



SUDAN

COUNTRY REFUGEE
RESPONSE PLAN

January - December 2022



FRONT COVER PHOTOGRAPH:

Ethiopian refugee Tsebe Teka, 50, sits in her shelter in Um Rakuba refugee camp in eastern Sudan. High Commissioner for Refugees Filippo Grandi paid a one-day visit to the camp with Norway's International Development Minister, Dag-Inge Ulstein. ; Um Rakuba camp was reopened in November 2020 to accommodate Ethiopian refugees fleeing the Tigray conflict. The new arrivals arrived via the Lugdi and Hamdayet border crossing points. The refugees were relocated to Um Rakuba and another site, Tunaydbah.

© UNHCR/SAMUEL OTIENO



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<https://data2.unhcr.org/en/country/sdn>

or scan the QR code.

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925K

REFUGEES TARGETED IN 2022

231,235

ESTIMATED HOST
COMMUNITY BENEFICIARIES

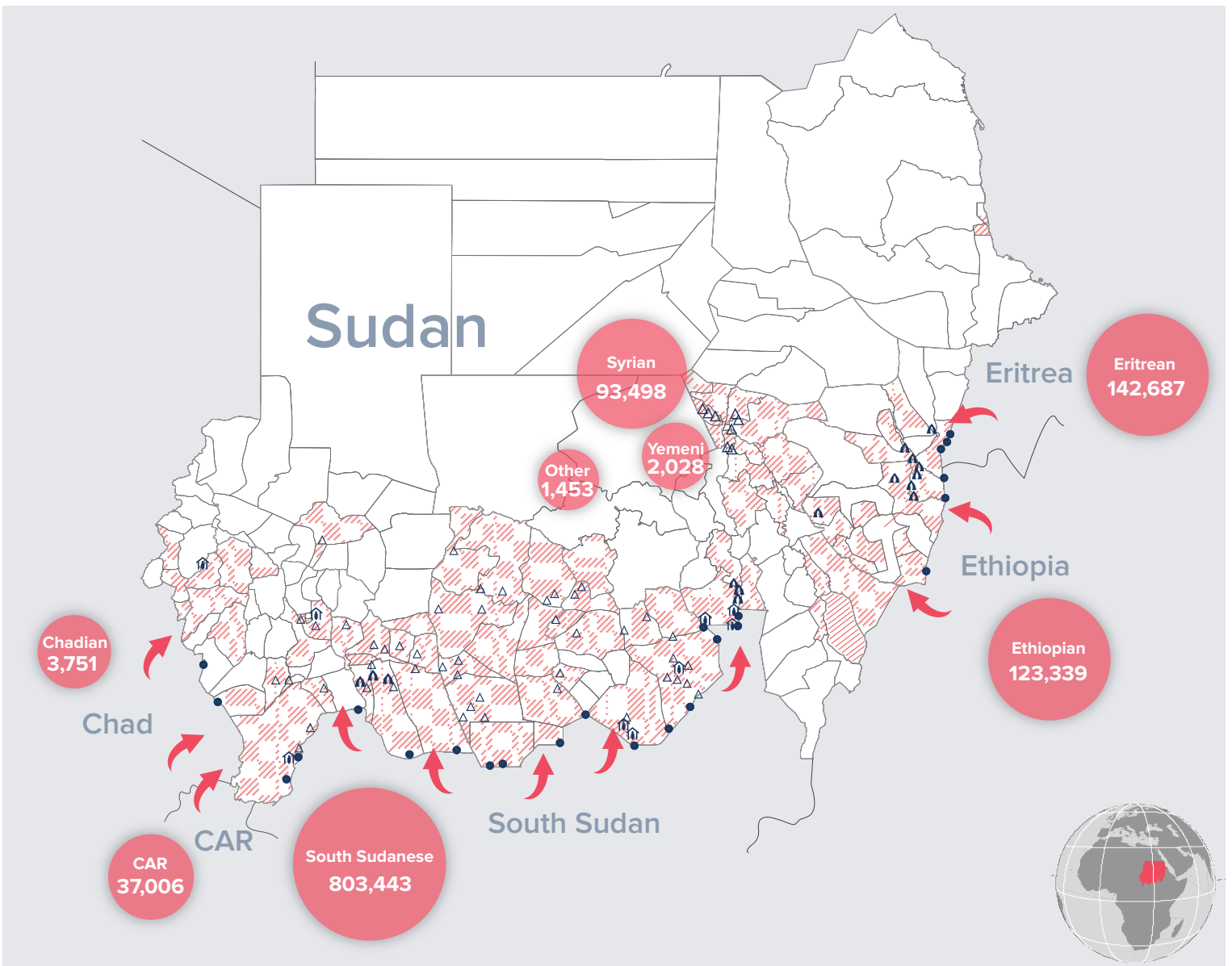
US\$ 517M

REQUIREMENTS
FOR 2022

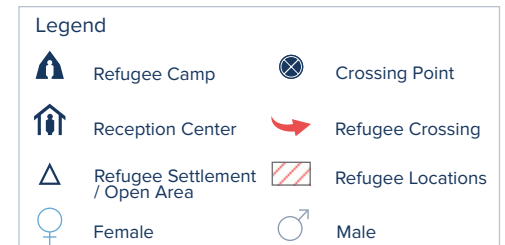
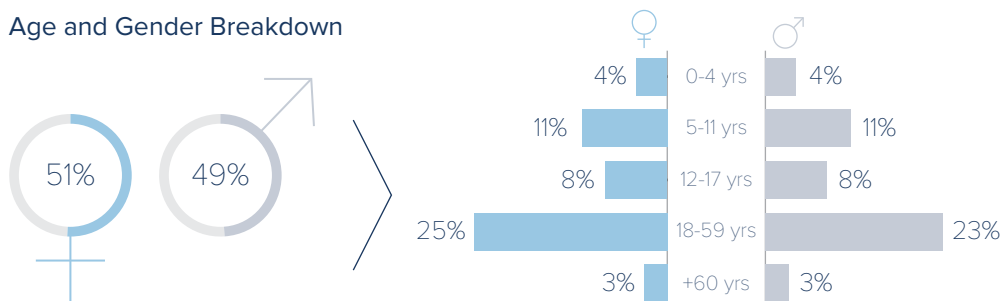
40

