



Women and children in Madani receive consultations from an International Medical Corps mobile health and nutrition team.

The eruption of violence between Sudanese Armed Forces (SAF) and the Rapid Support Forces (RSF), which began in the Northern and Khartoum states of Sudan, has spread across the regions of Darfur and Kordofan. According to estimates, the conflict in Sudan has killed more than 1,000 people and injured many more, although exact figures are difficult to establish.¹ Since the conflict began, 598,883 people are confirmed to have fled to neighboring countries, while there are at least 1,965,946 internally displaced persons (IDPs).²

A recent cross-border assessment conducted by REACH reports that access to food and water has worsened. In Khartoum, household survey interviewees acting as key informants report resorting to drinking surface water and reducing consumption to cope with the conditions. In South Darfur, informants report people eating seeds intended for next year's harvest, due to lack of food. More than half of agriculture informants say there will be no planting next harvest season, due to lack of money, nonfunctioning markets, and stocks and crops consumed or destroyed. In addition to lack of food and water, environmental hazards such as flooding, destruction of health facilities and limited access to basic services are expected to increase the risk of a public health crisis in Sudan and neighboring countries.

International Medical Corps Response

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

Our emergency response in **Sudan** continues to face many challenges related to security, access and cash availability. Despite these obstacles, we are helping conflict-affected IDPs in Madani and Sennar, and transporting critical supplies to support the response. International Medical Corps' Emergency Response Team (ERT) continues to pursue access routes into Darfur, evaluating opportunities and partnerships to determine the best way forward.

¹ <https://www.bbc.com/news/world-africa-65938868>

² <https://dtm.iom.int/reports/dtm-sudan-situation-report-9>

FAST FACTS

- On April 15, clashes between the Sudanese Armed Forces (SAF) and the Rapid Support Forces (RSF) erupted in Khartoum. Since then, at least 1,000 deaths have been confirmed nationwide, while thousands have been injured.
- Almost 600,000 people have fled Sudan to neighboring countries, while nearly 2 million 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, protection, mental health and psychosocial support (MHPSS), 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, our mobile health and nutrition team (MHNT) is providing services to IDPs in Madani.
- In Ethiopia, our team has provided more than 1,000 medical consultations to refugees and returnees in Metema.
- In CAR, we have shipped 3 tons of cargo containing interagency emergency health kits (IEHKs) to support our response in Birao.
- In South Sudan, our teams have provided consultations for almost 10,000 people and have conducted health-related educational sessions for nearly 17,000 people.

Our mobile health and nutrition team (MHNT) in Madani, Al Jazirah state, has started working in IDP camps in the villages of Souqatra, Shagdi and Fadak, so far reaching 167 people through curative consultations, 129 people with vaccinations, 30 women with antenatal care services and 51 people through nutrition screenings. As of June 20, IOM reported 117,360 IDPs in Al Jazirah state. The MHNT is coordinating with Ministry of Health (MoH) to meet pressing health needs, including antimalarials and pediatric medicines. Heavy rains disrupted water supply systems in Souqatra camp this week, resulting in contamination of drinking water and leading to high numbers of acute watery diarrhea among children at the camp. In a single day, our MHNT staff saw 47 cases of diarrhea and vomiting among its pediatric patients. The team is responding quickly by recruiting additional infection prevention and control (IPC) staff, and performing a rapid assessment to inform our WASH/IPC response.



The water supply system in Souqatra IDP camp, Madani, suffered damage after heavy rains, resulting in significant WASH needs.

In Sennar state, our Medical Coordinator has worked closely with the MoH to identify two locations for our second MHNT. The locations identified are based on critical needs and include El Suki, hosting 40,667 IDPs, and Dinder, hosting 19,149 IDPs. The MHNT expects to be operational in Sennar by next week. In addition to our mobile efforts, our team is finalizing a partnership to support frontline clinical staff in Khartoum and Darfur with incentive payments. The incentives will enable staff to continue their lifesaving work while recognizing the conditions and insecurity under which they are working.

Our ERT logistics team is fulfilling urgent procurement needs to facilitate IPC activities in Al Jazirah and Sennar. The team has received the support of the World Food Program to arrange nine shipments of critical supplies to Sudan, including medical supplies, pharmaceuticals and medical equipment.

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. We have also supported efforts by the country's MoH to strengthen health systems and build capacity for providers.

