SUDAN
Humanitarian Situation Report
December 2017

SITUATION IN NUMBERS

Highlights

- In addition to the response to the protracted humanitarian situation, caused by armed conflict, floods and epidemics, UNICEF responded in 2017 mainly to three new emergencies related to the high rates of malnutrition in newly accessible areas, the Acute Watery Diarrhoea outbreak and the high influx of South Sudanese refugees. Also, the year marked a huge step forward in protecting children from violations in armed conflict by implementing the Action Plan signed between UN and the government.

- In some of the newly accessible areas of Jebel Marra in Central Darfur, UNICEF led an integrated response namely a ‘Find & Treat’ campaign with four rounds to deliver a package of life-saving services. During the campaign, 183,346 children were screened and 3,619 children were identified as suffering from Severe Acute Malnutrition (SAM). All identified malnourished children were admitted for treatment.

- Together with the Federal and State Ministries of Health, WHO and other partners, UNICEF deployed integrated interventions. UNICEF supported 309 oral rehydration treatment corners (ORTCs) in total that served around 46,350 people to date, as well as WASH interventions that reached two million people (including around one million children) on monthly average across all states of Sudan.

UNICEF’s Response with Partners

<table>
<thead>
<tr>
<th></th>
<th>UNICEF</th>
<th>Sector/Cluster</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Target</td>
<td>Cumulative results (#)</td>
</tr>
<tr>
<td># boys and girls receiving psycho-social support</td>
<td>157,397</td>
<td>114,616 (girls: 88,026)</td>
</tr>
<tr>
<td># of children who have received education in emergency supplies and recreational materials</td>
<td>345,000</td>
<td>253,716 (girls: 122,237)</td>
</tr>
<tr>
<td># of boys and girls under 1 year of age receiving first dose of measles vaccine</td>
<td>483,001</td>
<td>518,840</td>
</tr>
<tr>
<td># of children 6-59 months affected by Severe Acute Malnutrition admitted to treatment</td>
<td>250,000</td>
<td>202,227</td>
</tr>
<tr>
<td># of affected people with access to improved drinking water</td>
<td>290,000</td>
<td>329,760*</td>
</tr>
</tbody>
</table>

UNICEF Appeal 2017
US$ 96.54 million

Funding gap: $49.14M

2,300,000 children in need
4,800,000 people
# of people who need Humanitarian Assistance
(Source: Sudan Humanitarian Needs Overview 2017)

1,100,000 children
2,300,000 people
# of internally displaced people
(Source: Sudan Humanitarian Needs Overview 2017)

126,987 children
192,404 people
# of South Sudanese refugees since January 2017
(Source: ‘Sudan: Refugees from South Sudan as of 15 December 2017’ reported by UNHCR. Around 66% of South Sudanese refugees are children)

The number of children among South Sudanese Refugee children was calculated based on a statistic from ‘Sudan: Refugees from South Sudan as of 15 December 2017’ issued by UNHCR that show the rate of South Sudanese refugee children under 18 is 66%.

* The funding allocation was enough for new access to improved drinking water, while there is still a funding gap in responding to other outputs such as rehabilitation of water sources and WASH in schools.

The HAC is aligned with the HRP to meet the humanitarian needs of the most vulnerable children in 2017.
Situation Overview and Humanitarian Needs

In addition to the protracted humanitarian situation, caused by armed conflict, floods and epidemics, UNICEF responded in 2017 mainly to three new emergencies related to the high rates of malnutrition in newly accessible areas, the Acute Watery Diarrhoea (AWD) outbreak and the high influx of South Sudanese refugees.

