"My biggest needs are food, water and medicine."

South Sudanese refugee and mother of nine, Christina Daing, is one of the beneficiaries of the aid distribution in Bahri, Khartoum, Sudan. She works as a washer woman to earn a living, but her daughter has epilepsy and when she is unwell Christina cannot work and has no money to buy food.

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INTRODUCTION

South Sudanese refugee, Geel Deng Nyadong, collects firewood that will last her several days, near the city of Kosti on the banks of the White Nile.

© UNHCR/ VANESSA ZOLA
On January 2020, the Refugee Consultation Forum, co-chaired between UNHCR and the Commission for Refugees (COR) launched the first comprehensive refugee response plan covering the needs of the whole refugee population in Sudan, which includes South Sudanese refugees, Chadian refugees, Central African Republic (CAR) refugees, refugees living in urban settings and refugees living in East Sudan. This report covers the achievements from January to June 2020 from over 30 partners, including local and international NGOs, as well as UN Agencies, who contribute to the CRP 2020 plan.

While some progress has been made by partners to respond to refugee needs in Sudan the deteriorating economic conditions and the COVID-19 pandemic have further increased vulnerability.

The RCF produced an addendum to the CRP to respond to the new challenges and give the chance to partners to re-prioritize their appeal based on the emerged needs. In that light, this report also includes an overview of the COVID-19 response for refugees and information on the coordination structure used to respond to this crisis.

### Monitoring Framework

<table>
<thead>
<tr>
<th>Category</th>
<th>Indicator</th>
<th>Achievement</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Protection</td>
<td># of refugees receiving specialized protection assistance</td>
<td>31,861 (14%)</td>
<td>225,000</td>
</tr>
<tr>
<td>Protection</td>
<td># of refugee children with specific needs receiving assistance</td>
<td>11,532 (13%)</td>
<td>89,359</td>
</tr>
<tr>
<td>Protection</td>
<td># of refugees biometrically registered by the mid-2020</td>
<td>30,439 (5%)</td>
<td>598,576</td>
</tr>
<tr>
<td>Health</td>
<td># of health consultations in health facilities accessed by refugees</td>
<td>466,498 (103%)</td>
<td>452,476</td>
</tr>
<tr>
<td>COVID-19</td>
<td># of refugees and host community reached with COVID-19 related messaging</td>
<td>N/A</td>
<td>284,378</td>
</tr>
<tr>
<td>Food Security</td>
<td># of refugees receiving food assistance</td>
<td>354,860 (58%)</td>
<td>610,000</td>
</tr>
<tr>
<td>WASH</td>
<td>Average # of liters of potable water available per person per day</td>
<td>17 Liters</td>
<td>Target is 20 Liters</td>
</tr>
<tr>
<td>WASH</td>
<td># of persons per toilet / latrine</td>
<td>23 Persons</td>
<td>Target is &lt;20 Persons Per Latrine</td>
</tr>
</tbody>
</table>
**Funding**

$505,879,963 million

- **Funded 35%**
  - $176 million

- **Unfunded 65%**
  - $330 million

**Sector Funding Level**

- 14%
- 15%
- 15%
- 23%
- 26%
- 34%
- 38%
- 69%

**Donors**

*Funding appeal as per the COVID-19 Addendum to the 2020 Sudan Country Refugee Response Plan*
Refugees living in Sudan as of June 2020, including 21,806 new arrivals until June 2020.

Country of Origin

<table>
<thead>
<tr>
<th>Country</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>South Sudan</td>
<td>820,687</td>
</tr>
<tr>
<td>Eritrea</td>
<td>120,607</td>
</tr>
<tr>
<td>Syria</td>
<td>93,498</td>
</tr>
<tr>
<td>CAR*</td>
<td>19,491</td>
</tr>
<tr>
<td>Ethiopia</td>
<td>13,090</td>
</tr>
<tr>
<td>Chad</td>
<td>3,505</td>
</tr>
<tr>
<td>Yemen</td>
<td>1,802</td>
</tr>
<tr>
<td>Others</td>
<td>1,381</td>
</tr>
</tbody>
</table>

