Sudan:

2020 Mid Year Report SOUTH SUDAN REGIONAL RRP

January - June 2020

820,687

SOUTH SUDANESE REFUGEES HOSTED IN SUDAN (30 JUNE 2020) US\$ 343.1 M

REQUIRED IN SUDAN IN 2020

38%

FUNDING RECEIVED (SEPT 2020)

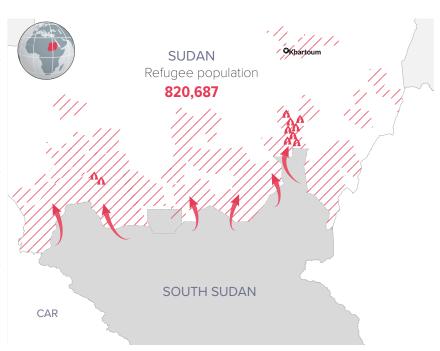
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RRP PARTNERS IN SUDAN IN 2020

SITUATION OVERVIEW

The South Sudanese refugee emergency remains the largest refugee crisis in Africa, and Sudan hosts one of the largest populations in the region. At the end of June 2020, Sudan was hosting 820,687 South Sudanese refugees. There were 1,089 new arrivals in the first half of 2020, a 40 per cent decrease compared to the same timeframe in the past year. Refugees are often living alongside host communities in remote and under-served areas with limited infrastructure and basic services.

After the change in government in in 2019 and the start of a democratic transition, Sudan remains politically volatile. Although peace negotiations are on-going in Juba, the security situation, especially at the Eastern and Southern border areas, as well as in Darfur, remains precarious with armed clashes and tribal conflict inside the country and instability in neighbouring countries. Furthermore, Sudan's economic downturn continued in 2020 with inflation reaching over 100 per cent in June 2020 coupled with severe fuel, bread and electricity shortages resulting in demonstrations and increasing pressure on the Transitional Government.



Refugees, like other population groups, have been severely affected by the COVID-19 pandemic since March facing an already weak national health system with shortages of qualified staff, equipment and medications. By the end of June, the Sudanese Ministry of Health recorded 9,258 identified COVID-19 cases. However, official figures of confirmed cases likely underestimate the extent of the pandemic due to low testing capacity. The onset of the COVID-19 crisis is exacerbating the existing economic crisis as well as under-resourced health services. Other refugee services, such as registration, were halted until preventive measures were introduced. Additionally, prolonged lockdown measures to slow the spread of the virus further reduced income opportunities. The Integrated Food Security Phase Classification (IPC) report for Sudan foresees increased food insecurity for the second half of 2020.

Despite the closure of all land borders after the onset of COVID-19, small numbers of refugees have continued to arrive and were quarantined in dedicated centers for 14 days, following Government policy.

Notwithstanding the additional COVID-19 related funding to mitigate the spread of the pandemic, as of 30 June the South Sudan Regional Response Plan was largely underfunded. While WASH and health activities have increased, a lot of gaps remain in the response to cover the most basic needs, including livelihood and energy initiatives, strengthened registration, as well as the provision of health services and nutrition.



163,051 asylum-seekers and refugees biometrically registered
9,191 children with specific needs received individual case management Identification of survivors of SGBV remains very low.

Funding for adequate registration facilities remains a challenge. Political instability and COVID-19 posed obstacles in increasing individual registration. Government estimates suggest that over 820,000 South Sudanese refugees reside in Sudan. Of those 57% are registered (53% individually, 4% HH) and assisted.

RRRP partners advocated with various actors to ensure that refugees are included in national response plans for COVID-19 and that the specific needs of certain groups of refugees, such as women and children were taken into consideration in the COVID-19 pandemic response plans. Field teams were provided with Protection Guidance Notes to address key protection risks faced by refugees in Sudan during the pandemic, including when offices faced restrictions for a direct access to refugees.

Case management and referral mechanisms were adapted to ensure that refugee children had access to protection services. Also, mechanisms to prevent and address family separation as a result of COVID-19 were set up.

