



A photo by an International Medical Corps staff member performing an assessment shows living conditions in an IDP camp in Sudan.

As the conflict in Sudan between the Sudanese Armed Forces (SAF) and the Rapid Support Forces (RSF) enters its second month, humanitarian conditions have worsened and those living in Sudan have been left in a state of terror, struggling to survive. The violence has killed more than 676 people and injured at least 5,576, although the actual tolls are likely much higher. About 200,000 people have fled into neighboring countries, while more than 700,000 have been displaced inside Sudan.¹

Those left in Sudan have been struggling with a lack of fuel, power, internet and cellular service, food and pharmacy supplies. Shortages throughout the country have led to extreme inflation, leaving people without the means or access to get basic provisions. Refugees and returnees are enduring dire conditions as they flee Sudan to neighboring countries, and are arriving traumatized, hungry, thirsty and dehydrated. Temperatures in the region have reached about 50 degrees Celsius (122 degrees Fahrenheit).²

In addition to a need for food, clean water and other basic supplies, gender-based violence (GBV) support and sexual and reproductive health (SRH) services, such as obstetric and neonatal services, are extremely limited. The vast majority of those fleeing Sudan are women and children. While they are on the move, living in temporary shelters and lacking basic provisions, they are left vulnerable to GBV, sexual exploitation and abuse (SEA), and SRH complications and obstacles. Before this crisis, the risks of GBV were already heightened for women,

FAST FACTS

- On April 15, clashes between the Sudanese Armed Forces (SAF) and the Rapid Support Forces (RSF) erupted in Khartoum. At least 676 people have been killed nationwide, and more than 5,500 injured.
- More than 200,000 people have fled Sudan to neighboring countries and over 700,000 have been displaced inside Sudan. These numbers are expected to increase as the violence continues.

OUR FOOTPRINT

- 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 since 2004.

OUR RESPONSE

- 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), Ethiopia and South Sudan.
- In Sudan, we are providing IPC materials and PPE to a women's and obstetrics hospital in Madani.
- In Ethiopia, we are preparing to deploy additional GBV and mental health staff to help expand healthcare services for the influx of refugees and returnees.
- In CAR, we have provided more than 1,800 curative consultations.
- In South Sudan, our teams have provided consultations for 1,769 people and have conducted awareness-raising sessions for 1,399 people.

¹ <https://www.reuters.com/world/africa/air-strikes-pound-sudans-capital-conflict-enters-second-month-2023-05-15/>

² <https://www.cnbc.com/2023/05/08/international-rescue-committee-anticipates-secondary-humanitarian-crisis-in-sudan.html>

girls, and at-risk populations in Sudan, but exposures to these risks are expected to increase throughout the conflict.³

As the conflict continues, the healthcare system in Sudan is growing more fragile, with reported shortages of doctors, blood, intravenous fluids and medical supplies and equipment. Dengue fever in the region has worsened, and there is increased potential for other infectious disease outbreaks and endemics, due to the lack of clean water, crowded living conditions and faltering healthcare system.⁴

International Medical Corps Response

To help meet the expanding humanitarian needs in Sudan and surrounding countries, our teams are expanding existing programs in Sudan, South Sudan, Ethiopia and the Central African Republic (CAR).

International Medical Corps has been working in **Sudan** since 2004, providing critically needed health, nutrition, mental health and psychosocial support (MHPSS), protection, and water, sanitation and hygiene (WASH) services. In partnership with Sudan's Ministry of Health (MoH), we have also supported efforts to strengthen health systems and build provider capacity.

The security situation in Sudan remains unpredictable, with additional reported instances of carjacking, looting and sporadic shootings. Our teams have also been faced with fuel shortages, bank closures, inflation and a lack of internet and mobile phone connectivity. The clinics we support in West Darfur and Garsila are not operational, but clinics in Blue Nile and South Kordofan states and the rest of Central Darfur remain operational, though they are facing shortages of drugs and medical commodities.

International Medical Corps is conducting a needs assessment for primary health and other related sectors in Sennar this week. We also are in the process of procuring essential supplies and equipment, including infection prevention and control (IPC) materials and personal protective equipment (PPE), for Wad Madani Women and Obstetrics Hospital. Given the reports of an outbreak of acute watery diarrhea in Madani, we are closely coordinating with the MoH to explore potential response measures, such as hygiene kit distribution, IPC awareness-raising programs and WASH supplies. Furthermore, we are working with the MoH on how to effectively support healthcare facilities amid shortages of blood, medical oxygen cylinders, basic drugs and critically needed medical equipment.