Malnutrition in newly accessible areas

This year, due to the improvement of the security situation in the Darfur, South and West Kordofan and Blue Nile states, humanitarian organizations were able to reach conflict affected people with dire needs in previously inaccessible areas. In some of the newly accessible areas of Jebel Marra in Central Darfur, immediate interventions including Child Protection, Education, Health, Nutrition, Food security as well as Water, Sanitation and Hygiene services were required for approximately 200,000 displaced or newly returned people, including an estimated 120,000 children due to the assessments conducted in March. Inter-agency assessments at other newly accessible areas in East Jebel Marra locality (South Darfur) and Blue Nile states continue discovering more people with dire needs.

Acute Watery Diarrhoea

An outbreak of Acute Watery Diarrhoea (AWD) that started in August 2016, re-surged throughout 2017 with over 36,000 suspected cases and an average of 30 fatalities per week during the peak at end of June across 143 localities in all 18 states of Sudan. AWD cases in the hardest hit White Nile State reached 8,824 cases, while the cases are contained more than 9 weeks. White Nile states has a low coverage with improved water sources i.e. 33 per cent and sanitation facilities i.e. 39 per cent which consider as some of the main catalysts of AWD outbreak. The overall number of AWD weekly cases remains low since October, yet new suspected cases were observed in Red Sea State during December.

Influx of South Sudanese refugees

From January to mid-December 2017, 192,404 South Sudanese refugees arrived in Sudan, including approximately 126,987 children (66 per cent). It is estimated that there are a total of 795,353 South Sudanese refugees in Sudan. UNICEF has been supporting South Sudanese refugees, especially women and children, in camps and also in out-of-camp settlements mainly in White Nile, East Darfur, South Darfur, West Kordofan and South Kordofan states which host the vast majority of the refugees. Important needs for child protection, education, health, nutrition, and WASH services are recognized in out-of-camp refugee settlements that host 79 per cent of the South Sudanese refugee population in Sudan. In East Darfur, an interagency assessment in out-of-camp settlement areas of South Sudanese refugees conducted through end of September to beginning of October, identified only 93 refugee children (40 girls and 53 boys) enrolled in schools in the urban settlements in Adilla and Abukarinka where approximately 10,000 refugee school age children are estimated to exist in the assessed four localities. In addition, more than 3,000 South Sudanese children have been identified and documented as separated and unaccompanied children during 2017. The conflicts in South Sudan result in large numbers of children separated from their families and caregivers.

People with Humanitarian Needs in Sudan

(Estimates calculated based on Sudan Humanitarian Needs Overview 2017)

<table>
<thead>
<tr>
<th>People with Humanitarian Needs</th>
<th>January 2017</th>
<th>Total</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Affected Population</td>
<td></td>
<td>4.8 million</td>
<td>2.4 million</td>
<td>2.4 million</td>
</tr>
<tr>
<td>Refugees</td>
<td></td>
<td>0.8 million</td>
<td>65% children (0.5 million)</td>
<td></td>
</tr>
<tr>
<td>IDPs</td>
<td></td>
<td>2.3 million</td>
<td>48% children (1.1 million)</td>
<td></td>
</tr>
<tr>
<td>Returnees</td>
<td></td>
<td>0.2 million</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Residents</td>
<td></td>
<td>1.5 million</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

6 Ministry of Cabinet, Central Bureau of Statistics, SUDAN Multiple Indicator Cluster Survey 2014
7 Sudan: Refugees from South Sudan as of 15 December 2017 issued by UNHCR
8 According to the Assessment, in El Ferdous 6,075, in Abu Jabra 5,981, in Abu Karinka 9,030 and Adila 7,237 POCs are residing. Around 66% are estimated as children under 18.
9 Sudan Humanitarian Needs Overview 2017
10 Sudan Humanitarian Needs Overview 2017
11 estimated number of vulnerable residents calculated by using number of food insecure people in Sudan, which is based on data from IPC, FSTS, WFP VAM, FAO, FEWSNET and other sources.
Humanitarian Leadership and Coordination

Malnutrition in newly accessible areas

In some of the newly accessible areas of Jebel Marra in Central Darfur, UNICEF led an integrated response namely a ‘Find & Treat’ campaign with four rounds to deliver a package of life-saving services i.e. much needed water, sanitation, health, nutrition, protection and food security interventions. During the campaign, 183,346 children were screened and 3,619 children were identified as suffering from Severe Acute Malnutrition (SAM). All identified, malnourished children were admitted for treatment. UNICEF plans to expand the provision of integrated lifesaving interventions in newly accessible areas by scaling up the current integrated response also in East Jebel Marra, South Darfur, and Blue Nile State.