PARTNERS INVOLVED

Estimated total refugees in Sudan by the end of 2022



Age and Gender Breakdown



Population Trends 2019 – 2022



* Estimated Population

Funding Trends 2020 – 2022



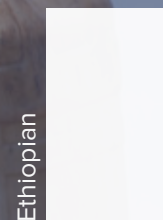
Requirements for 2022



\$286 M

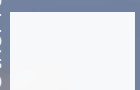


\$169 M



Other refugees

\$62 M



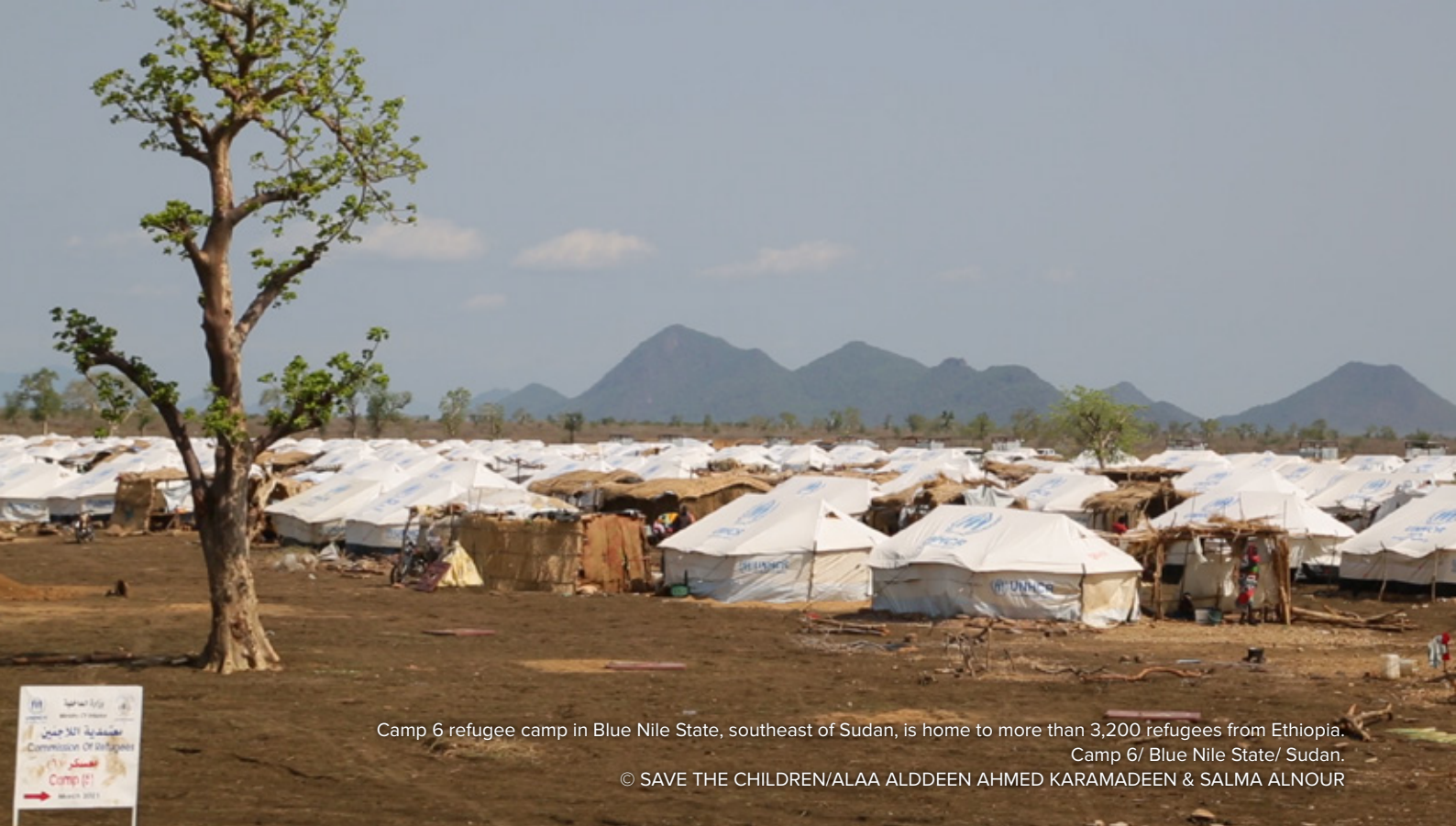
Refugee Population Trends



End of 2020
Estimated 2021
Projected 2022

A refugee girl fetching water from water tank in Kharsana where refugee shares water resource with host community. Kharsana/ West Kordofan State/ Sudan.

© UNHCR/DEEP RAJ UPRETY



Camp 6 refugee camp in Blue Nile State, southeast of Sudan, is home to more than 3,200 refugees from Ethiopia.

Camp 6/ Blue Nile State/ Sudan.

© SAVE THE CHILDREN/ALAA ALDDEEN AHMED KARMADEEN & SALMA ALNOUR

Overview

Sudan has a long history of hosting refugees and at the end of 2021 over 1.14 million refugees live in Sudan. Currently, Sudan is the second largest asylum country in Africa, hosting refugees and asylum-seekers from South Sudan, Eritrea, Ethiopia, Central African Republic (CAR), Chad, Syria, Yemen and other countries (such as Somalia and the Democratic Republic of Congo (DRC), including both protracted and newly displaced populations such as those who recently fled the conflict in the Northern region of Ethiopia. Sudan is also one of the main hosting countries for South Sudanese refugees, with over 800,000 persons in the country at the end of 2021. Refugee affairs are governed by the Government of Sudan (GoS) according to its Asylum (Organization) Act 2014.

Approximately 70 percent of Sudan's refugee population live outside of camps, amid local communities that are hosting refugees on their land in towns and villages. This includes refugees in urban areas and more than 100 settlements across the country, including large collective self-settlements where thousands of refugees live in "camp-like" areas adjacent to reception centres, as well as smaller dispersed settlements where refugees live integrated with host communities. Many out-of-camp settlements are in remote and underdeveloped areas, where resources, infrastructure and basic services are extremely limited. Moreover, areas in Darfur, South Kordofan, and Blue Nile which remain under control of armed opposition groups continue to face access restrictions, lack of basic services and challenges to the delivery of humanitarian assistance to forcibly displaced populations including refugees and asylum-seekers.

Sudan continues to be a country in political transition that increasingly supports durable solutions for forcibly displaced populations. This is evidenced by the GoS continued commitments on several fronts including the implementation of the Juba Peace Agreement (JPA), the nine pledges made during the Global Refugee Forum (GRF)¹

¹ For further information see: <https://reliefweb.int/report/sudan/global-refugee-forum-pledges-and-contributions-sudan>

and its chairmanship of Intergovernmental Authority on Development (IGAD) under which auspices the Government of Sudan and South Sudan are currently leading a comprehensive solutions initiative for forcibly displaced people populations including refugees, IDPs, returnees and host communities. It is noteworthy that the pledges made at the GRF reflect a commitment to an approach aligned with UNHCR's Comprehensive Refugee Response Framework (CRRF) through mainstreaming refugee health and education services into national systems and supporting self-reliance, access to employment and freedom of movement.