List of Partners

- Adventist Development and Relief Agency (ADRA)
- Al Manar Voluntary Organization (AMVO)
- Alshoorq Organization for Social and Cultural Development (AOSCD)
- American Refugee Committee (ARC)
- Business Professional Women’s Organization (BPWO)
- Catholic Agency for Overseas Development (CAFOD)
- Care International Switzerland (CIS)
- Concern Worldwide (CWW)
- Cooperazione Internazionale (COOPI)
- Global Aid Hand (GAH)
- JASMAR Human Security Organization (JASMAR)
- Islamic Relief Worldwide (IRW)
- Mutawinat Benevolent Organization (MUTAWINAT)
- Mercy Corps (MC)
- Nada El Azhar for Disaster Prevention and Sustainable Development
- Norwegian Church Aid (NCA)
- Oxfam America (Oxfam)
- Plan International Sudan (PIS)
- Relief International (RI)
- Save the Children International (SCI)
- Sudanese Organization for Relief and Recovery (SORR)
- United Mission on Relief and Development (UMoRD)
- UN - Development Programme (UNDP)
- UN - Food and Agriculture Organization (FAO)
- UN - Population Fund (UNFPA)
- UN - High Commissioner for Refugees (UNHCR)
- UN - International Children’s Emergency Fund (UNICEF)
- UN - Industrial Development Organization (UNIDO)
- UN - International Organization for Migration (IOM)
- UN - World Food Programme (WFP)
- UN - World Health Organization (WHO)
- United Peace Organization (UPO)
- Welthungerhilfe (WHH)
- World Vision International (WVI)

*Central African Republic

The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

Abyei region: Final status of the Abyei area is not yet determined.
SOUTH SUDANESE REFUGEES

South Sudanese refugee student writing in a notebook in Bantiu, Khartoum “Open Areas”
© UNICEF/FLORINE BOS
South Sudanese refugees remain the largest refugee population hosted in Sudan. While new arrivals slowed down compared to the previous year, from January to June 2020 a total of 11,089 individuals arrived in Sudan seeking protection. A large number of refugees live in out-of-camp settlements in remote and underdeveloped areas, where resources, infrastructure and basic services are extremely limited.

Significant funding gaps for the South Sudanese refugee response are exacerbated by Sudan’s ongoing economic crisis including rising inflation of commodity prices, fuel shortages and import restrictions that have slowed the delivery of goods and services, as well as movements to and from the field. Fuel shortages across Sudan have interfered with response logistics and slowed down the delivery of humanitarian assistance to refugee hosting areas. In addition, COVID-19 restrictions have further hampered the ability of refugees to find livelihood opportunities and have therefore become more dependent from humanitarian aid.

Despite the difficulties, over 350,000 health consultations were provided to refugees and over 310,000 received food assistance. Inter-agency partners also worked to strengthen government services, particularly in health and education, to facilitate refugee integration.

However, challenges persist and the average liters of potable water available per person per day remains at 11, significantly lower than the recommended 20 liters/p/d considered as a minimum Sphere standard. Income opportunities remain very limited for refugees, which does not assist in increasing their self-reliance. To ensure COVID-19 health and security protocols, refugee registration was done at HH level and procedure for safe biometric registration was set up. Despite COVID and lockdown in the first half of 2020, over 22,800 refugees were biometrically registered.

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URBAN REFUGEES LIVING IN KHARTOUM
Populations of Eritrean, Ethiopian, Congolese, Syrian and Yemeni refugees and asylum-seekers live in urban areas in Khartoum. These groups face significant barriers to access to services and their basic human rights, including housing and shelter, education, freedom of movement, physical security and livelihoods. Since Syrian and Yemeni refugees are considered “brothers and sisters” by the Government of Sudan, as part of the “Arab notions of asylum” policy, and are not required to register with COR, the number of new arrivals (189 from January to June 2020) might not reflect the complete picture.

Urban refugees have been particularly affected by COVID-19 restrictions, as many have lost their livelihood opportunities. Partners mobilized food and cash assistance to provide for basic needs as a result of the deterioration of the socioeconomic situation. In addition, a large risk communication campaign in the several languages spoken by refugees was conducted to promote hygiene and COVID-19 prevention measures, reaching around 6,000 refugees.

