioned in hubs as per the Sector Emergency Preparedness and Response Plan. An emergency response in line with the Sudan Emergency Response Framework will be provided including 7.5 - 10 litres of water per person per day and a latrine per person ratio of below 50.

Immediate lifesaving emergency water provision will be ensured for El Niño-affected populations in Sudan, with multiplier effects including a reduction in disease outbreaks. Community sensitization initiatives will raise awareness of the need for water rationing, incorporating Communication for Development principles.

Vulnerable host communities in areas of displacement will also be targeted and WASH responses will contribute to nutrition interventions, especially in eastern Sudan where WASH service levels are low. This will be achieved by focusing on the eradication of open defecation, provision of safe water, promotion of safe water use and hand washing among caregivers at the

household level.

Community-based approaches will be used to enhance sustainability of projects and to induce social and behavioural changes. The sector will support WASH services in priority Education, Child Protection, Health and Nutrition facilities through extending water connections and providing technical support to design of WASH facilities.

In collaboration with RRR, the sector will support the government in promoting voluntary returns, including through a mapping of WASH resources in potential return areas, rehabilitation of WASH infrastructure and local capacity building. Where appropriate, cash and market-based programming will be promoted, based on Accountability to Affected Populations (AAP) principles.

The safety and dignity of affected communities, particularly women and children, is a priority. WASH facilities will be designed and located in order to ensure meaningful access which is adapted to local needs. Communal latrines will be gender segregated and clearly marked. AAP and community participation and empowerment will be emphasized. To minimise environmental impact and address climate change, the sector will reduce the use of fossil fuel in pumping water, monitor ground water, minimize wastewater, reduce the use of chemicals for vector control and work towards eradication of open defecation.

\*The number of people in need of WASH assistance in the 2016 HRP is higher than the number of people in need in the 2016 Humanitarian Needs Overview (HNO) due to the effects of El Niño.

BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

	BY STATUS				BY SEX & AGE	
	Refugees	IDPs	Returnees	Vulnerable Residents	% female	% children, adult, elderly*
PEOPLE IN NEED	0.35M	2.02M	0.11M	0.68M	55%	60   33   7%
PEOPLE TARGETED	0.35M	1.6M	0.15M	1.6M	55%	60   33   7%
FINANCIAL REQUIREMENTS	10M			68.5M		

\*Children (<18 years old), adult (18-59 years), elderly (>59 years)

**Sector Objective 1:** Provide and or sustain WASH services to 3,500,000 (1,029,000 boys; 1,071,000 girls; 1,925,000 women and 1,575,000 men) IDPs and underserved populations in Darfur, Kordofan, Blue Nile and eastern Sudan.

Indicator	Location	Baseline	Target
Number of people who have access to sufficient improved drinking water (between 7.5-10 litres per capita- 7.5 for new displacement and 10 for old caseload) (SADD).	Darfur, Kordofan, Blue Nile and eastern states	1,095,000	2,475,000
Number of people who have access to adequate sanitation (20-50 persons per latrine- 20 for old caseload and 50 for new displacement) (SADD).	Darfur, Kordofan, Blue Nile and eastern states	125,00	550,000
Number of people reached with hygiene messages and sensitization activities (SADD).	Darfur, Kordofan, Blue Nile and eastern states	1,600,000	3,350,000

**Sector Objective 2:** Support WASH needs for early recovery processes and durable solutions for 150,000 returnees (44,100 boys; 45,900 girls; 82,500 women and 67,500 men).

Indicator	Location	Baseline	Target
Number of people who have access to improved drinking water, at least 10 litres per capita (SADD).	Darfur, Kordofan, Blue Nile states	0	125,000
Number of people who have access to adequate sanitation (20 persons per latrine) (SADD).	Darfur, Kordofan, Blue Nile states	0	100,000
Number of people reached with hygiene messages and sensitization activities (SADD).	Darfur, Kordofan, Blue Nile states	0	150,000

**Sector Objective 3:** Strengthen disaster risk management and preparedness in Sudan for 500,000 (122,990 boys; 128,010 girls; 127,000 women and 122,000 men) affected people to anticipate and respond to critical WASH needs interventions through core pipeline as well as sector coordination and capacity building of communities.

Indicator	Location	Baseline	Target
Number of people reached through prepositioning and distribution of core pipe line items.	States affected by conflict and disaster	0	500,000
Number of people trained to support WASH service delivery.	Khartoum and states affected by conflict and disaster	0	1,000

PEOPLE IN NEED



PEOPLE TARGETED



REQUIREMENTS (US\$)



# OF PARTNERS



OBJECTIVE 1:

**1** Ensure equitable access of refugees, asylum seekers and refugee returnees to basic and essential services.

OBJECTIVE 2

**2** Ensure effective protection of refugees, asylum seekers, refugee returnees and those with undetermined nationality status, with particular attention to vulnerable groups including children, youth, women at risk, and survivors/victims of trafficking, kidnapping and gender-based violence.