Although child-friendly, age-appropriate information on COVID-19 was disseminated, some psychosocial aspects need to be reinforced, particularly as the restriction of movements, closing of schools and other preventive measures disrupted family dynamics, livelihoods, social gatherings, as well as personal, households' and communities' routines, which could negatively impact children's well-being, development and protection.

Registration activities in various parts of the country halted at the onset of COVID-19 and related restrictions. RRRP partners and the Commissioner for Refugees (COR) maintained some level of registration presence in various locations to ensure that caseloads that required an urgent protection response were addressed. Lack of proper registration centers remains a major challenge in many locations. Social distancing as well as other COVID-19 prevention requirements are expected to pose an additional strain to the already inadequate facilities.



South Sudanese refugees tested for COVID-19 by 30 June 2020



5

South Sudanese refugees **tested positive for COVID-19**, with 2 deaths reported



99%

of South Sudanese refugees and targetted host communities reached with COVID-19 related messaging



40

health centres supported or established for COVID-19 response, as well as **19 isolation centres & 7 quarantine centres**



63%

of health staff participated in **COVID-19 related trainings**



564

additional handwashing facilities established



5%

of South Sudanese refugee students reached with **remote learning** (e.g. radio lessons, study packs etc.)



57 per cent of refugee children enrolled in primary school.

Refugee children in Central and East Darfur successfully sat for their Grade 8 examinations before schools' closure due to COVID. In the other states, refugees will be supported to sit for these exams safely.

Most refugees do not have access to TVs, Radios, smart phones or other devices being used for distance learning as a result of COVID.

The first half of 2020 was extremely challenging in terms of education given the emergence of COVID-19 in Sudan. Schools closed in March 2020 and teaching and learning took alternative forms.

Efficient coordination between the Ministry of Education, both at federal and state levels, and RRRP partners ensured that distance learning materials were available in various platforms and devices. However, the extent to which refugees benefited from this was very limited given the lack of access to the devices required for this type of learning. The immediate action point in all states is to ensure that students can safely undertake the end of primary or secondary school examinations in July for the states where these exams have not taken place. There are ongoing efforts to ensure that refugees have the relevant devices in order to access the distance learning programs.

Regarding tertiary education, four refugee students under the Urban tertiary program graduated successfully. The other students undertaking tertiary programs have received continued support under a cash-based intervention program to support their studies.



Food

336,756 refugees residing in camps and out-of-camp settlements received in-kind food assistance on a monthly basis.

Partners successfully **revised protocols to reduce the risk of transmission of COVID-19** during food distributions.

Approximately 30 per cent of refugees were not provided with food assistance due to the funding gap and logistical challenges in reaching out to refugees who are in several out of camp settlements.

RRRP partners continued to provide food assistance targeting South Sudanese refugees during the first half of 2020. The food basket was comprised of 14.25 kg cereals (Sorghum, 1.8Kg pulses (lentils/beans) and 0.9 kg vegetable oil per person per month. About 70.6 per cent of the target population was assisted by the general food distribution (GFD).

In order to reduce the risk of transmission of COVID-19, partners adjusted food distribution protocols to ensure there was no crowding and to observe physical distancing during the distribution exercise. In addition, the prepositioning of food for two months took place ahead of possible lockdowns that would hamper timely food distributions. Partners conducted health education on prevention of COVID-19 and installed hand washing facilities at the distribution sites.

There were delays in food distribution in some locations as a result of fuel shortages and security issues experienced during the first half of the year.



Between January and June 2020, **313,785 medical consultations** were made including **16 per cent** for the host community

13,751 children under the age of 5 years were identified and treated for acute malnutrition
Global Acute Malnutrition coupled with anaemia (all above WHO threshhold) and other
micronutrient deficiencies remained the major gap due to funding shortages across all sectors in
most of the locations. Approximately 30 per cent of the refugees (mostly living in out of camp and
urban locations) do not have access to free primary health care services.