Refugees have accessed over 4,000 health consultations and over 300 children with specific needs received assistance. However, the water available to refugees in Khartoum remains very low, at only at 12 liters/person/day. Urban refugees living in Khartoum also have the largest number of persons per toilet/latrine, at 27 persons per each facility. The standard is less than 20 persons/latrine, aiming for one latrine/household.

Urban refugees living in Khartoum as of June 2020, including 189 new arrivals until June 2020.

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Abyei region: Final status of the Abyei area is not yet determined.

The # of persons per toilet / latrine

12 L

27
REFUGEES LIVING IN EAST SUDAN

Pump operator, Abdelaziz Ibrahim, a refugee from Eritrea, cleans the photovoltaic cells every day in Um Gargour camp, Gedaref, East Sudan. © UNHCR/ROLAND SCHONBAUER
While continuing to receive new arrivals (2,535 by the end of June 2020), East Sudan is also host to one of the most protracted refugee situations in the world with active refugee camps in Kassala and Gedaref States. Chronic underfunding has left refugees in the region with poor access to infrastructure and services, including WASH, health and education facilities, which are in urgent need of rehabilitation. In addition, lack of livelihood opportunities, food shortages and increasing prices continue to be a factor influencing refugees’ decisions to move onward towards Khartoum and beyond.

By June 2020, refugees accessed over 81,000 health consultations and over 38,000 received food assistance. Despite the COVID-19 restrictions, almost 4,000 refugees were biometrically registered. In terms of water availability, refugees in the East have an average of 32 liters/person/day, which is above the Sphere minimum standard of 20/l/p in post-emergency situations. While work is ongoing to provide one latrine per household, refugees in the East share on average one facility between 12 individuals. This average is better than for other refugee populations but needs to continue to be improved.

Inter-agency partners see an urgent need for more durable solutions that support greater self-reliance and enhanced protection of refugees while supporting host communities as well. Livelihood initiatives in agriculture and in the energy and environment sector continue to be a priority. Protection interventions, including individualized assistance for sexual and gender-based violence (SGBV) survivors, victims of trafficking, unaccompanied and separated children (UASC) and people living with mental illness also need to continue and be strengthened in the remaining part of the year.


* Refugees figures in Aj Jazirah, Kassala and Gedaref states.

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Fathia Ibrahim and her son, refugees from Central African Republic, were two of the over 2,700 refugees who were relocated from Um Dafoug border town to Al Mashaga settlement, South Darfur, further away from the conflict area.
From mid-October until January 2020, some 11,400 CAR refugees sought asylum in Sudan at the border town of Um Dafoug, South Darfur State. As the conflict continued at the border, UNHCR in partnership with the Commission for Refugees facilitated the voluntary relocation of refugees from Um Dafoug to Al Mashaga settlement, a newly identified area where partners mobilized WASH, shelter and other resources to prepare the site in advance to the relocation. Up until the end of June 2020, a total of 2,786 refugees were relocated, 90% of them being women and children and over 780 identified with special needs.

Partners stepped-up the response and joint forces to assist in covering the basic needs of refugees. Despite COVID-19 restrictions, over 3,500 Refugees were registered with COR and over 2,700 received food assistance. A large number of refugees, over 2,700, also received specialized protection assistance and over 3,000 were reached with COVID-19 related messaging.

Moving forward, there is special need to improve the water available. In fact, CAR refugees have only 11 l/p/d, which is below the Sphere standard of 20 l/p/d. There is also a need to build more latrines, as currently refugees in average share one latrine between 22 individuals. Lack of sanitation, and particularly open defecation practices occur when not enough latrines are available and contribute to the spread of intestinal parasites and diarrhea, which in turn causes malnutrition.