In **CAR**, International Medical Corps is the only international non-governmental organization (INGO) providing services to refugees in the border town of Am Dafok, where we have most recently resupplied the health facility with two months' stock of Plumpy'Nut, essential drugs and critically needed supplies. We have continued to provide health, nutrition and protection services in Am Dafok, and are providing health and protection services to refugees in Birao. We have started operating a mobile medical unit (MMU) at the refugee settlement site in Birao, where people have begun to relocate, and will expand these services as needed to accommodate the influx of refugees. Our teams have also procured a shipment of interagency emergency health kits (IEHKs), which have been received and will be transported to Birao to support our response. Though heavy rainfall and flooding in Am Dafok is expected to cause significant challenges for supplying our teams over the next few months, we are continuing to work with the Logistics Cluster, other NGOs, local partners and relevant government authorities to ensure the continuity of care in Am Dafok.

Our teams have worked in CAR since 2007, providing support in primary healthcare, nutrition, gender-based violence (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 the capacity and awareness of community groups.

We are continuing to provide integrated health, GBV, nutrition, and mental health and psychological support (MHPSS) services to returnees and refugees at the Metema Transit Center in **Ethiopia**. According to estimates, more than 50,200 people have arrived through the Metema point of entry, with the number of daily new arrivals estimated to be 800 per day, 70% of whom are children. Our team has provided 224 medical consultations over the past week. A significant portion of adult consultations have been focused on intestinal parasites, acute upper respiratory tract infections, diarrheal disease, fever and dyspepsia, while the top reported morbidities in children under 5 have been watery diarrhea, intestinal parasites and insect bites.

Throughout the last week, International Medical Corps' MHPSS team has reached an additional 55 people with psychosocial support (PSS), provided 22 MHPSS consultations for patients diagnosed with acute stress disorder and post-traumatic stress disorder, and conducted a psychoeducation and group consultation for 100 people. During the same time period, our GBV team administered PSS and GBV consultation services to 34 adolescent girls and 100 women,

provided psychological first aid to 37 women and reached 435 people with group discussions on GBV risk mitigation. We have screened 55 children under 5 for severe acute malnutrition (SAM) and moderate acute malnutrition (MAM), and conducted screening for seven pregnant and lactating women. In total, we identified two SAM cases in children and two MAM cases in pregnant and lactating women.

International Medical Corps has worked in Ethiopia since 2003, with programs in nutrition, primary healthcare, community health, sexual and reproductive health, 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.

In **South Sudan**, our mobile medical teams are stationed at the Renk Transit Center and the Bulukat Transit Center in Malakal, where we are providing health services to refugees and returnees. Across both locations, our teams have reached 9,615 people with outpatient consultations; delivered 399 immunizations; conducted 54 MHPSS consultations; reached 16,998 people through integrated health, nutrition, MHPSS and GBV education and promotional messages; and screened nearly 5,000 children and pregnant and lactating women for malnutrition, admitting 275 women for MAM treatment and 569 children for malnutrition treatment. Though we have been consistently faced with challenges in this response—such as supply shortages, security concerns, high transportation costs, inflation, a lack of qualified midwives in the area and a lack of private places where women and girls can receive case management support—we are coordinating with our partners, local authorities and other relevant stakeholders to ensure continuity of care.

International Medical Corps has worked in South Sudan since the mid-1990s, offering primary, secondary and tertiary healthcare, maternal and child health, nutrition, GBV prevention and response, and MHPSS services.

Sudan Regional Response			
52 health facilities supported	5 refugee centers supported	4 IDP centers supported	
14,616 medical consultations	6,000 immunizations delivered	356 MHPSS consultations	
2,366 GBV consultations	219 accessing women and girls' safe spaces	186 participating in group education sessions	10,991 reached through awareness-raising
2,829 children screened for malnutrition	232 outpatient therapeutic feeding program admissions	232 target supplementary feeding program admissions	22 nutrition consultations for pregnant and lactating women
111 women receiving antenatal care	86 deliveries assisted by skilled personnel	106 women receiving postnatal care	92 women admitted for MAM treatment
18 health kits distributed	100 dignity kits distributed	17,861 wound kits processing for shipment	17.8 tons of pharmaceuticals and medical supplies in pipeline
34,118 direct beneficiaries			