Acute Watery Diarrhoea

Together with the Federal and State Ministries of Health (MoH), WHO and other partners, UNICEF deployed integrated interventions. The key interventions were UNICEF’s support to 309 oral rehydration treatment corners (ORTCs) in total that served around 46,350 people to date, as well as water interventions and hygiene promotion campaigns that reached two million people (including around one million children) on monthly average across all states of Sudan. Through the response, several good practices emerged, such as cost sharing with the private sector for installing water tanks in White Nile State. Also, proactive investments on preventative activities were made in some potential high risk areas such as some communities in Kassala and Shangil Tobaya in North Darfur. Throughout 2017, these areas observed no or small numbers of AWD cases. UNICEF continues to verify the relation of the activities and their contribution to the prevention with scientific proof, and will effectively use this evidence to influence the programmes in 2018. UNICEF and partners’ main focus continued being on prevention of AWD through identifying potential hot-spots at risk and then planning for an integrated response i.e. behavioural change engagement, increased access to improved water resources, improved access to primary health care services and nutritional programmes, as well as strengthening the capacity development of partners and service providers at the hot-spot localities. This approach can also effectively contribute to reducing the morbidity related to other epidemics such as dengue fever for which a total of 137 suspected cases, including three deaths, were reported from eight states during the period of 2 October to 8 December 2017.

Influx of South Sudanese refugees

AWD in refugee camps has been well controlled, contributed by proactive oral cholera vaccination (OCV) campaigns and the instalment of improved water sources. UNICEF is working with partners on screening and treatment of severely malnourished children in-camp and out-of-camp. So far, more than 240,000 refugee children were screened in White Nile, East Darfur, West Kordofan and South Kordofan. Over 3,300 children were identified as severe acute malnutrition (SAM) and all of them were admitted for appropriate treatments. In addition, UNICEF and partners have responded to conflict affected 2,963 unaccompanied and separated refugee children from South Sudan through family tracing and reunification efforts which was an unexpected level of needs to be supported. To provide safe learning environments immediately and provide an opportunity for these children to develop their full potential, UNICEF established an education-lead integrated response plan for the out of camp refugee children living in out of camp settles in East Darfur. To address this dire situation in 2018, UNICEF will scale up its education support to respond to the low number of South Sudanese refugee children enrolled in school. UNICEF will use the educational support as an entry point to promote inclusivity and cohesion among the refugees and the host communities. However, there are a challenge in securing enough resource to cover the needs. Also, in White Nile State, UNICEF is currently leading an interagency multisector needs assessment among South Sudanese refugees living outside the refugee camps to identify vulnerabilities for the purpose of scaling up of the Community-Based Management of Acute Malnutrition (CMAM) approach in order to prevent malnutrition as well as other life-saving and protection services.

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10 These achievements have been provided with improved purified drinking water through disinfection of urban and rural water sources, and hygiene promotion campaigns through household visits and environmental cleaning campaigns.
11 UNOCHA, Humanitarian Bulletin Sudan Issue 27 | 4 - 17 December 2017
The year marked a huge step forward in protecting children from violations in armed conflict by implementing the Action Plan signed between UN and the government. The Action Plan for the Protection of Children from Violations in Armed Conflict signed between the UN and the Government of Sudan was implemented effectively through the year. The UN and the Government of Sudan concluded monitoring and verification missions to military barracks in all conflict affected states and received command orders from all security forces prohibiting recruitment and use of children. Also, the trainings of 1,280 security personnel were conducted in conflict affected states in Darfur, as well as in the Two Areas,