However, despite being at a critical crossroads in terms of potential for achieving durable solutions for forcibly displaced populations, Sudan has witnessed new displacement situations over the past two years. Since November 2020 the crisis in Ethiopia forced more than 59,000 Ethiopian refugees and asylum-seekers into Kassala, Gedaref and Blue Nile State. Furthermore, up to November 2021, some 75,000 South Sudanese have crossed into Sudan due to food insecurity and internal conflict while the situation in the CAR and Chad requires close monitoring with contingency plans in place to respond to any potential large refugee influxes.

Sudan is also a source, transit and destination country for mixed movements of refugees, asylum-seekers and migrants across the sub-region towards Europe (mainly through the Central Mediterranean route) and other destinations. In August 2021, the GoS launched its 2021 – 2023 National Action Plan (NAP) to Combat Human Trafficking to coordinate the efforts in the prevention of trafficking, and protection and assistance to victims of trafficking in Sudan.

The military takeover at the end of October 2021 has changed the political landscape in the country. Although improvements in international relations have been made over 2021 with the removal from the United States of America government's State Sponsor of Terrorism list in January 2021, future political developments remain fluid. It is likely that economic hardship and frequent public unrest and discontent will continue in 2022. The political uncertainty will also have an impact on the implementation of the GRF pledges and will likely cause delays in the implementation of solutions.

In addition to forced displacement, the country continues to face a number of other challenges. Although the GoS decided to float the exchange rate of the national currency, the Sudanese Pound, annual inflation reached over 400 percent in June 2021. Flooding during the rainy season destroys homes, infrastructure and agricultural land. Furthermore, the COVID-19 pandemic continues to overburden the national health system in Sudan. Overall, the economic crisis and resources constraints have further impacted public service delivery and increased the socio-economic vulnerability of forcibly displaced populations, including refugees and host communities in Sudan. Recent surveys have shown that refugees face higher levels of unemployment, reduced income and lower levels of education compared to host communities². The majority of refugees are hosted in some of the poorest regions of the country with a low level of public services and few economic opportunities. This situation disproportionately affects women and girls, who usually bear the brunt of adverse coping strategies.

¹ Basic Needs and Vulnerability Assessment, UNHCR, 2021

For most refugees voluntary return remains elusive due to the situation in their countries of origin. Resettlement opportunities are also limited, and it is anticipated that in 2022, more refugees from CAR, South Sudan, Eritrean and Ethiopia refugees will flee their country to seek asylum in Sudan. In this context, it is expected that over 1.2 million refugees will be living in Sudan by the end of 2022. Refugees in Sudan need multi-sectoral interventions to address their specific vulnerabilities, bolster their self-reliance over the long term, and access their rights as refugees. Investments in local infrastructure and strengthening of gender-sensitive education, health, nutrition and water, sanitation, and hygiene (WASH) services are also needed to ensure that local service systems have the capacity to absorb the increasing needs of refugees and host communities, and further strengthen social cohesion and peaceful coexistence so both communities can thrive.



Four-year-old Ethiopian refugee, Melat Gebralinet, sits with her family at Hamdayet border reception centre in Sudan, after fleeing the village of Faula. Hamdayet / Kassala State/ Sudan. © UNHCR/WILL SWANSON



Handwashing sensitization day with refugees in Um Rakuba refugee camp, Gedaref State.
Um Rakuba/ Gedaref State/ Sudan.
© COOPI/SILVIO QUAST

Population Groups

	ESTIMATED POPULATION AS OF END OF 2021	PLANNED POPULATION AS OF END OF 2022
REFUGEE POPULATION		
South Sudanese ³	801,014	803,443
Eritrean	135,356	142,687
Syrian	93,498	93,498
Central African Rep. (CAR)	32,057	37,006
Ethiopian	71,339	123,339
Chadian	4,612	3,751
Yemeni	1,983	2,028
Other	1,454	1,453
TOTAL	1,141,313	1,207,205

Note: Verification exercise is ongoing and figures might be subject to changes.

³ Total number of refugees is the sum of UNHCR/ Commissioner of Refugees (COR) registered population and the Immigration Passport Police (IPP) registered & unregistered refugees. Government sources estimate a total of 1.3 million South Sudanese refugees in Sudan; however, these data require verification.

Persons with Disabilities

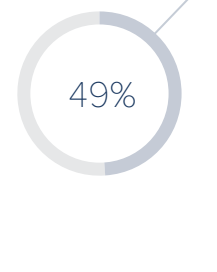
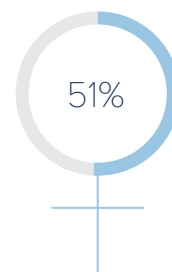
(% of total 925 k)



9% Women and Girls



6% Men and Boys

**DISAGGREGATED DATA OF PLANNED ASSISTED REFUGEE POPULATION (% OF TOTAL 925K)**

AGE GROUP	♀ FEMALE	♂ MALE	TOTAL
0-4 years	4.24%	4.40%	8.64%
5-11 years	11.06%	11.33%	22.39%
12-17 years	7.71%	7.83%	15.54%
18-24 years	7.01%	7.43%	14.44%
25-49 years	15.02%	13.34%	28.36%
50-59 years	2.54%	2.46%	5.00%
60-69 years	1.60%	1.40%	3.00%
70-79 years	1.20%	0.80%	2.00%
80+ years	0.28%	0.35%	0.63%
TOTAL	50.66%	49.34%	100%

Notes:

1. Use sex, age, and disability-disaggregated data (SADD) (at minimum) to inform programme design, monitoring, results measurement and in reporting. SADD must be both collected and analysed to inform programming. SADD is critical to gender analysis and contributes to the promotion of gender equality and the inclusion of persons with disabilities. SADD is in line with UNHCR's RBM standards and the IASC Guidelines, Inclusion of Persons with Disabilities in Humanitarian Action, 2019 and the Sphere Humanitarian Inclusion Standards for people with disabilities and older people
2. Persons with disabilities make up an estimated 15% of any population, with higher numbers expected in situations of forced displacement. In needs analysis, recognize that data, including from proGres, will often significantly under identify persons with disabilities. Therefore, use the global estimate of 15% in the absence of more accurate quantitative data. This is standard practice across all HRP and RRP.
3. For planning purposes, it can be estimated that 15% of the population have a disability. It is recommended to use a gender breakdown in estimates, as the prevalence of disability is higher among women (19.2%) than men (12%).