OBJECTIVE 3

**3** Facilitate durable solutions including promoting self-reliance and livelihoods, resettlement and voluntary repatriation where possible.

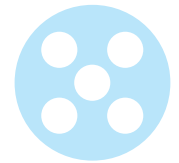
REFUGEE MULTI-SECTOR

Sudan is host to over 130,000 refugees and asylum seekers from nearby countries, namely Central African Republic, Chad, Eritrea, Ethiopia, Syria and Yemen, as well as over 220,000 South Sudanese who have arrived in Sudan following the outbreak of violence in South Sudan in December 2013. Refugees and asylum seekers reside in designated sites, host communities and urban areas mainly throughout eastern Sudan, Darfur, White Nile, Blue Nile, West and South Kordofan and Khartoum states. In addition, there are also an estimated 350,000 individuals of South Sudanese origin who remained in Sudan following the secession of South Sudan in 2011 that may have difficulties in proving their entitlement to Sudanese or South Sudanese nationality.

The refugee response in Sudan is led by the Government Commission of Refugees (COR) and UNHCR. The response strategy is coordinated through RMS, which covers all interventions for refugees and asylum seekers, refugee returnees and those with undetermined nationality. For 2016, the refugee response chapter aligns with the 2016 South Sudan Regional Refugee Response Plan and the 2016 Yemen Refugee and Migrant Response Plan.

Priorities of the Refugee Multi-Sector remain to provide humanitarian assistance and protection to refugees and asylum seekers, with particular

attention to the needs of vulnerable groups and new arrivals; and to facilitate durable solutions including through increased self-reliance and livelihood opportunities, resettlement and voluntary repatriation where possible. Specifically this includes: response for 42,000 mostly Eritrean and Ethiopian urban refugees in Khartoum; continued response to the South Sudan emergency including to the 105,000 new arrivals anticipated in 2016 White Nile State, East and South Darfur, South and West Kordofan and Khartoum; sustaining provision of basic services in camps and reception centres in eastern Sudan for the over 78,000 camp-based refugees and approximately 1,000 new arrivals each month; addressing kidnapping, smuggling and trafficking of persons in eastern Sudan and Khartoum; assisting the over 10,000 camp and settlement-based refugees in Darfur and supporting the spontaneous returns of Chadian refugees; increasing access to livelihood and education opportunities for urban and camp-based refugees and asylum seekers; strengthening child protection mechanisms and response to gender-based violence throughout the country; improving country-wide refugee status determination procedures and access to documentation; continued advocacy and assistance for those with undetermined nationality; and capacity-building for partners and relevant government counterparts.



BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

	PEOPLE IN NEED			PEOPLE TARGETED			\$\$
	Refugees	% female	% children, adult, elderly*	Refugees	% female	% children, adult, elderly*	
EDUCATION	0.12M	50%	100   0   0%	0.12M	50%	99   1   0%	\$6M
ES/NFI	0.35M	50%	60   33   7%	0.35M	50%	60   35   5%	\$0.5M
FSL	0.35M	54%	60   33   7%	0.35M	51%	40   55   5%	\$8.3M
HEALTH	0.35M	49%	53   38   9%	0.35M	51%	53   38   9%	\$6.9M
NUTRITION	0.02M	51%	100   0   0%	0.02M	51%	85   15   0%	0
PROTECTION	0.7M	55%	60   33   7%	0.7M	55%	60   33   7%	\$2M
WASH	0.35M	55%	60   33   7%	0.35M	55%	60   33   7%	\$10M
RMS	0.7M	54%	62   34   4%	0.7M	54%	62   34   4%	\$190.9M
TOTAL	0.7M			0.7M			\$225M

\*Children (<18 years old), adult (18-59 years), elderly (>59 years)

**Sector Objective 1: Ensure equitable access of refugees, asylum seekers and refugee returnees to basic and essential services.**