During the first half of 2020, primary health care services were provided to South Sudanese refugees and host communities, reaching a total of 313,785 consultations, of which 16 per cent were provided to host community members. The leading causes of morbidity were respiratory tract infection (26 per cent), malaria (10 per cent) and acute diarrhea (2 per cent). In addition, a total of 1,385 individuals provided with secondary and tertiary health care services. Moreover, 2,649 deliveries (representing 82 per cent) were conducted in the health facilities and assisted by a skilled health personnel.

RRRP partners continued to support Community Management of Acute Malnutrition (CMAM), which involved identification and treatment of malnourished children aged between 6 and 59 months reaching a total of 13,751 children.

Due to limited funding received for the refugee response, RRRP partners could not procure all the required medicines, medical supplies and equipment. This resulted in sub-optimal quality of services.

With the COVID-19 outbreak affecting all states in Sudan, RRRP partners put in place measures to control the spread of the infection, including health education among community members, enhanced disease surveillance systems, active case finding and contact tracing. RRRP partners also recruited additional staff and trained health care personnel on case management and infection prevention and control. To promote hand washing, a key measure in prevention of transmission of the disease, additional hand washing facilities were installed at strategic locations in the health facilities.

COVID-19 also led to some negative consequences in the regular provision of services, for instance, movement restrictions between states hindered the referral of medical cases from the camps to the capital city in Khartoum. For the nutrition response, the Standardized Expanded Nutrition Surveys (SENS) in White Nile and South Kordofan States were suspended. Distribution of nutrition products was also delayed in some locations as a result of fuel shortages during the same period.

Lastly, the lack of livelihood opportunities and the rising inflation as a result of the economic deterioration negatively affected refugees' access to health care in underserved out-of-camp and urban locations where there are no health facilities directly supported by humanitarian actors. Refugees oftentimes are asked to pay higher prices to access medical services than host communities. Refugees' access to health services in urban locations was further affected by the closure of health facilities as a result of COVID-19.



Livelihoods & Environment

715 refugees received vocational training, representing 0.3 per cent of those in need.

17,500 trees were planted by refugees and host communities, surrounding nine camps in White Nile and two camps in East Darfur.

Less than 10% of refugees received livelihood support and productive assets. Energy assistance reached 14 per cent of the targeted population and only 2 per cent of the total refugees in Sudan.

There is a pressing need for livelihood interventions supporting South Sudanese refugees in Sudan. Jobs and labour opportunities available for refugees remain limited and are affected by the economic hardship currently experienced in Sudan, with a sharp increase in food prices and essential items. Furthermore, the COVID-19 pandemic affected many households and small businesses, as many had to bargain their assets for food. South Sudanese refugees who traditionally engage in the seasonal agriculture sector have also been affected by fuel shortages, lockdown measures and security concerns in some of the remote agricultural areas.

RRRP partners in Sudan made significant efforts to include refugees in livelihood initiatives to try to increase their self-reliance and provide for their most basic needs. However, the COVID-19 pandemic seriously affected the implementation of those activities. With social distancing and movement restrictions due to partial or complete lockdown, many partners were unable to conduct vocational trainings and other life-skills trainings planned for South Sudanese refugees. Despite not being able to meet the mid-year targets, the sector is making efforts to increase implementation in the second half of the year.

Energy and environment-related activities were also affected by COVID-19. From March to June, lockdown and movement restrictions hampered the implementation of planned activities, such as the distribution of stoves and training of refugee women on green cooking fuel. The high inflation increased the anticipated costs of the implementation of activities, including higher prices of materials and rates for labourers, and posed an additional challenge for implementation. Moving forward, the sector will continue to advocate for the provision of cooking fuel for COVID-19 affected refugees and host communities, and will also emphasize the importance of the solarization of service sectors, mainly for health care and water pumping stations, due to the sustainability of solar systems and the high cost and scarcity of diesel fuel.



Shelter & NFIs

Approximately **45** per cent of South Sudanese refugees have sufficient NFI's.

Over **19** per cent of refugees targeted for shelter interventions received assistance

Only **4** per cent of new arrivals received NFIs. Permanent shelter structure for refugees remains a gap.