<table>
<thead>
<tr>
<th>Protection</th>
<th># of refugees receiving specialized protection assistance</th>
<th>2,786</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td># of refugees biometrically registered by the mid-2020</td>
<td>5,801</td>
</tr>
<tr>
<td>COVID-19</td>
<td># of health consultations in health facilities accessed by refugees</td>
<td>5,169</td>
</tr>
<tr>
<td>Food Security</td>
<td># of refugees and host community reached with COVID-19 related messaging</td>
<td>3,018</td>
</tr>
<tr>
<td>WASH</td>
<td># of refugees receiving food assistance</td>
<td>2,742</td>
</tr>
<tr>
<td></td>
<td>Average # of liters of potable water available per person per day</td>
<td>11 L</td>
</tr>
<tr>
<td></td>
<td># of persons per toilet / latrine</td>
<td>22</td>
</tr>
</tbody>
</table>

CAR refugees living in Sudan as of June 2020, including 7,980 new arrivals until June 2020.

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CHADIAN REFUGEES

Displaced families in Tina town near the gathering point.
© UNHCR/MOHAMED ABUL MAJID
On 13 and 14 February, fighting erupted between different sub-groups of the Zaghawa tribe mainly in Tina town, Duguba and Iriba in Eastern Chad. Chadian refugees crossed the border to North Darfur, where partners mobilized food assistance, shelter and non-food items distributions as a first response. In addition to the new influx in 2020, over 3,000 Chadian refugees were already living in Um Shalaya camp in Azum locality, Central Darfur State.

During the reporting period, partners provided and delivered basic services to Chadian refugees such as registration, camp management, provision of monthly food rations, WASH activities, non-food items and shelter materials, as well as child protection, education, health, nutrition and livelihood activities.

Despite the efforts, Chadian refugees continue to have difficulties in accessing education, health and medicines, while inadequate number of latrines and access to potable water remains a challenge. In addition, there is the need for the provision of sanitary kits to women and girls of reproductive age and the need to rehabilitate schools to ensure the safety of children and teachers. An increase on the teachers’ incentives is also needed to ensure continuity on the provision of education to refugee children.

Lack of livelihood opportunities and income generating activities remain a serious gap in the refugee response. Lastly, there is also the need to strengthen peaceful co-existence committees formed by the refugee community, host communities and nomads, to reduce potential tensions and pave the way for dialogue towards sustainable peace.

3,505

Chadian refugees living in Sudan as of June 2020, including 13 new arrivals until June 2020.
South Sudanese refugees wash their hands as a preventive measure to stop the spread of COVID-19, before their biometric registration at Bileil camp, South Darfur.
© UNHCR/MODESTA NDUBI
CRP partners have observed only a relatively small number of refugees affected by COVID-19 up until the end of June 2020. The small outbreaks in refugee camps in Darfur and in an urban area in Khartoum were quickly identified and controlled by the Ministry of Health in partnership with CRP partners, including WHO. Thanks to fruitful coordination, refugees affected by the virus or in contact with a positive case were placed in isolation and had access to health services.

Overcrowding of camps and settlements remains a concern to inter-agency refugee partners. CRP partners have particularly focused on risk communication messaging, soap distribution, improved WASH access and identification of isolation centers. Business continuity plans were also set in place to ensure humanitarian aid continued to be delivered during the pandemic.

Despite the efforts to deliver humanitarian assistance by following strict COVID-19 protocols, some activities such as biometric registration were put on hold pending identification of a suitable solution. Depending on the level of preparedness, in most states registration continued at the household level at the onset of COVID-19, then moved to individual registration without biometrics. By mid-2020, solutions had been put in place and biometric registration with COVID-19 protection measures resumed. In the second half of 2020, it is expected to resume biometric registration with strict protocols in all refugee-hosting states.

**Coordination**

The RCF represents refugees in national COVID-19 coordination fora and leads the COVID-19 response for refugees, with the participation of WHO, UNHCR, UNICEF and over 40 other partners in all sectors. A CRP addendum was launched in September 2020 in alignment with the Humanitarian Response Plan (HRP) Addendum and the HCT-UNCT COVID-19 Country Preparedness and Response Plan (CPRP) which supported the Government of Sudan’s efforts in preparing and responding to the pandemic. An update to the South Sudanese segment of the appeal was also included in the Regional Refugee Response Plan (RRRP) for the

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SUDAN - COUNTRY REFUGEE RESPONSE PLAN | 2020 MID-YEAR REPORT
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