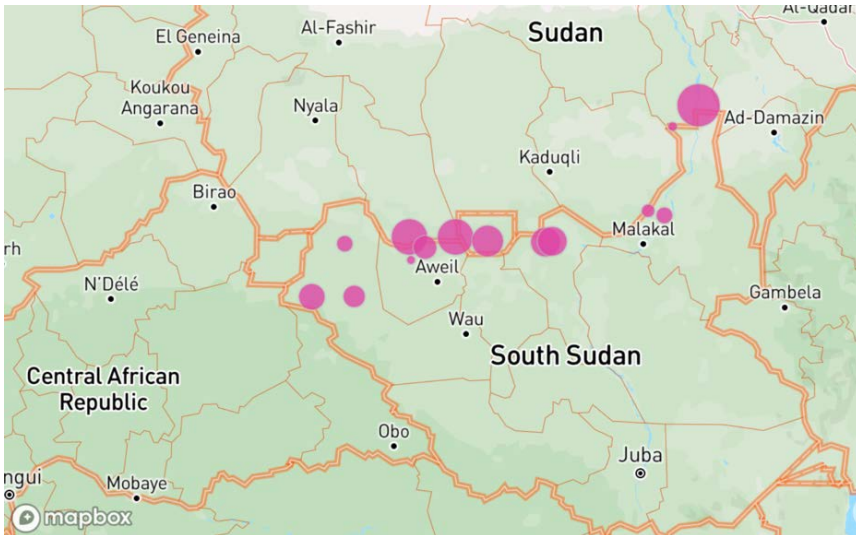


## SITUATION UPDATE



Point-of-entry map displaying the points of new arrivals along the border between Sudan and South Sudan. Source: International Organization for Migration (IOM) and United Nations High Commissioner for Refugees (UNHCR)

On April 15, the Sudanese Armed Forces (SAF) and the paramilitary Rapid Support Forces (RSF) began a conflict that has killed more than 500 people and injured more than 4,600, although the actual casualty counts are likely much higher. More than 100,000 refugees have been forced to flee, crossing into neighboring countries and journeying across the Red Sea on evacuation boats.<sup>1</sup> The United Nations estimates that about 815,000 people, including Sudanese and foreign refugees living in Sudan, could evacuate the country due to the conflict.

A number of aid organizations have halted providing services due to security risks. This lack of in-country support—combined with uncertain power and water supplies, food and fuel shortages, escalating transport costs, and the closure of hospitals and health facilities—has left those who remain in Sudan facing a humanitarian disaster.<sup>2</sup>

After two weeks of clashes in Khartoum, Darfur and other areas in Sudan, the healthcare system is on the brink of collapse. Sixteen hospitals have been devastated by bombardments and shelling; a national laboratory and 19 hospitals have been taken over by military forces; facilities are lacking staff, water, supplies and electricity; and aid transport to hospitals on the frontlines has become immensely difficult, given the ongoing fighting and looting.<sup>3</sup>

### International Medical Corps Response

In response to the ongoing conflict and escalating humanitarian crisis, International Medical Corps is scaling up a regional response, building on our existing programs in Sudan, South Sudan and the Central African Republic (CAR) to support those struggling amid the violence in Sudan as well as refugees fleeing the country.

#### FAST FACTS

- On April 15, clashes between the Sudanese Armed Forces (SAF) and the Rapid Support Forces (RSF) erupted in Khartoum. At least 528 people have been killed nationwide, and more than 4,600 have been injured.
- More than 100,000 people have fled Sudan to neighboring countries. This number is expected to increase as the violence continues.

#### OUR FOOTPRINT

- International Medical Corps has been providing critical health, nutrition, water, sanitation and hygiene (WASH), mental health and psychosocial support (MHPSS) and protection services in Sudan since 2004.