As of June, some 20,633 households received NFIs across the following eight states – Khartoum, North Darfur, South Darfur, East Darfur, West, North and South Kordofan and White Nile State, of which 1,287 households are new arrivals in White Nile State and newly accessed households in North Kordofan State. Some 12,174 households received replenishment of key NFI items across all operational states hosting South Sudanese refugees – especially flood preparedness plastic sheet distributions in key camp locations of White Nile and East Darfur States. Some 145 households from the host communities were also provided with NFIs. Key challenges in distributions for new arrivals and other households in need were related to NFI delivery, fuel shortages and countrywide lockdown since March 2020 semi-paralyzing movement between States. Nevertheless, distributions continued for those in need, while ensuring good practices in the COVID-19 context.

During the reporting period, an estimated 6,359 refugee' households were reached with emergency shelter assistance, mainly in White Nile State (1,972), South Darfur (294), East Darfur (3,963) and East Sudan (130). This included 855 new refugee households. In addition, 5,504 households received seasonal/emergency replenishments and/or repairs. Acute shelter camps remain in congested camps in refugee host States aforementioned, in addition to South Darfur, and the Kordofans States. Due to lack of funding, the construction of durable shelter for South Sudanese refugees could not take place.



WASH

A hafir has been upgraded **benefitting approximately 13,885 refugees** in Dar Batti settlement (South Kordofan State), **providing at least 12l/p/d up from the previous 6l/p/d.**

564 communal hand washing facilities were installed in various refugee camps/locations

benefitting over 300,000 refugees

75 per cent of refugee households have no access to latrines. 52 per cent of refugee households have not received sufficient soap for personal hygiene.

In South Kordofan State, one haffir (water harvesting basin) has been upgraded in El Leri locality (Dar Batti settlement) to provide safe drinking water to over 25,000 refugees and host communities, contributing to creating peaceful coexistence between the two. This has also resulted in a reduction of travel time to fetch water and reduction of protection risks, including sexual and gender-based violence. Although below the RRRP target of 20l/p/d, RRRP partners managed to consistently ensure at least 12l/p/d up from the previous 6l/p/d available before the intervention.

By the end of the reporting period, 72 per cent of refugee households still did not have access to household latrines. The majority continued practicing open defecation, while some had access to communal latrines in often unsanitary conditions. Some progress has been achieved in White Nile State where the percentage of families with household latrine (across camps) has improved from 13.3 to 39 per cent. The situation in other camps remains dire with 96 persons sharing a single latrine, far exceeding the standard of 20 persons per latrine. This has resulted in widespread open defecation practices.

COVID-19 has reinforced implementation of WASH programming, where interventions have up-scaled to tackle the pandemic. For instance, 564 communal hand washing facilities were installed in various refugee camps and locations benefiting over 300,000 refugees. In addition, 85 per cent of refugees and host communities have been reached with COVID-19 related messaging including good sanitation and hygiene practices. Due to early closure of schools, hand washing facilities and soap distribution earmarked for schools were shifted to public places and health facilities in response to COVID-19.

During the reporting period, soap distribution has been prioritized to ensure refugees have access to this basic commodity and are able to follow good hygiene practices. At least 2,125,192 pieces of soap were distributed, benefiting 263,632 refugees to promote personal hygiene. In addition, 1,200,000 pieces of soap were provided for inclusion in the 300,000-family food and hygiene baskets to supporting vulnerable households, including South Sudanese refugees in Khartoum "Open Areas". While the distribution is significant, in practice only 48 per cent of the refugee households received sufficient soap. Inconsistent soap distribution of at least 450g/p/m and an additional 250g p/m for women and girls of reproductive age undermines hygiene promotion efforts, with 52 per cent of refugee households not having received sufficient soap for personal hygiene, including women and girls of reproductive age.

Lack of menstrual hygiene management materials such as sanitary napkins may lead to greater risks of infection, discomfort and negative impacts on mental well-being, especially during COVID-19. This also undermines personal hygiene for women and girls who have a primary responsibility to prepare meals at household level and doing other household chores such as fetching water.