Approach for New Way of Working

The UNICEF-led Education, Nutrition, and WASH sectors and the Child Protection sub-sector have been working with the United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA) in prioritization of localities, targeted population and main interventions for the 2018 Sudan Humanitarian Fund (SHF) allocations, in line with the exercise done in November to identify and prioritize humanitarian hot-spots that potentially have a high likelihood of being affected by emergencies. This creates a foundation for integrated interventions with a focus on the most vulnerable people in at-risk-areas, especially women and children, which also will become a basement to promote the work on the Humanitarian, Development and Peace nexus.

Humanitarian Strategy

The UNICEF Sudan humanitarian strategy is targeting 4.06 million people for assistance including 1.95 million children. UNICEF has adopted an integrated approach to programme delivery and has prioritised assistance based on vulnerability criteria, rather than the status of people (internally displaced people, refugees, returnees and host communities). UNICEF continues to accord humanitarian assistance top priority while strengthening programmes for advancing durable solutions and results in a cost-effective manner. UNICEF's humanitarian interventions are in line with humanitarian principles with continued advocacy for improvement of the access to the conflict affected areas of Blue Nile, Nuba Mountains and some parts of Jebel Marra in Darfur.

Summary Analysis of Programme Response

Child Protection

Overall in 2017, 114,616 children received psychosocial support (PSS) that fulfilled around 73 per cent of the target. Also, UNICEF provided support to 5,341 unaccompanied and separated children (UASC). This achievement was made by the efforts responding to the need emerged from unexpected level of South Sudanese refugee children influx to Sudan during the year. In addition, UNICEF and partners have supported 2,963 unaccompanied and separated refugee children from South Sudan through family tracing and reunification (FTR) efforts. Children cross the border alone mainly caused by conflict to search for a secured environment. This makes the tracing of families of separated and unaccompanied South Sudanese children challenging to identify their family. One of the good practices is the deployment of trained social workers on FTR in the borders entry points between Sudan and South Sudan to ensure that separated and unaccompanied children form South Sudan are immediately identified at the borders, documented and their movement is monitored as well as receiving the needed PSS support. UNICEF is strengthening the community based approach for responding to the children affected by several violations and the coordination between the UNICEF Sudan and South Sudan offices to increases the efficiency of reunification efforts.

In December, UNICEF continued to provide protection services to refugees and internally displaced children with psychosocial support being provided through child friendly spaces, mobile teams and direct home visits. UNICEF supported

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12 South Kordofan, Blue Nile and part of West Kordofan state, where experienced decades of armed conflict.
82,223 children (40,160 girls and 42,063 boys). The caseload includes an additional 9,589 children (4,528 boys, 5,061 girls) that have started to receive support in December only. In addition, a total of 708 UASC (317 girls and 391 boys) were identified during the month; 470 UASC (258 boys and 212 girls) were unified with their families and 238 children were placed in family-based alternative care. The improvement of the reunification rate, from 1.7% in November to 50.6% in December, is mainly due to the efforts exerted by the Community Based Child Protection Networks (CBCPNs) and improved family tracing and reunification (FTR) information management system by implementing the revised National Standard Operating Procedures guidelines. A total of 473 children out of the 708 are South Sudanese refugees.

Education

There are an estimated 3.1 million out-of-school children (1.6 million girls and 1.5 million boys) in Sudan, constituting one of the largest numbers in the Middle-East and North Africa region. Gender inequalities and low enrolment rate persist, particularly in rural areas, conflict affected areas and among nomadic communities. Sudan also hosts around 170,000 South Sudan refugee school age children.