Sources: WHO World Report on Disability (who.int)

Empowering and including women and girls with disabilities | UN Women – Headquarters



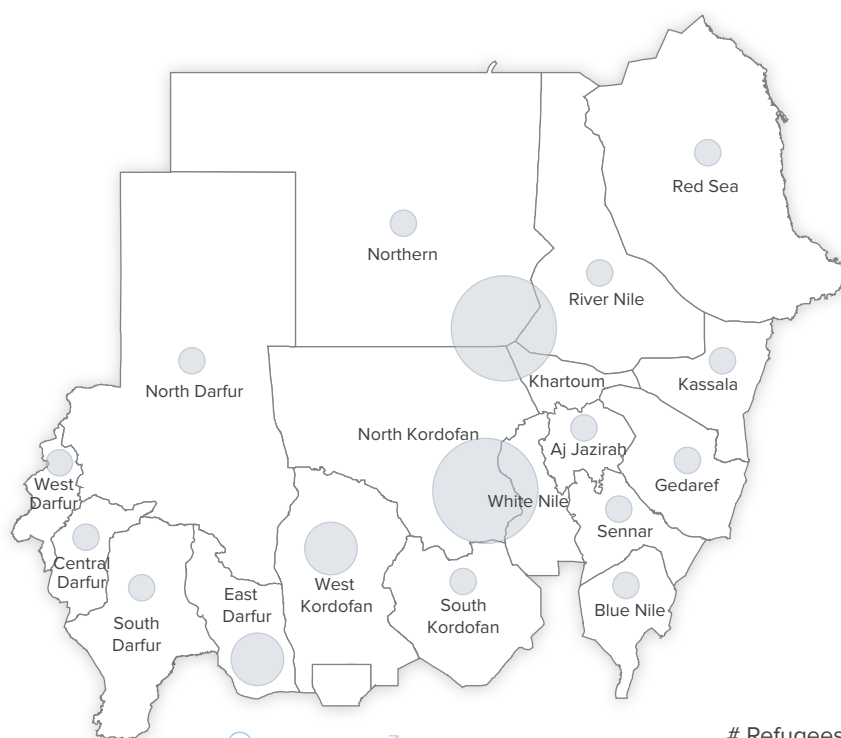
An Ethiopian refugee woman takes home a kitchen set she received from UNHCR in Um Rakuba camp
Um Rakuba/ Gedaref State/ Sudan.
© UNHCR/OTIENO SAMUEL

Refugee from South Sudan

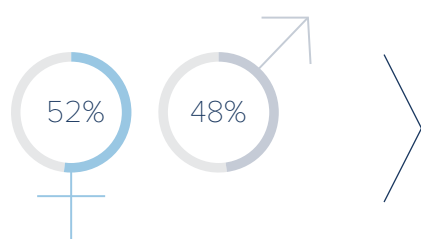


801,014

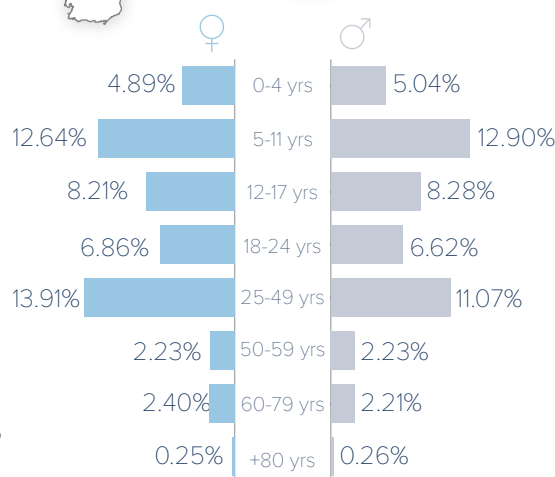
Estimated Population as of end of 2021



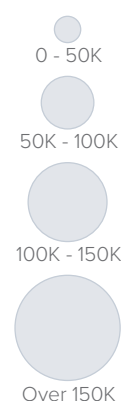
Age and Gender Breakdown



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.



Refugees Per State



In 2022, South Sudanese will continue to form the largest group of refugees in Sudan with Khartoum and White Nile states hosting the highest numbers of refugees. There are 14 official entry points where refugees cross into Sudan. Only 63 percent of the South Sudanese refugees in Sudan are individually registered with an additional 7 percent registered on household level. Around 52 percent of the population are female, 38 percent are of school age children (6-17), and 54 percent are female-headed households.

The GoS has maintained an open border policy, allowing safe and unrestricted access to its territory for those fleeing conflict and conflict-related food insecurity in South Sudan. New arrivals are granted refugee status on a group basis,

as per the Memorandum of Understanding (MOU) signed between UNHCR and the GoS's Commission for Refugees (COR) in September 2016. From January up to November 2021, more than 75,000 South Sudanese have crossed into Sudan which was the highest number of arrivals since 2017. Interviews with those new arrivals confirmed that inter-ethnic conflicts combined with flooding, food insecurity and lack of economic opportunities are the predominant reasons to flee to Sudan. The states with the highest influxes are White Nile and East Darfur.

Approximately 30 percent of the current South Sudanese refugee populations are living in 11 official camps in White Nile (9) and East Darfur (2) with additional numbers living in camp-like settlements adjacent to host communities, including the open areas in Khartoum. An estimated 113,000 refugees live in the open areas in Khartoum. Despite renewed access to the population since December 2017 their situation remains dire with high humanitarian needs. Many refugee communities have lived for decades in these areas, some of whom may be eligible to Sudanese nationality under the country's Nationality Act 1994 (amended in 2011 and 2018), and have demonstrated considerable resilience in the face of a significant lack of protection and humanitarian assistance over years.

Due to the high numbers arriving in 2021, camps are overcrowded and service provision is overstretched. Outside of camps South Sudanese refugees live either in urban areas, often in state capitals including Kosti, White Nile and Khartoum or in out-of-camp settlements located in remote and underdeveloped areas, where resources, infrastructure and basic services are extremely limited. Sudan's rainy season (June to September) makes access in many areas extremely difficult, with many camp and out-of-camp areas completely inaccessible for weeks and months at a time.

Under the IGAD sponsorship, the governments of Sudan and South Sudan are leading a comprehensive solutions initiative for displacement affected populations including refugees, IDPs, returnees and host communities in these two countries. It provides a roadmap outlining the next steps toward short, medium and sustainable solutions for seven million forcibly displaced persons, including IDPs and refugees originating from and hosted by the two host countries as well as returnees.



