HIGHLIGHTS (12 Dec 2019)

- In 2019 malaria breached the epidemic threshold accounting for 12.4 per cent of all diseases surveyed by health partners.

- Eastern Sudan has high humanitarian needs particularly in nutrition, health and protection.

- Cholera (344 cases), dengue (3,974 cases), rift valley fever (368 cases), and chikungunya (238 cases) reported across the country as of 11 December 2019.

- See the latest infographic showing who is doing what where (3W) in Kassala State.

Severity of needs in Sudan in 2020

KEY FIGURES

<table>
<thead>
<tr>
<th>People in need (2020)</th>
<th>Acutely Malnourished Children</th>
<th>Refugees</th>
<th>States with cholera outbreak</th>
</tr>
</thead>
<tbody>
<tr>
<td>9.3M</td>
<td>2.4M</td>
<td>1.1M</td>
<td>4</td>
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</tbody>
</table>

FUNDING (2019)

- Required: $1.1B
- Received: $593.9M
- Progress: 52%

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FEATURE (12 Dec 2019)

In 2019 malaria breached the epidemic threshold in Sudan

This year, malaria breached the epidemic threshold—when there is a sharp increase in malarial incidence rates among populations compared to previous years—accounting for 12.4 per cent of all diseases surveyed by the health sector (measles, dysentery, typhoid fever, acute watery diarrhoea, respiratory infections etc.) with a mortality rate of 13 per 10,000. This is a 30 per cent increase compared to the same period last year. Over 1.8 million cases of malaria were reported from across Sudan so far in 2019. Several states in Darfur region, White Nile, Khartoum and several other states are affected most. In November alone, about 250,000 cases of malaria were reported from Darfur, according to the Federal Ministry of Health (FMoH). This includes about 110,000 reported malaria cases in South Darfur, 103,000...
cases in North Darfur, and about 45,000 cases in East Darfur.

FMoH and WHO are leading country-wide comprehensive response to vector-borne disease outbreaks (malaria, dengue fever and chikungunya) covering 10 states, including five Darfur states. Malaria medicines have been distributed across all affected areas.

The rise in malaria cases is closely related to the floods in Sudan this year. The widespread presence of stagnant floodwaters offers breeding grounds for mosquitoes—which transmit the malaria parasite. These breeding grounds pose a further risk for other of vector borne diseases such as yellow fever and dengue. Government authorities and humanitarian partners have been actively mitigating the underlying causes of the disease including vector control and community awareness-raising. Meanwhile, while there are enough stocks of anti-malarial medicines at the national level, the availability of some malarial medicines, like Artemether + Lumefantrine, through the National Medical Supply Fund (NMSF) or through the National Health Insurance Fund (NHIF) was either low or not available in some states, but it was available in private sector. This was reported by the Essential Medicine, Availability and Affordability Survey in Sudan July 2019 FMoH/WHO.

According to the survey, medicine availability varied from 43 per cent at the National Medical Supply Fund (NMSF), 49 per cent at the National Health Insurance Fund (NHIF) and 59 per cent in private sector. The availability of medicines in 2019 was the lowest both in public and private sectors since 2012, according to the survey. According to the Central Bank of Sudan (CBoS) statistics, Sudan's imports of medicine dropped sharply in 2018 after the economic crisis started in the beginning of that year. During January-September 2018, the imports of medicines dropped by 35 per cent compared to the same period of 2017. The level of medicine imports in 2019 remains similar to 2018 and is 34 per cent lower compared to the same period of 2017. The lack of drugs, particularly at primary health clinics, are having a negative impact on treatments available in clinics. This is increasing the pressure on clinics and other health facilities run by NGO partners where medicines and treatment are more easily available.

FEATURE (12 Dec 2019)

Kassala: Life with hard choices

Eastern Sudan, a region that has not witnessed conflict, has high humanitarian needs particularly in nutrition, health and protection—mainly child protection and gender-based violence (GBV). Factors behind these needs include economic shocks and long standing under development, which are likely to increasing malnutrition rates in 2020.

Kassala State has the highest levels of food insecurity in eastern Sudan—El Gezira, Gedaref, Kassala, Red Sea, and Sennar states—with more than 400,000 people at crisis levels and 13 per cent of the rural communities have access to safe water. Outbreaks of communicable diseases such as dengue are proliferating. There are acute shortages of basic medicines and health services across the country.
In 2020, at least 9.3 million people in Sudan—nearly a quarter of the population—need humanitarian assistance, up from some 8.5 million in 2019. More people need help because of the economic crisis, which has driven up food prices. It has also disrupted essential services such as health care in all states in eastern Sudan, as well as urban centres such as Khartoum.