UNICEF continues to provide children access to safe learning spaces because education is an entry point to promote inclusivity and cohesion among internally displaced children, refugees and host communities. It is also vital for children’s psychosocial wellbeing. UNICEF is focusing on improvement of enrolment rate by targeting 50,000 South Sudanese Refugee children and increasing access to education for targeting 200,000 internally displaced children and returnees in the newly accessible Jebel Marra region in Darfur and the new accessible areas in South Kordofan and Blue Nile states. Strengthened advocacy and fundraising are needed to scale up the educational service in emergency situations as a critical life-saving response in support of conflict-affected children.

Cumulatively in 2017, UNICEF and partners supported 252,716 emergency affected school-aged children to access quality basic education through the provision of essential teaching, learning and children’s recreational materials reaching around 73 per cent of the target. A total of 26,051 of school-aged boys and girls accessed safe learning spaces with UNICEF’s support through the construction and rehabilitation of safe learning spaces that reached only 17 per cent of the annual target. The underachievement on the target was mainly due to the lack of funding.

In December, UNICEF and partners have provided access to safe learning spaces to 3,640 out of school emergency affected children (1,680 girls and 1,960 boys) in Blue Nile and Central Darfur. Also, UNICEF and partners have provided educational support through the provision of essential education supplies to 24,630 out-of-school children (12,437 girls and 12,193 boys) in emergency situations in Blue Nile, West Kordofan and South Kordofan.

Child Survival and Development (CSD) Programme Component

Health

Overall in 2017, 518,840 children under 1 year of age receiving first dose of measles vaccine. This achievement, exceeding the initial target, was made by the efforts responding to the emerging needs from unexpected level of South Sudanese refugee children influx to Sudan where 12,514 additional refugee children were vaccinated. In order to respond to the needs emerging from the AWD outbreak, UNICEF reached a total of 2,350,000 people with Primary Health Care (PHC) services in 2017. UNICEF prioritized the support for life saving and prevention from AWD. In response to the outbreak, UNICEF supported provision of case management to a total of 46,350 people through operating 309 oral rehydration treatment corners (ORTCs) in remote health facilities in 16 of the affected states.

In December, UNICEF continued supporting the delivery of integrated Primary Health Care (PHC) services to the vulnerable people in North, Central and West Jebel Marra localities in Central Darfur. Six mobile clinics were operated through which antenatal care was provided to a total of 371 pregnant women; 114 children under the age of one year received measles vaccinations, and 3,633 children under the age of five received medical consultations and treatment.

In North Darfur, UNICEF provided continuous PHC support to a total of 11,470 people, including 5,162 children under the

There are an estimated 3.1 million out-of-school children in Sudan, constituting one of the largest numbers in the Middle-East and North Africa region.
age of five, through outpatient services targeting the most vulnerable people in Tawila, Zamzam, Shangil Tobaya and Sortony. The support was implemented in collaboration with the national health partners. Furthermore, UNICEF supported distribution of 9,000 long-lasting insecticide-treated nets (LLITNs) to emergency affected populations in Allait locality and Sortony covering a total of 19,358 internally displaced persons and South Sudanese refugees. To strengthen the provision of quality child health services to the returnees in West Darfur, UNICEF supported the training of 24 community health workers on Integrated Community Case Management (ICCM).

Through UNICEF’s support to the State Ministry of Health in East Darfur, a measles vaccination campaign targeting the South Sudanese refugee children in Kario camp and surrounding villages was conducted. A total of 7,329 children were vaccinated against measles during this campaign. In White Nile, UNICEF supported provision of outpatient services to a total of 2,048 South Sudanese refugee children under the age of five.

Nutrition
From January to November 2017, 202,227 children suffering from severe acute malnutrition were treated through the UNICEF and WFP supported Community-Based Management of Acute Malnutrition (CMAM) programme across Sudan, representing more than 80 per cent of the annual target including 14,341 children treated in November. A total of 732,638 mothers and caregivers have also been counseled on recommended Infant and Young Child Feeding (IYCF) practices from January to November, which exceeded the target, thanks to a cost-effective approach. The children treated for severe acute malnutrition and caregivers counseled is a comprehensive number that includes internally displaced persons and South Sudanese refugees.