Our teams have visited camps for internally displaced persons (IDPs) in Sudan, and have reported notable deficiencies in WASH awareness and infrastructure. To address these critical needs, International Medical Corps will provide assistance to the camps, including supplying IPC materials and organizing IPC training. We will also help test and monitor water quality, helping to ensure that water meets safety standards for drinking, cooking and personal hygiene.

With the influx of more than 200,000 people into neighboring countries, International Medical Corps is rapidly working to expand our existing activities in Ethiopia, CAR and South Sudan.

International Medical Corps has worked in **Ethiopia** in 2003, with programs in nutrition, primary healthcare, community health, SRH, MHPSS, GBV, livelihoods, disaster-risk reduction and WASH. We have provided services in more than 60 woredas in eight regions: Afar, Amhara, Benishagul-Gumuz, Gambella, Oromia, Somali, Southern Nations Nationalities and People's Region (SNNPR) and Tigray.

Considering the rapid influx of refugees seeking safety from the ongoing violence in Sudan and their subsequent arrival in Ethiopia, International Medical Corps has decided to expand our existing operations in the country to provide essential services to both refugees and returnees. So far there have been almost 20,000 arrivals through the Metema crossing point, and despite having some MHPSS, GBV, and emergency medical team staff there delivering services, there are still gaps in care due to the overwhelming volume of people and resulting strain on existing resources.

International Medical Corps has just completed an assessment to understand the prevailing needs and facilitate an appropriate response. Consequently, we will be deploying additional GBV staff and a mental healthcare navigation team while providing supplemental health services in the region. Additionally, our team is coordinating with partners to source interagency emergency health kits (IEHKs) and other critically needed supplies.

In **CAR**, our teams have been working since 2007 to provide support in primary healthcare, nutrition, GBV treatment and prevention, and reproductive, maternal and child health. International Medical Corps has also provided training for healthcare providers, midwives and protection assistants, to help build local capacity and awareness of community groups.

On the border, our mobile medical unit continues to provide health, nutrition and protection services, in close coordination with local authorities and UNHCR. We have so far provided antenatal care services to 296 women, supported eight

³ https://sudan.unfpa.org/sites/default/files/pub-pdf/unfpa_-_sudan_emergency_situation_report_no.1_1.pdf

⁴ [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(23\)00858-9/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(23)00858-9/fulltext)

deliveries and provided eight survivors of rape with essential services. We have supported more than 1,800 people with curative consultations, the majority of which have been cases of malaria, acute respiratory infections, diarrhea, parasites, and moderate acute malnutrition (MAM) and severe acute malnutrition in children under 5. Additional cases of measles, trauma and mental health needs have been reported, as well.

Our teams have observed several challenges in CAR, including rising tensions between the Sudanese asylum seekers and CAR returnees over limited resources, suspected measles cases that may lead to a potential outbreak, fuel shortages, drug stockouts, difficult road conditions, supply-chain difficulties, lack of security forces, poor mobile and internet communication, and staff fatigue. We have notified the Health District of the suspected measles cases and remain on alert for an outbreak. To mitigate fuel and supply shortages, our staff members are assessing alternative supply chains for diesel, and have resupplied medicines to the Am Dafok Health Center. We are continuing to collaborate with local authorities and partner organizations to help ensure continuity of care for refugees and returnees in CAR, despite evolving obstacles.

International Medical Corps has worked in **South Sudan** since the mid-1990s, offering services in primary, secondary and tertiary healthcare, maternal and child health, nutrition, GBV prevention and response, and MHPSS services. We have deployed an emergency medical team to the Upper Nile region of South Sudan to help meet the needs related to the conflict in Sudan, and continue to provide curative consultations to refugees and returnees in the town of Renk. In coordination with the local government, we have moved our mobile health clinic and emergency response team to the transit center in Renk, where 6,000 people are reported to be staying.



International Medical Corps' GBV team distributes dignity kits to returnees in South Sudan.

We have so far provided consultations to 1,769 people, with lower respiratory tract infections, acute respiratory tract infections, malaria and diarrhea emerging as some of the most common conditions. Our GBV response team also has been supporting survivors. To date, we have responded to five GBV cases in South Sudan, including two survivors of physical assaults and three survivors of rape. To further enhance our impact, we have implemented integrated health, GBV and nutrition awareness-raising sessions, and have so far reached 1,399 people.