Good Practices and Innovative Approaches

RRRP partners upgraded an existing haffir in Dar Batti settlement, in El Leri locality, South Kordofan State, to serve the water needs of about 13,885 South Sudanese refugees (3,511 households). The original placement of the haffir, which was constructed in 2018, was based on technical specifications such as land demarcation and water catchment. However, after its construction two main issues were identified: the considerable distance to the refugee settlement leading to some protection concerns and the quality of the drinking water.

Like in many areas in Sudan and many other countries, the responsibility of fetching water for household consumption relies on women and children. When the water points are far from their houses, the women and children who normally bear the responsibility for fetching water, face exposure to different kind of risks. Some refugee women reported that they had to walk 3 or 4 km to access the water resources, unfortunately having no

other option, but to leave their children unattended at home until their return.

With the upgrading of the haffir, the establishment of a water treatment unit and 3.5 km delivery pipeline system connecting to three distribution points in the settlement area, the water supply to refugees has improved, as refugees can now access clean water within a few minutes from their houses. The average amount of water available per person is estimated at 12 l/p/d, a significant improvement to the previous average amount of 6-8 l/p/d. Overall, refugees expressed satisfaction with this intervention.

RRP PARTNERS

- Adventist Development and Relief Agency
- Al Manar Voluntary Organization
- American Refugee Committee
- CARE International
- Catholic Agency for Overseas Development
- Concern WorldWide
- Cooperazione Internazionale
- Food and Agriculture Organization
- · Global Aid Hand
- International Organization for Migration
- Islamic Relief Worldwide
- Mercy Corps
- Nada El-Azahar Organization
- Norwegian Church Aid

- Oxfam
- Plan International
- · Relief International
- Save the Children International
- UMORD
- United Nations Development Programme
- United Nations High Commissioner for Refugees
- United Nations Children's Fund
- United Nations Population Fund
- United Peace Organization
- Welthungerhilfe
- World Food Programme
- World Health Organization
- World Vision International

FOR MORE INFORMATION

 $\textbf{South Sudan Data Portal} - \underline{\text{https://data2.unhcr.org/en/situations/southsudan}}$

 $\textbf{Christopher Bender,} \ Inter \ Agency \ Coordination \ Officer, bender c@unhcr.org; \textbf{Carla Calvo Manosa}, Reporting \ Officer, calvoc@unhcr.org$

SUDAN:

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January - June 2020

| 53% | % of persons of concern registered on an individual basis |
|--------------|--|
| 1009 | % of identified SGBV survivors assisted with appropriate support |
| 37% | % of refugee children with specific needs who received individual |
| 71% | case management % of UASC in appropriate interim or long term alternative care |
| Not availabl | % of refugee children enrolled in ECD |
| 57% | % of refugee children enrolled in primary school |
| | % of refugee children enrolled in secondary school 6% |
| 42% | % of refugee children enrolled in national schooling systems |
| | % of refugees enrolled in tertiary education 0% |
| | % of refugee households who received fuel |
| | % refugee households with energy saving stove and equipment |
| Not availab | % of households fuel need met by distributions |
| 77% | % of refugees who benefitted from food assistance |
| 83% | % of refugee women who delivered with assistance from qualified personnel |
| Not availab | % PoC who received productive assets, training and /or business support in cash or kind % PoC employed/self employed |
| | % of refugee households living in emergency shelter <mark>5%</mark> |
| Not availab | % of refugee households living in semi-permanent shelter |
| | % of refugee households living in permanent shelter 😘 |
| | % of PoC households whose shelter was upgraded/repaired 5% |
| 45% | % of PoC households having adequate non-food items |
| 24% | % refugee households with household latrines |
| 29 | Litres of water received per person per day in 2019 |
| 49% | % of refugee households who received sufficient soap for hygiene |

FOR MORE INFORMATION

South Sudan Data Portal - https://data2.unhcr.org/en/situations/southsudan