UNICEF’s response to the Jebel Marra nutrition crisis continued focusing on the expansion of CMAM services. In December, twelve mobile Outpatient Therapeutic Programme (OTP) sites were established in the North, Central, West and East Jebel Marra. In East Jebel Marra, the first group of children were screened at Leiba. A total of 47 children were identified as suffering from severe acute malnutrition and all of them were admitted to appropriate treatment. Some of the villages in Jebel Marra including Leiba have been out of reach for nutrition services for almost a decade. UNICEF supports an integrated approach with other primary health care services being combined with nutritional support.

Water, Sanitation and Hygiene (WASH)
During 2017 and throughout Sudan, UNICEF provided access to new improved drinking water sources for 329,760 people (including around 161,580 children) and reached 1,507,479 people (including around 738,660 children) with hygiene messages that overachieved the targets. This was achieved because UNICEF prioritized to respond to the considerable needs of support that emerged because of the AWD outbreak. The underachievement on the target of affected people with access to safe means of excreta disposal, achieved only 33 per cent of the target (reaching 89,035 people including around 43,630 children), was mainly due to the lack of funding. Water, sanitation and hygiene interventions supported by UNICEF have contributed for reducing the burden and saving lives timely of the affected communities especially women and girls through availing water and sanitation services in the vicinity of their residential areas that reduce the burden and the time spent by the women and girls in fetching nearby improved water and using nearby and with good privacy latrines.

In December, UNICEF WASH provided access to new, improved water sources for 17,500 conflict affected people (including around 8,580 children) in South Kordofan and Blue Nile states, through the construction of three water yards, six hand pumps and one mini water yard. Also, 21,000 conflict affected people (including around 10,290 children) were provided with improved, rehabilitated water sources in West Kordofan. In addition, 1.6 million conflict and AWD affected population (including around 784,000 children) in Darfur, South and West Kordofan, White Nile, Red Sea, Kassala and Gedarif were supported by operations such as maintenance and water disinfection of their water supply services in order to sustain their improved water supply in terms of quantity and quality.

Sanitation services were re-established for 3,022 conflict affected people (including around 1,480 children) through the rehabilitation of 277 household and communal latrines in South Darfur and Blue Nile states. An estimated 22,359 conflict and AWD affected people (including around 10,960 children) were reached with hygiene promotion interventions, mainly hygiene promotion and cleaning campaigns, household visits as well as distribution of soap.
To strengthen the resilience of the protracted, internally displaced community in Kass camp in South Darfur through a dependency reduction strategy, UNICEF and partners are supporting activities that encourage community participation and ownership. During the reporting period, 210 community hygiene promoters were trained. In these trainings, active community members with focus on women and adolescents’ participation are receiving practical sessions on personal/environmental hygiene, improved sanitation and water quality in addition to hygiene promotion approach and modalities with emphases on handwashing and AWD prevention and control.

**Communication for Development (C4D)**

Through its Communication for Development programme, UNICEF continues to support the Ministry of Health and other partners to address behaviour and social change for the prevention of AWD and other infectious diseases such as viral haemorrhagic fevers, meningitis, measles, yellow fever and malaria.

In South Darfur State, 66 orientation sessions were conducted to promote the importance of hand washing with soap at critical times, drinking safe water and food safety at four localities in December. With UNICEF’s support, the Health Promotion unit of the State Ministry of Health organized an event to demonstrate the importance of hand washing with soap in which 1,500 students (girls 800, boys 700) participated.