#### OUR RESPONSE

- Given the rapidly evolving security context, International Medical Corps has launched a regional response focused on expanding existing services and activities to meet the increased needs of internally displaced persons (IDPs) in Sudan and refugees seeking safety in the Central African Republic (CAR) and South Sudan.
- In Sudan, we are assessing the clinics we provide support to in order to best facilitate the provision of medicines, trauma kits, medical supplies and staffing assistance.
- In CAR, our teams have provided 388 primary health consultations and supported 92 women and girls with reproductive health services.
- In South Sudan, International Medical Corps has deployed a mobile clinic to the border to conduct health, nutrition, and gender-based violence (GBV) consultations to refugees and returnees.

<sup>1</sup> <https://www.washingtonpost.com/world/2023/05/02/sudan-refugee-crisis-conflict-khartoum/>

<sup>2</sup> <https://www.reuters.com/world/africa/sudan-conflict-shows-no-sign-easing-sudanese-brace-more-violence-2023-05-01/>

<sup>3</sup> <https://www.theguardian.com/world/2023/may/01/medics-in-sudan-warn-of-crisis-as-health-system-near-collapse>

Since 2004, International Medical Corps has been providing critical health, nutrition, mental health and psychosocial support (MHPSS), protection, and water, sanitation and hygiene (WASH) services in **Sudan**. We have also supported efforts by Sudan’s Ministry of Health (MoH) to strengthen health systems and build capacity for providers. The health system in Sudan already was delicate before this latest outbreak of violence, due to other humanitarian emergencies, severe poverty, deteriorating economic conditions, political instability, tribal conflict, lack of funding for health facilities and annual outbreaks of disease.

Region	Number of IMC-supported health facilities	Number of facilities still functioning*
Central Darfur	24	17
West Darfur	14	0
South Darfur	6	6
South Kordofan	14	14
Blue Nile	10	10
<b>TOTAL</b>	<b>68</b>	<b>47</b>

*International Medical Corps is continuing to coordinate closely with our health facilities in Sudan to identify gaps and constraints preventing facilities from providing essential care. Given security constraints, communication in many areas of the country has been difficult. \*Numbers are subject to change as the conflict evolves.*

In Central Darfur, our teams have been able to confirm that 17 of our 24 support facilities are functioning at reduced capacity, due to stock-outs and the inability of senior health staff members to reach facilities due to insecurity. The facilities that are not functioning are in Mukjar and Um Dukhun, where the security situation remains particularly volatile. However, Um Dukhun Hospital and Golo Hospital in Um Dukhun are continuing to function, providing comprehensive emergency obstetric and neonatal care services, as well as other essential services. Both are supported by International Medical Corps.

In West Darfur, our teams have only been able to reach two out of the 14 health facilities in the region that we support. Both facilities are no longer functioning as a direct result of the conflict; based on the security situation, our teams are operating under the assumption that all the health facilities in region that we support currently are non-functional. In South Darfur, International Medical Corps’ clinics operating in camps for internally displaced persons (IDPs) are continuing to function, as are our three other supported facilities in the region. In South Kordofan, all 14 International Medical Corps-supported 14 health facilities are functional. The same is true for the 10 facilities in Blue Nile that International Medical Corps supports.

We are assisting hospitals and trauma centers by providing pharmaceuticals, trauma kits, medical consumables and staffing support, helping to ensure continuity of care. Our logistics team has mapped out our warehouses and variable stock, and we are continuing to assess the best options for transporting supplies into and throughout the country.

International Medical Corps is prioritizing facilities in the Darfur region, where access to critical services was already restricted before the conflict. We have provided medical commodities—including such trauma supplies as bandages, gauze and antiseptics—to Garsila Hospital in West Darfur, which has received a number of civilian casualties from the region. We are also working with the WHO to secure Interagency Emergency Health Kits (IEHKs) for distribution. The IEHKs consist of essential medications, supplies and minor equipment that support priority health needs for approximately 10,000 people for three months. This support is critical as health facilities try to keep up with rapidly increased needs.