Indicator	Location	Baseline	Target
Number of gender sensitive health units providing primary health care services in sites.	All targeted states.	40	150
Percentage of asylum seekers, refugees, South Sudanese (disaggregated by gender) covered through the measles vaccination.	All targeted states.	70%	100%
Prevalence of GAM across sites.	All targeted states.	10%	6%
Average number of safely accessible water litres per person per day in sites for asylum seekers, refugees and South Sudanese.	All targeted states.	8	20
Average ratio of asylum seekers, refugees and South Sudanese (disaggregated by gender) per gender sensitive latrine.	All targeted states.	50	20
Number of asylum seekers, refugees and South Sudanese (disaggregated by gender) reached (training and monitoring) per hygiene promoter.	All targeted states.	600	1200
Number of refugees and South Sudanese boys and girls enrolled in safe and quality learning spaces at sites or surrounding communities.	All targeted states.	32,204	62,650
Number of asylum seekers, newly arrived refugees and South Sudanese females and males assisted with non-food items and/or emergency shelter.	All targeted states.	86,967	193,000
% percentage of households with poor Food Consumption Score.	All targeted states.	20-100 %	<5 %

**Sector Objective 2: Ensure effective protection of refugees, asylum seekers, refugee returnees and those with undetermined nationality status, with particular attention to vulnerable groups including children, youth, women at risk, and survivors/victims of trafficking, kidnapping and gender-based violence.**

Indicator	Location	Baseline	Target
Number of asylum seekers, refugees and South Sudanese registered on an individual basis.	All targeted states.	86,967	193,000
Extent to which persons with undetermined nationality are identified (disaggregated by gender).	All targeted states.	0	100%
Number of successful interventions in detention and border screening centre.	All targeted states.	3,220	5,000
Percentage of identified survivors trafficking/kidnapping (disaggregated by gender) receiving assistance.	All targeted states.	0	100%

**Sector Objective 3: Facilitate durable solutions including promoting self-reliance and livelihoods, resettlement and voluntary repatriation where possible.**

Indicator	Location	Baseline	Target
Number of asylum seekers, refugees, South Sudanese and refugee returnees (disaggregated by gender) who are able to participate in self-reliance activities.	All targeted states.	95,345	190,069
Number of host community households that benefit from host community targeted activities and refugee interventions.	All targeted states.	25,425	50,850
Number of individuals disaggregated by gender and age submitted for resettlement consideration.	All targeted states.	2,500	3,000
Number of spontaneous returns (disaggregated by gender) assisted.	All targeted states.	300,000	100,000







## PARTICIPATING ORGANISATIONS &amp; FUNDING REQUIREMENTS (US\$)

ORGANISATIONS	2016 FINANCIAL REQUIREMENTS	ORGANISATIONS	2016 FINANCIAL REQUIREMENTS	ORGANISATIONS	2016 FINANCIAL REQUIREMENTS
WFP	344,714,745	MC Scotland	3,424,362	World Relief	891,708
UNHCR	156,762,671	AORD	3,033,788	NADA	805,995
UNICEF	110,247,169	Plan	2,793,284	SORC	798,936
IOM	40,594,240	Almassar	2,535,145	RI	762,100
FAO	37,085,384	WVI	2,411,780	VSF (Germany)	720,324
UNHAS	27,182,493	UNDP	2,295,529	NCO	707,000
WHO	25,994,000	SIBRO	2,252,768	NIDO	705,000
SC	18,285,476	JASMAR	2,207,335	SWGU	700,000
WVS	17,916,114	PANCARE	1,987,275	SSDHA	684,611
ASSIST	17,094,419	GAH	1,975,000	NIDAA	636,000
UNFPA	14,397,912	EMERGENCY	1,790,000	UNDSS	600,014
OCHA	11,893,075	DWHH	1,750,000	SAG	542,693
UNMAS	6,664,288	DRC	1,715,135	GFO	522,000
CW	5,981,198	WCC	1,648,560	PBA	510,390
Plan Sudan	5,764,528	RODHA	1,385,582	COOPI	500,000
UPO	5,710,000	SHPDO	1,382,199	TOHD	485,708
TGH	4,869,711	IAS	1,297,453	AAR Japan	469,981
OXFAM America	4,700,000	Sudan RC	1,268,815	ARC	400,000
CIS	4,329,295	PA (formerly ITDG)	1,250,300	SICO	369,000
CRS	4,300,162	ACT/NCA	1,246,207	TACO	363,061
Labena	4,235,058	ACT/UMCOR	1,224,762	NOPVO	276,464
IMC UK	4,152,617	KPHF	1,010,602	SAO	260,000
IRW	4,099,995	SCF	1,010,000	AOSCD	258,493
GOAL	4,008,123	DDRA	999,500	PORD	255,000
SOLO	3,796,999	TOD	950,000	MOPD	203,000
FPDO	3,618,083	AMVO	941,813	RDN	124,849
ADRA	3,560,418	HAD	893,551		



# WHAT IF?

## ...WE FAIL TO RESPOND

### NUTRITION:



Lack of nutrition support to severely and moderately malnourished children will increase the risk of death and disease. About 40 per cent of the targeted acute malnourished children will not have access to treatment. The prevention of acute malnutrition work will be de-prioritized, triggering higher malnutrition rates, poor birth outcomes and an intergenerational cycle of malnutrition.