**Media and External Communication**

Over the year 2017, UNICEF provided extensive social media coverage on the three main emergencies on the evolving AWD Outbreak, influx of South Sudanese Refugees and high numbers of malnutrition in the newly accessible areas, on UNICEF’s face book, twitter and medium accounts. Three comprehensive bulletins on UNICEF’s integrated response in the newly accessible areas of Jebel Marra as well as joint response with WHO and UNHCR to the AWD crisis were produced and distributed to in country donors. Social emphasis was also made in scaling up donor attribution to life-saving interventions to vulnerable populations especially children. Additionally, special events such as World Humanitarian Day, 16 days of Activism were used to champion the Global Cause Framework especially around End Violence and Children on Move specifically around child soldiers, child marriage, female genital mutilation/cutting (FGM/C), trafficking and Children in the Justice system on traditional and digital media platforms with a reach of over 300,000 views.

During the month of December, UNICEF provided visibility for the 2017 International Migrant Day on social media, amplifying UNICEF’s global call for countries to take positive measures to protect and care for migrant children through good practices as highlighted in the UNICEF report Beyond Borders. ([https://goo.gl/78dgTV](https://goo.gl/78dgTV); [https://goo.gl/WQLdPE](https://goo.gl/WQLdPE)). Sudan is a source, transit and destination country for migrants and refugees.

**Funding**

UNICEF’s 2017 revised Humanitarian Action for Children (HAC) appeal for Sudan amounted to US$96.5 million, to respond to children’s life-saving needs across the country. UNICEF Sudan faced with a critical funding short-fall, an urgent requirement of US$ 5 million to meet supply needs for Ready to Use Therapeutic Food (RUTF). This will enable treatment for 20,000 children with Severe Acute Malnutrition who are otherwise at immediate risk of dying. UNICEF also needs US$ 660,800 for vaccines. Without insufficient supply of vaccines, 253,360 infants will not be protected against Measles, Diphtheria, Whooping cough and Tetanus and 198,523 pregnant women and their children will not be protected against Tetanus. Furthermore, a total of US$ 1.6 million is needed for education in emergencies supplies and activities for 86,549 boys and girls. Not reaching these children puts them at high risk of dropping-out of school. No new contributions were received in the last two months of the year.

UNICEF would like to thank Germany, the EU, Japan, the Republic of Korea, Qatar, Sweden, the US, as well as the many donors to the Central Emergency Response Fund (CERF), the Sudan Humanitarian Fund (SHF) and UNICEF core/thematic funds for their generous contributions to the UNICEF humanitarian response in Sudan in 2017. UNICEF was also granted an internal Emergency Programme Fund (EPF) loan from its headquarters to be able to more effectively respond to the urgent, humanitarian needs in mid-2017. The EPF is a mechanism that fronts the cost of responding to acute emergencies by fast-tracking resources to eligible countries. Funds are to be reimbursed when donor contributions are received by the Country Office.
### Funding Requirements (as per UNICEF Sudan 2017 HAC appeal)\(^6\)

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Requirements (USD)</th>
<th>Funds Available(^7) (USD)</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>$</td>
<td>%</td>
</tr>
<tr>
<td>Child Protection</td>
<td>9,505,536</td>
<td>3,988,812</td>
<td>5,516,724</td>
</tr>
<tr>
<td>Education</td>
<td>27,774,239</td>
<td>6,316,449</td>
<td>11,457,790</td>
</tr>
<tr>
<td>Health</td>
<td>23,316,857</td>
<td>4,156,590</td>
<td>9,160,267</td>
</tr>
<tr>
<td>Nutrition</td>
<td>24,886,896</td>
<td>18,669,105</td>
<td>6,217,791</td>
</tr>
<tr>
<td>WASH</td>
<td>31,060,798</td>
<td>11,295,525</td>
<td>19,765,273</td>
</tr>
<tr>
<td>Sub-total</td>
<td></td>
<td>44,426,481</td>
<td>52,127,845</td>
</tr>
<tr>
<td>Other(^8)</td>
<td></td>
<td>2,979,551</td>
<td></td>
</tr>
<tr>
<td>Grand Total</td>
<td>96,544,326</td>
<td>47,406,032</td>
<td>49,138,294</td>
</tr>
</tbody>
</table>

**Who to contact for further information:**

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\(^6\)Programme targets in the 2017 UNICEF Sudan HAC are based on the targets of the HRP 2016, including the Refugee Multi-Sector

\(^7\)Funds available includes funding received against current appeal as well as carry-forward from the previous year.