South Sudanese refugees in Pan Jadid Site, El Fasher, North Darfur State, are accessing a grinding mill which was handed over by UNHCR in partnership with AHA. This mill was suggested by refugees as an income generating activity for the community and their hosts. El Fasher/ North Darfur State/ Sudan. © UNHCR/MODESTA NDUBI

Refugees From Eritrea

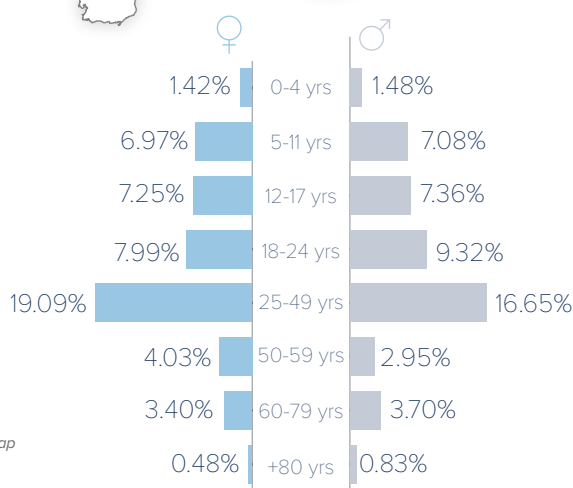
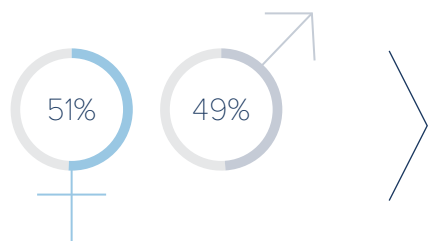


135,356

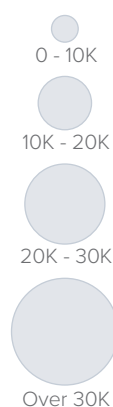
Estimated Population as of end of 2021



Age and Gender Breakdown



Refugees Per State



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East Sudan hosts one of the most protracted refugee situations in the world with the first Eritrean refugees arriving over 50 years ago, and approximately 50% of those living in camps have been born there. By the end of 2022, it is projected that over 135,000 Eritrean refugees will be living in nine camps in Kassala and Gedaref, and parts of Kassala town and Khartoum.

Over the period from 2018 to 2020, on average 6,443 new Eritrean refugees crossed into Sudan every year and between January-November 2021, almost 6,000 have arrived, suggesting a continuation of the trend from previous years. As the conflict in Ethiopia continues, increasing arrivals of Eritrean refugees from the refugee camps in Ethiopia remain a possibility. Asylum-seekers are assisted by COR at the Sudanese border where they are temporarily housed in reception centers, before being transferred to the Shagarab camps where they undergo health and nutrition screening, security screening, registration, and individual Refugee Status Determination (RSD) procedures (the recognition rate is almost 99%), while receiving life-saving services and shelter.

An estimated 50% of the new arrivals in the Shagarab camps reportedly migrate onwards, becoming vulnerable to criminal networks involved in human smuggling and trafficking of people. Along these migratory routes, refugees and asylum-seekers can be exposed to various forms of exploitation and human rights abuses, including GBV. Moreover, onward movement puts refugees at risk of refoulement. Unaccompanied and Separated Children traveling in mixed flows along these dangerous routes are exposed to heightened risks.



Patients queue to access health services at the Um Rakuba Camp Clinic and Nutrition center.
Um Rakuba/ Gedaref State/ Sudan.
© UNHCR/OTIENO SAMUEL

Refugees From Ethiopia



71,339

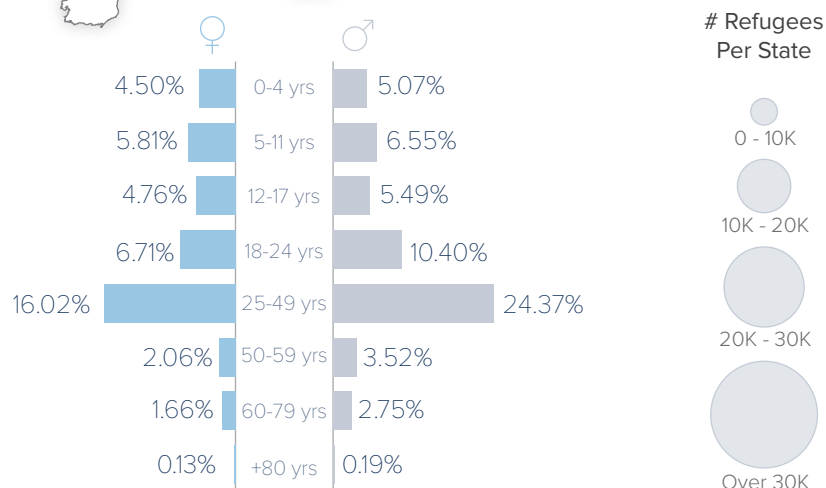
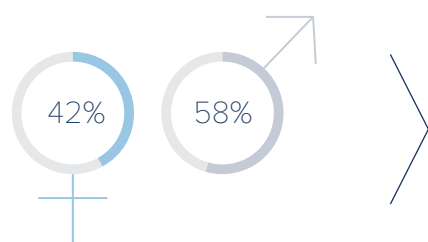
Estimated Population as of end of 2021

59,014

Total Ethiopian new arrivals by the end of November 2021.



Age and Gender Breakdown



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After conflict broke out in the Tigray region in Northern Ethiopia in November 2020, refugees started to arrive at the transit centre in Hamdayet, Kassala and Lugdi border point in Gedaref before moving onwards to Village 8. Additionally, asylum-seekers from Ethiopia's Benishangul-Gumuz region started to arrive in Sudan's Blue Nile state, and some 2,300 individuals from the Qemant ethnicity in Amhara region newly crossed into Basunda, Gedaref state. By November 2021 over 59,000 refugees and asylum-seekers have arrived in Sudan due to the violence in Ethiopia. Those of Tigrayan ethnicity who fled the conflict are granted refugee status on a group basis as per the Declaration made by COR in December 2020, but this practice does not apply to Ethiopians of other ethnicities. 61 percent of the population are male, and 21 percent are school aged children (6-17). Out of the 71,339 Ethiopian refugees and

asylum-seekers in Sudan at the end of 2021 13,130 individuals arrived before November 2020. RCF partners plan with 52,000 arrivals in 2022.

Partners in the refugee response continue to provide services at the three refugee sites in Gedaref: Um Rakuba, Tunaydbah and Babikri, and at one site in Blue Nile: Village/Camp 6. Further, basic services are provided at the transit centre in Hamdayet, Kassala and the border points in Village 8 and Basunda in Gedaref. The majority of Tigrayan refugees are hosted in Um Rakuba and Tunaydbah amounting to over 38,000 individuals living in both sites, meanwhile, over 2,700 individuals are hosted in Village/Camp 6. In November 2021 a new site has been established in Babikri, Gedaref state where arrivals from the Quemant tribe are hosted.

CRP partners have assessed additional sites in Eastern Sudan to be prepared for additional arrivals and Ethiopians of non-Tigrayan ethnicity. To ensure the civilian character of asylum and to provide safety and security, the priority remains the voluntary relocation of arriving refugees and asylum-seekers away from the border within 72 hours. In accordance with the humanitarian imperative, life-saving services for the populations present at the border points will continue to be provided.