As needs evolve, we are preparing to bolster critically needed services in affected areas, based on our ongoing security assessments. Based on discussions with the MoH, health facilities are in desperate need of pharmaceuticals, surgical materials, medical consumables, fuel and staffing support. The MoH has provided a list of prioritized items, and our teams are working closely with local authorities to procure these essential items to help healthcare facilities responding to the crisis. Given the security concerns in Sudan, our senior management team has transferred to Nairobi, Kenya, to help coordinate the response remotely.

With the rapid influx of people fleeing Sudan into neighboring countries, a substantial regional crisis could be triggered. Given the tremendous burden on healthcare providers in the region, International Medical Corps is enhancing our support to CAR and South Sudan, where we have established programs.

Since 2007, International Medical Corps has been working in **CAR** to provide basic health services; reproductive, maternal and child health services; counseling and testing for HIV; treatment for acute respiratory infections; support to survivors of GBV; protection activities; nutrition services and malnutrition treatments; and MHPSS. Our teams have also

<sup>4</sup> <https://www.nytimes.com/2023/04/30/world/africa/sudan-hospitals-doctors-fighting.html>

strengthened the capacity of health facilities throughout the country by providing training for healthcare providers, midwives and protection assistants. We currently provide services in three regions, including Haute Kotto and Vakaga districts, which border Sudan.

In CAR, International Medical Corps is providing health consultations and services to people fleeing the conflict in Sudan. We have so far conducted 388 consultations for such conditions as malaria, respiratory infection, diarrhea and trauma. Our teams have administered antenatal care for 90 women, provided safe delivery services for two women and supported for two survivors of GBV. To reinforce our efforts, we are in the process of deploying an additional midwife to support the team. The current situation indicates a significant demand for reproductive health (RH) services, given that 80% of beneficiaries we have seen have been women and girls.

We also are coordinating with International Committee of the Red Cross (ICRC), which has generously donated an IEHK to our clinic in Am Dafok, and are in the process of procuring additional IEHKs, malaria kits, tents, RH kits, pharmaceuticals and medical supplies to ensure the continuous delivery of services. Despite ongoing supply-chain challenges, inflation, fuel shortages, limited warehousing capacity and damaged transportation infrastructure, our teams are continuing to provide and expand our services in CAR as the crisis unfolds.

International Medical Corps has worked in **South Sudan** since the mid-1990s, providing primary, secondary and tertiary healthcare, maternal and child health, nutrition, GBV prevention and response, and MHPSS services. Before this conflict, South Sudan already was suffering severe food insecurity, widespread sexual violence, high infant mortality and high caseloads of communicable diseases, such as COVID-19, malaria, cholera and measles. Pre-existing large-scale displacement and the influx of around 10,000 people who have crossed from Sudan into South Sudan have exacerbated the risk of starvation, lack of access to quality care and the potential for disease. To help meet existing and emerging needs related to the conflict, we have stationed an emergency response team in the Upper Nile region of South Sudan.

3,645 returnees and 470 refugees, predominantly from Ethiopia, Eritrea, Sudan and Somalia, have been reported to be awaiting clearance at the border. Some individuals and families are being hosted at Mama Aliza School and Upper Nile University, while the majority of the returnees are being hosted in Renk, a small town in northeast South Sudan where International Medical Corps has deployed a mobile clinic. The team has so far conducted health, nutrition and GBV awareness sessions for 335 people. We have also installed and established two family tents where 44 people have received curative consultations. Our teams also visited the transit shelter for refugees and returnees in the Upper Nile University campus to assess the situation and emerging needs.

International Medical Corps will continue to maintain collaborative efforts with partners, local authorities and other aid organizations to address the escalating and evolving needs at the borders of South Sudan and CAR. We are constantly monitoring the security situation and the urgent needs of those still in Sudan, while providing of services where possible.



*International Medical Corps is rapidly expanding activities in CAR and South Sudan to meet the needs of people fleeing violence.*