

HIGHLIGHTS

- A violent raid by security personnel on the sit-in protest area in Khartoum on 3 June, resulted in 52 people killed and 784 injured, according to the Federal Ministry of Health (FMoH) and World Health Organization (WHO). The actual number of injured people may be higher as this number reflects information from hospitals.
- The United Nations Secretary-General urged the Sudanese authorities to facilitate an independent investigation of the deaths and to hold those responsible accountable.
- The UN and health sector partners provided emergency kits, medicines and supplies to seven hospitals in Khartoum, Bahri and Omdurman to ensure services at emergency wards of these hospitals for the treatment of wounded patients as of 3 June. These hospitals have been resupplied to cover emergency care for the next three days.

SITUATION OVERVIEW

On 3 June early morning, Sudanese security personnel raided the sit-in protest area in front of the military headquarters in Khartoum dispersing civilians with violence and use of excessive force. The Ministry of Health said that as of 6 June the death toll was 61 people, including 52 in the capital Khartoum and nine in other provinces. In Khartoum of 52 killed include 49 civilians killed by gunfire and three security personnel who died of stab wounds. According to WHO, seven hospitals that received emergency care supplies from WHO reported that 784 people were wounded in Khartoum. The actual number of people wounded could be higher as not all cases are reported or recorded.

The United Nations Secretary-General strongly condemned the violence and said was alarmed by reports that security forces have opened fire inside medical facilities.

In a [statement issued on 7 June](#), WHO expressed a grave concern about the recent impact of violence in Sudan on people in need, health workers and medical facilities. Incursions into hospitals in Khartoum have resulted in emergency services being shut down, the unwarranted transfer of patients, injuries to five medical staff and patients, and threats to others, WHO said. WHO called for an immediate cessation of all activities that put the lives of health staff and patients at risk and disrupt the delivery of essential health services.

There have also been reports of increasing cases of sexual and gender-based violence in the wake of the 3 June events, a stark contrast from the situation during the sit in. Supplies and service referral has been provided to the survivors, and guidance to the service providers.

On 7 June, a spokesperson for the UN High Commissioner for Human Rights [said](#) that OHCHR continues to be gravely concerned about the situation in Sudan. It has proposed the rapid deployment of a UN human rights monitoring team to examine allegations of human rights violations committed since 3 June 2019. OHCHR is seeking the cooperation of the Government of Sudan to be able to deploy such a mission – which would seek to engage with relevant Sudanese authorities, civil society organisations and others – at the earliest opportunity.

The Secretary-General urged the Sudanese authorities to facilitate an independent investigation of the deaths and to hold those responsible accountable.

Two major hospitals in Khartoum in the vicinity of the sit-in area and one large hospital in Omdurman stopped receiving wounded patients in their emergency rooms as medical staff were intimidated by security forces. Two



Map Sources: UNCS, SIM, Natural Earth.
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Final boundary between the Republic of Sudan and the Republic of South Sudan has not yet been determined. Final status of the Abyei area is not yet determined. Map created in Jan 2012.

of the hospitals resumed emergency room services within a day, the other hospital (in Khartoum) has not resumed emergency room services. WHO has supplied hospitals with health supplies to treat the wounded.

The widespread shortages of medicines and medical supplies that gradually aggravated over the past two years is affecting the delivery of services in public health facilities. In 2018, a significant decrease in the imports of essential medicines disrupted the supply chain and affected all levels - primary, secondary and tertiary health, including private sector hospitals and pharmacies. The Central Bank of Sudan (CBOS) newly released data for the first quarter of 2019 indicates that the imports of medicines during this period reduced by 11 per cent compared to the first quarter of 2018. In 2018, Sudan's imports of medicines decreased by 30 per cent compared to 2017, according to CBoS.

The shortages of reproductive health medicines and supplies, especially life-saving maternal health commodities, coupled with the limited access to health facilities by pregnant women, are affecting the timely deliver of emergency obstetric and neonatal care service at health facilities. In the absence of the timely response this might increase maternal mortality levels, currently estimated at 311 deaths per 100,000 live births. There is an immediate need to support health facilities with regular supplies of life-saving reproductive health (especially maternal health) supplies and medicines.

RESPONSE

Since 3 June health sector partners have been providing emergency care kits and necessary medicines and supplies, including saline infusions, surgical and dressing material, to seven hospitals in Khartoum and Omdurman to support services at emergency wards for the treatment of the wounded patients. Health partners have also prepositioned medicines and supplies for the next three days based on the current needs.

The Ministry of Health supported by WHO and health partners, is coordinating the response and ensuring that hospitals remain operational.

The UN Office for the Coordination of Humanitarian Affairs (OCHA) established on 7 June an emergency operation centre at its office in Khartoum to coordinate information sharing and response as a result of the current situation in Khartoum and other parts of the country. Daily meetings have kickstarted focusing on various aspects of response, logistics, liaison and planning.