UNHCR staff conduct biometric verification of refugees at the UNHCR distribution centre in Um Rakuba camp. Verified refugees are provided with Core Relief Items including buckets, soap and sanitary kits. Um Rakuba/ Gedaref State/ Sudan. © UNHCR/OTIENO SAMUEL

Refugees from the Central African Republic

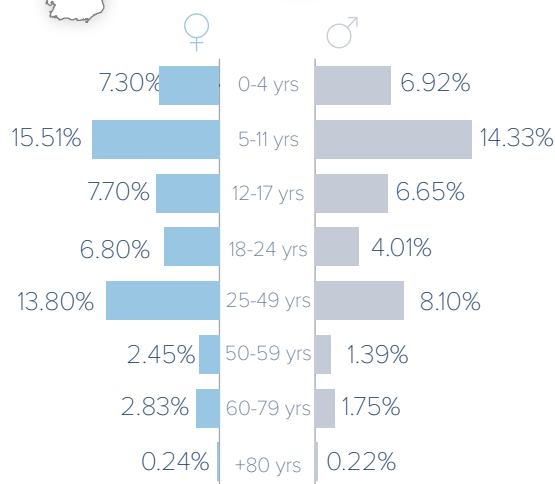
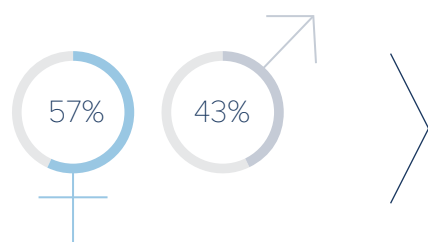


32,057

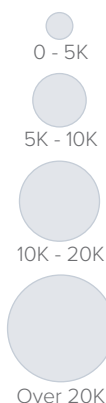
Estimated Population as of end of 2021



Age and Gender Breakdown



Refugees Per State



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The majority of refugees from the Central African Republic (CAR) arrived in 2019 after inter-tribal violence in CAR. By the end of 2022, it is projected that over 37,000 CAR refugees will be living in Sudan, mostly in South and Central Darfur. After violence erupted again following contested elections in CAR at the end of 2020 with refugees fleeing to Chad, Cameroon and the Democratic Republic of Congo (DRC), CRP partners prepared an inter-agency contingency plan and developed emergency preparedness measures. In the end, only 560 CAR refugees arrived in Sudan until November 2021.

The majority of some 27,000 refugees from CAR are hosted in the settlements of Um Dafoug and Al Amal (Al Mashagah) in South Darfur and Um Dukhun settlement in Central Darfur. Basic services are provided in those settlements that need to be sustained and increased.

Refugees from Chad

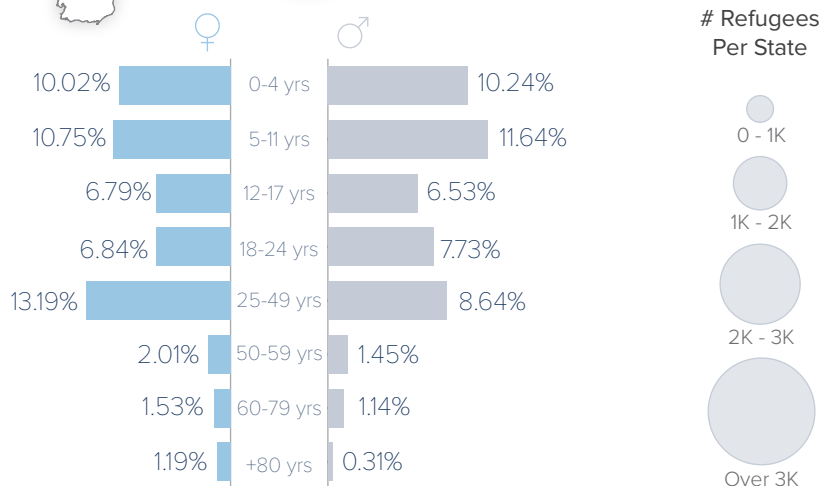
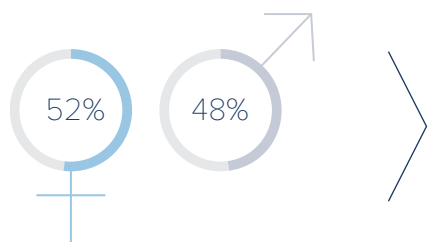


4,612

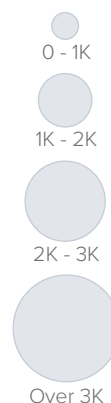
Estimated Population as of end of 2021



Age and Gender Breakdown



Refugees Per State



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Central Darfur has been hosting Chadian refugees since violence broke out in 2005 – 2007. An organized return process for Chadian refugees began in 2018 under the Tripartite Agreement on Voluntary Repatriation between Sudan, Chad and UNHCR. Until November 2021, a total of 3,934 Chadian refugees were still living in Sudan, the majority in Central Darfur, Um Shalaya camp.

The volatile situation in Chad impacts the return process. After the death of President Idriss Déby Into on 20 April 2021, CRP partners prepared a contingency plan for a potential influx. Up to December 2021, no significant influx has occurred. Partners monitor the situation and adjust the preparedness measures as needed. Depending on the developments in Chad, it is expected that most Chadian refugees will voluntarily return to Chad.

Refugees from Arab Countries



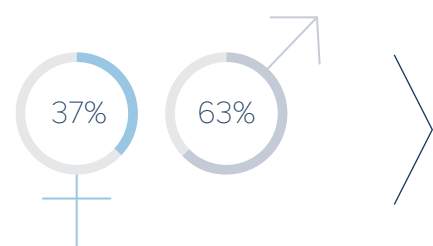
93,498

Syrian Refugees Estimated
Population as of end of 2021

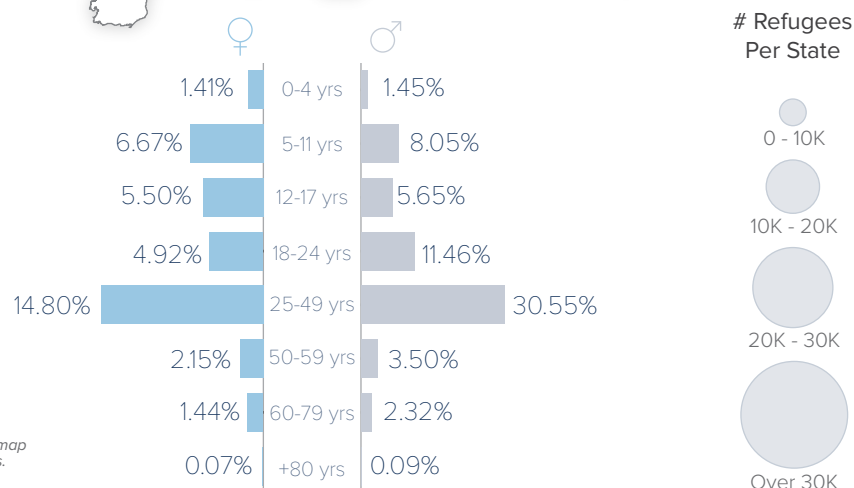
1,983

Yemeni Refugees Estimated
Population as of end of 2021

Age and Gender Breakdown



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



There are an estimated 93,000 Syrian and 2,000 Yemeni refugees living in Sudan, the majority of whom are settled in Khartoum. As Arab nationals do not have access to the national asylum procedure in Sudan these groups are not registered as asylum-seekers or refugees. Under this policy, they used to be granted almost the same treatment as Sudanese nationals except for political rights. However, recent political changes have cast uncertainty regarding their rights in Sudan, and this policy change has created a vulnerable situation with legal uncertainty regarding their status in Sudan.