For more information on what is happening in Kassala State go to the exposure story Kassala, Sudan: Life with hard choices.

Ahmed Ali has four children being treated for malnourishment in small clinic funded by the Sudan Humanitarian Fund (SHF) in Kassala. Recurrent droughts in the region and the economic crisis are hampering his capacity to put food on the table for his family.

VISUAL (12 Dec 2019)

Who does what where in Kassala State (November 2019)
TRENDS (12 Dec 2019)

Trends in communicable diseases

Cases of diphtheria, dengue fever, rift valley fever, chikungunya and cholera continue to be reported across the country, according to the Sudan Federal Ministry of Health (FMoH).

As of 11 December 2019, FMoH reported:

- 72 cases of diphtheria (including 12 deaths)
- 3,974 dengue fever cases (11 deaths)
- 368 rift valley fever cases (11 deaths)
- 238 chikungunya cases (five deaths)
- 344 cholera cases (11 deaths)
The increase in these outbreaks can be linked to the recent floods in the country that have left large pools of stagnant water, which are breeding sites for various types of vectors. Government authorities and humanitarian partners are actively responding to these outbreaks across the country, providing health assistance, vaccinations were appropriate, and vector control interventions.

**FEATURE** (5 Dec 2019)

**IOM registers 14,500 IDPs and 111,500 returnees across the country in January-September 2019**

In the first three quarters of 2019, the International Organization for Migration (IOM) registered 14,500 IDPs and 111,500 returnees in six states in Sudan. The highest number of IDP registrations was in South Darfur (5,800 people) and the highest number of returnees registered was in North Darfur (44,500 people). Returns have been recorded in all Darfur states, most likely due to the improved security, cessation of hostilities and peace-building initiatives of the Government of Sudan and partners.

There are still concerns about services in return areas, which often lack even the most basic of services that can impact the sustainability of these returns. The Government with the assistance of partners will need to ensure that return locations have the necessary basic services, including, protection, water, sanitation, hygiene, health, nutrition and education.

IOM uses the displacement tracking matrix (DTM) system to track and monitor displacement and population movements. It is designed to regularly and systematically capture, process and disseminate information to provide a better understanding of the movements and evolving needs of displaced populations, whether on site or en route. It is comprised of four distinct components; namely, mobility tracking, registration, flow monitoring and surveying. Registration data is used for beneficiary selection, vulnerability targeting and programming.

The DTM methodology refers to the following definitions:

- IDPs are considered all Sudanese persons who have been forced or obliged to flee from their habitual residence since 2003 and subsequently sought safety in a different location.
Returnees are considered all Sudanese persons who were previously displaced from their habitual residence since 2003 and have now voluntarily returned to the location of their habitual residence—irrespective of whether they have returned to their former residence or to another shelter type.

Click here for the IOM Sudan DTM report, Quarter 1 (January – March) Click here for the IOM Sudan DTM report, Quarter 2 (April – June) Click here for the IOM Sudan DTM report, Quarter 3 (July – September)

FEATURE  (5 Dec 2019)

United Nations asks the world to invest $29 billion in humanity in 2020

On 4 December, the United Nations Global Humanitarian Overview (GHO) for 2020 was launched in Geneva with simultaneous launches in Berlin, Brussels, London and Washington, D.C. The GHO is the most comprehensive, authoritative and evidence-based assessment of world’s humanitarian needs.

In 2020, nearly 168 million people will need humanitarian assistance and protection. This represents one in about 45 people in the world and is the highest figure in decades. The United Nations and partner organizations aim to assist nearly 109 million of the most vulnerable people. This will require funding of US$29 billion.

In Sudan, 9.3 million people—nearly one in four—will need assistance in 2020, of whom 5 million are targeted to receive humanitarian assistance. The funding needed for these humanitarian interventions is $1.4 billion. A major factor driving humanitarian needs in Sudan is the economic crisis. High inflation rates—which stands at 58 per cent, and rising prices are diminishing people's ability to cope and contributing to worsening food insecurity. Years of economic stagnation and little investment in already weak public systems have deepened needs across the country including in the central and eastern regions of Sudan. Although initial reports indicate there was a relatively good harvest in 2019, it will not counteract the impact of price inflation. At least 17.7 million people (42 per cent of the population) suffer from some level of food insecurity. About 6.2 million people need food and livelihoods assistance. Malnutrition rates are high across the country – some 2.4 million children are acutely malnourished. For more information on global humanitarian needs in 2020, click here for the GHO document

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