### HEALTH:



Failure to respond will have a devastating effect on the primary health care services for vulnerable people affected by conflict or disaster. Response to public health risks will be reduced; maternal and child morbidity and mortality will increase, as health systems would be unable to respond in a timely and efficient manner.

### EDUCATION:



If education assistance is not provided, Sudan's future will be in jeopardy. There are already 3 million children out of school in Sudan, and those in school face daily challenges such as limited facilities, poor infrastructure and staff shortages. Education is key to providing school children with stability, safety and opportunity.

### PROTECTION:



If we fail to provide protection assistance, more people will be affected by protection risks such as restricted access to safety, gender-based violence, exploitation and lack of legal documentation. The most vulnerable people, including refugees and asylum seekers, will face the greatest protection threats.

### WASH:



Inadequate health and WASH services can trigger a rapid deterioration in the health and nutritional status of vulnerable people, in addition to disease outbreaks. Consumption of unsafe drinking water, lack of basic hygiene services and the unsafe removal of excreta all directly impact the health and dignity of those most vulnerable, particularly children, women and older people.

### ES/NFI:



A lack of funding for emergency shelter would lead to the de-prioritisation of transitional shelter projects, and displaced families would be forced to live in substandard or even dangerous conditions. The lack of funding would also lead to the prioritization of short-term assistance over long-term durable solutions, perpetuating the cycle of dependency on humanitarian assistance. Channelling resources towards emergency, life-saving assistance for new arrivals hampers improvement of service delivery limits investment in self-reliance activities, and hinders the transition towards long-term sustainable solutions for refugees, asylum seekers and IDPs.

# GUIDE TO GIVING

## CONTRIBUTING TO THE HUMANITARIAN RESPONSE PLAN (HRP)



To see Sudan's Humanitarian Needs Overview, Humanitarian Response Plan and monitoring reports, and donate directly to organisations participating to the plan, please visit:

[www.humanitarianresponse.info/en/operations/sudan](http://www.humanitarianresponse.info/en/operations/sudan)

## DONATING THROUGH THE CENTRAL EMERGENCY RESPONSE FUND (CERF)



CERF provides rapid initial funding for life-saving actions at the onset of emergencies and for poorly funded, essential humanitarian operations in protracted crises. The OCHA-managed CERF receives contributions from various donors – mainly governments, but also private companies, foundations, charities and individuals – which are combined into a single fund. This is used for crises anywhere in the world. Find out more about CERF and how to donate by visiting the CERF website:

[www.unocha.org/cerf/our-donors/how-donate](http://www.unocha.org/cerf/our-donors/how-donate)

## DONATING THROUGH THE COUNTRY HUMANITARIAN FUND



The Sudan Humanitarian Fund (SHF) is a country-based pooled fund (CBPF). CBPFs are multi-donor humanitarian financing instruments established by the Emergency Relief Coordinator (ERC) and managed by OCHA at the country level under the leadership of the Humanitarian Coordinator (HC). Find out more about the CBPF by visiting the CBPF website:

[www.unocha.org/what-we-do/humanitarian-financing/country-based-pooled-funds](http://www.unocha.org/what-we-do/humanitarian-financing/country-based-pooled-funds)

For information on how to make a contribution, please contact:

[donateocha@un.org](mailto:donateocha@un.org)

## IN-KIND RELIEF AID

The United Nations urges donors to make cash rather than in-kind donations, for maximum speed and flexibility, and to ensure that the aid materials which are most needed are the ones delivered. If you can make only in-kind contributions in response to disasters and emergencies, please contact:

[logik@un.org](mailto:logik@un.org)



## REGISTERING AND RECOGNISING YOUR CONTRIBUTIONS



OCHA manages the Financial Tracking Service (FTS), which records all reported humanitarian contributions (cash, in-kind, multilateral and bilateral) to emergencies. Its purpose is to give credit and visibility to donors for their generosity and to show the total amount of funding and expose gaps in humanitarian plans. Please report yours to FTS, either by email to [fts@un.org](mailto:fts@un.org) or through the online contribution report form at <http://fts.unocha.org>

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

This document provides the Humanitarian Country Team's shared understanding of the crisis, including the most pressing humanitarian needs, and reflects its joint humanitarian response planning.

The designation employed and the presentation of material on this report do not imply the expression of any opinion whatsoever on the part of the Humanitarian Country Team and partners concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.



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