Host Communities

Host communities are often the first responders to refugees arriving in Sudan. This was evident when members of the host community of Hamdayet offered food and shelter when the first Ethiopian refugees arrived from Tigray in November 2020. Often, those host communities live in remote areas where basic services are lacking and natural disasters, such as floods, affecting people each year. Host communities are also impacted by the deteriorating economic situation in Sudan and suffer from increasing prices, worsening food insecurity, worsening health care and lack of access to other basic services in Sudan.

Communities hosting or living alongside refugees can benefit substantially from investments in local infrastructure and services when these are enhanced to accommodate refugees' humanitarian needs. The increase in trade and services can stimulate the local economy and agricultural productivity. The Sudan CRP advocates for increased support to host communities, particularly in rural settlements and in urban areas where CRP partners include host communities in their interventions.



High Commissioner for Refugees Filippo Grandi paid a one-day visit to Um Rakuba refugee camp in eastern Sudan with Norway's International Development Minister, Dag-Inge Ulstein. They met camp officials and spoke to refugees' representatives. ; Um Rakuba camp was reopened in November 2020 to accommodate Ethiopian refugees fleeing the Tigray conflict. The new arrivals arrived via the Lugdi and Hamdayet border crossing points. The refugees were relocated to Um Rakuba and another site, Tunaydbah. Um Rakuba hosts more than 8,000 refugees.

Um Rakuba/ Gedaref State/ Sudan.

© UNHCR/OTIENO SAMUEL

Needs Analysis and Response Prioritization

In 2021, UNHCR commissioned a Basic Needs and Vulnerability Assessment (BANVA) to update its information on refugee vulnerabilities in Sudan. The exercise analyses multisectoral refugee vulnerabilities and allows for a comparison on state level. The BANVA is aligned with the Multisectoral Needs Assessment (MSNA) that is carried out by UNOCHA to inform the Humanitarian Needs Overview (HNO). Furthermore, UNHCR in cooperation with CRP partners conducts an annual Participatory Assessment that incorporates age, gender and diversity considerations and uses Focus Group Discussions and Key Informant Interviews to assess protection needs in Sudan. These countrywide assessments are complemented with sectoral assessments by CRP partners, which form the basis of the sectoral needs' analysis and response prioritization.

The BANVA developed a Basic Needs Vulnerability Indicator (BVI) to inform vulnerability profiling of refugees. The BVI is the average of eight sector vulnerability indicators, with inputs encompassing unmet needs, as well as indicators of vulnerability. Each indicator was based on the average of a set of sub-indicators derived from questions within the survey.

The findings of the BANVA indicate that most refugees in Sudan suffer from moderate to high essential needs vulnerability and experience greater vulnerability than their host communities. In Kassala, White Nile, and West Kordofan, however, refugees and host communities exhibit similar levels of vulnerability. Furthermore, refugees in camps and camp-like situations have higher essential needs, especially in Blue Nile, and North and South Darfur.



Young Ethiopian refugee girls walk home from a distribution centre in Um Rakuba refugee camp
Um Rakuba/ Gedaref State/ Sudan.
© UNHCR/OTIENO SAMUEL

People in Need (PiN) Calculation and Severity Ranking

The inter-agency Refugee Consultation Forum (RCF) has developed a severity ranking to identify the localities in Sudan that have a high level of needs for refugees and should therefore be prioritized in the response. This ranking is based on multisectoral indicators that measure the severity of needs across all refugee hosting localities. The severity ranking approach is aligned with the Humanitarian Needs Overview (HNO) planning process and intends to identify needs, response gaps and priorities to inform response planning and resource allocation. Within the CRP, lifesaving and life sustaining indicators were used to define the severity of needs through a combination of 19 sectoral indicators that can be found in Annex 3.

The severity of needs ranking was based on UNHCR's refugee population projection for December 2021 and a sectoral assessment data to categorize each refugee hosting locality into a severity ranking from very low to very high needs. Key trends from the severity analysis include:

Severity level 5 or **"SEVERE"** needs

This category includes locations with high severities of needs and refugees that are highly reliant on humanitarian assistance that needs to be sustained and/or scaled up to accommodate increasing numbers of people. This includes underserved camps, reception points and parts of the Khartoum "Open Areas" that have established multi-sectoral responses for the continued severe needs.

Severity level 4 or **"VERY HIGH"** needs

Locations have typically critical needs in nutrition and food security, poor infrastructure, and protection gaps. These locations have an ongoing multi-sectoral response that relies on humanitarian assistance.

Severity level 3 or **"HIGH"** needs

This category includes locations with high needs in protracted situations with an established response, urban areas and rural settlements hosting dispersed populations.

Severity level 1 and 2 or **"LOW"** and **"MEDIUM"** needs

This includes localities with no active refugee response and with a very low number of registered refugees who live among host communities.

Prioritization and Response Targeting

The 2022 Sudan CRP will target 51 localities covering 12 states. The prioritization considers the needs severity level of at least 3 or above with at least one individual sectoral severity of 4 or higher. Further prioritization was done according to the response capacities of partners on the ground as well as the ability to initiate new responses where needed. The target population of the 2022 CRP is 925,000.

All prioritized localities are targeted with a multisectoral approach that responds to the identified needs of the refugee population. Refugee camps and large camp-like settlements are prioritized due to refugees' reliance on humanitarian assistance and the need to sustain basic services. Reception points are prioritized to respond to new arrivals with high needs and to ensure that emergency response capacities are in place in case of an influx. Assistance is targeted at the community and individual level. Refugees in urban areas are targeted for assistance based on assessed needs, particularly in the "Open Areas" around Khartoum. Rural settlements are further prioritized due to poor infrastructure and urgent needs for protection assistance. As interventions target both refugees and host communities, partners will follow humanitarian standards and include both populations in their planning to promote social cohesion.