\(^8\)The funding available listed as ‘other’ includes earmarked funds which are not linked to specific sectors, including the funding for cluster/sector coordination.
Annex A
SUMMARY OF PROGRAMME RESULTS 2017

<table>
<thead>
<tr>
<th>Overall Needs¹⁹</th>
<th>Sector (Cluster) Response</th>
<th>UNICEF</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2017 Target</td>
<td>UNICEF</td>
</tr>
<tr>
<td></td>
<td>Total Results</td>
<td>Change since last report</td>
</tr>
</tbody>
</table>

### CHILD PROTECTION

- **# boys and girls receiving psychosocial support**: 360,000<br>5,590<br>157,397<br>114,616<br>9,589
- **# separated and unaccompanied boys and girls receiving long-term alternative care arrangements**: 5,600<br>569<br>2,700<br>5,341<br>708

### EDUCATION **

- **# of school-aged boys and girls accessing safe learning spaces**: 180,000<br>3,993<br>150,000<br>26,051<br>3,640
- **# of children who have received education in emergency supplies and recreational materials**: 400,000<br>4,640<br>345,000<br>252,716<br>24,630

### HEALTH

- **# of boys and girls under 1 year of age receiving first dose of measles vaccine**: 483,001<br>518,840<br>58,372
- **# of conflict affected people having access to primary health care services**: 1,000,000<br>2,350,000²³<br>20,000

### NUTRITION²⁴

- **# of children 6-59 months affected by Severe Acute Malnutrition admitted to treatment**: 250,000<br>14,341<br>202,227<br>14,341
- **# of caregivers receiving infant and young child feeding (IYCF) counselling**: 423,615<br>54,936<br>732,638<br>54,936

### WASH²⁵

- **# of affected people with access to improved drinking water**: 2,560,000<br>250,000<br>329,760<br>17,500
- **# of affected people with access to safe means of excreta disposal**: 2,560,000<br>89,035<br>-
- **# of affected people reached with hygiene messages and sensitisation activities**: 2,560,000<br>780,000<br>1,507,479²⁷<br>22,359

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Footnotes:

19 The Overall Needs column represents the overall figure of people with humanitarian needs by sector as per the HRP 2017.

20 The sector results are lower than the UNICEF results due to the exclusion of the refugee caseload. The number of supported refugee UASC are included in the Refugee Multi-sector Response target and not in the Child Protection sub-sector target.

21 Results reported on these indicators by the Education Sector are one month prior to the sitrep date due to partners’ reporting mechanism.

22 The sector results are one month prior to the sitrep date due to partners’ reporting mechanism.

23 This achievement is mainly attributed to efforts around the Acute Watery Diarrhoea response.

24 Results reported on these indicators are one month prior to sitrep date due to partner reporting mechanisms.

25 WASH results report against the provision of new water facilitates (water trucking is not reflected) and new latrines. Operation and maintenance of existing water facilities and the rehabilitation of existing latrines are not reflected. Also, the sector targets became the same for each sector indicator, because the sector decided to take an approach to deliver a comprehensive package which encompasses improved access to safe drinking water, sanitation and hygiene services.

26 The indicator only includes population reached by the support of newly improved water sources. The funding allocation was enough for the new access to improved drinking water, while still there is a funding gap in responding to other out puts such as rehabilitation of source and school WASH

27 This achievement is mainly attributed to efforts around the Acute Watery Diarrhoea response.