The prioritization of locations is led by the Refugee Consultation Forum (RCF) in collaboration with Commission for Refugees (COR) and CRP partners. A detailed list of the prioritized localities is outlined in Annex 4. Refugees and asylum-seekers who are not living in prioritized areas will still have access to registration and other provisions under the Sudanese refugee law.



Ethiopian asylum-seeker in Camp 6, Blue Nile State. Camp 6 refugee camp, southeast of Sudan, is home to more than 3,200 refugees from Ethiopia.

Camp 6/ Blue Nile State/ Sudan.

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1,207,204

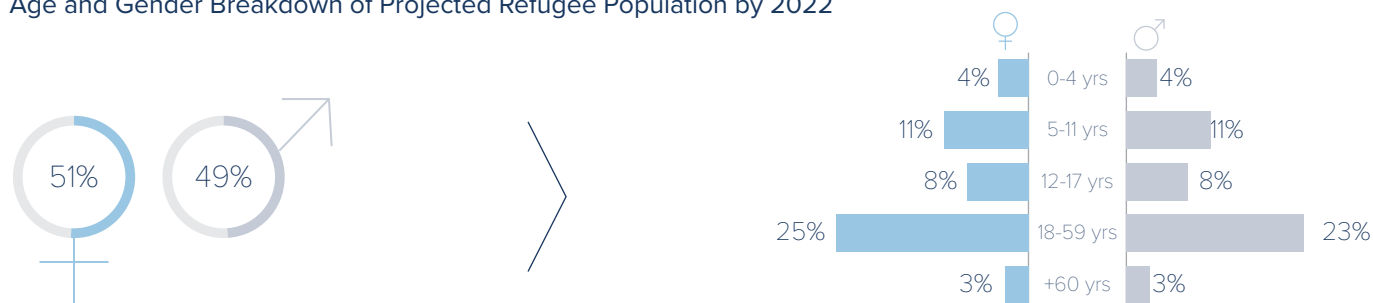
Planned Population as of end of 2022



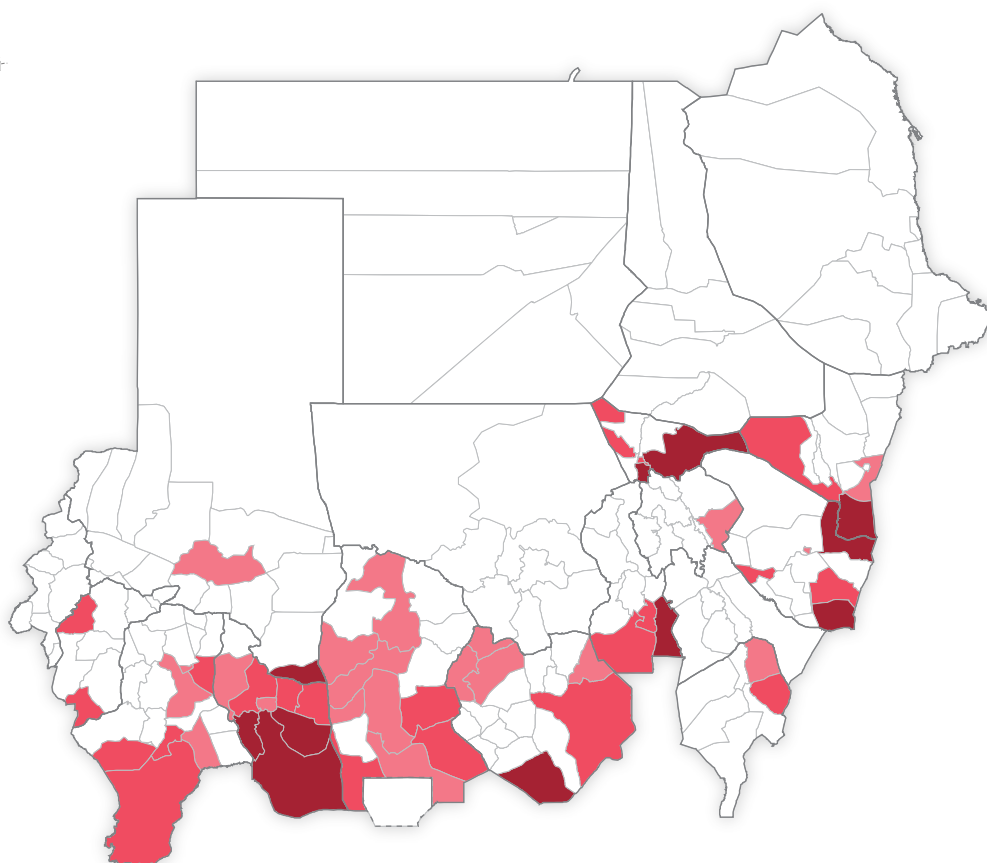
924,939

People targeted in 2022

Age and Gender Breakdown of Projected Refugee Population by 2022



Prioritization Map



"Severe"
Level 5

"Very High"
Level 4

"High"
Level 3

Severity Needs Scale

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.

Response Strategy and Priorities

Overall Strategy

The refugee response in 2022 continues to focus on the three areas of strengthening the protection environment, providing protection and assistance, and improving opportunities for resilience. In this approach, the 2022 refugee response is aligned with the wider humanitarian response in Sudan as laid out in the Humanitarian Response Plan (HRP). The three strategic objectives of the 2022 refugee response in Sudan are:

- 1. Strengthen the protection environment for refugees;**
- 2. Enable access to timely protection and lifesaving assistance;**
- 3. Provide equitable access to basic services for refugees and strengthen opportunities for resilience and self-reliance while finding lasting solutions for refugees.**

The refugee response in Sudan is closely aligned with the regional refugee response to the South Sudan crisis and integrated into the humanitarian response in Sudan. Additionally, the 2030 Sustainable Development Agenda as well as the commitments made by Sudan at the Global Refugee Forum guide the strategic direction of the Refugee Response. While the Government of Sudan has yet to fully implement the pledges, partners of the RCF have welcomed the continuous commitment of the Sudanese Government to maintain an open border policy and will continue to support efforts to integrate refugees in social service systems, such as education and health. Furthermore, the response will seek solutions to promote self-reliance and generate work opportunities through the implementation of the Sudan CRP. While Sudan is not officially implementing the Comprehensive Refugee Response Framework (CRRF), the out-of-camp assistance model in Sudan follows the same approach in supporting national service providers and host communities to meet the additional demand on services in refugee hosting areas. This avoids setting up new parallel services for refugees and prioritizes enhanced access to public services where possible. Additionally, this includes a focus on community-based assistance, especially for Health, WASH, Education and Protection, through the construction of basic infrastructure and improved access to local services for refugees. RCF partners are also active participants in the United Nations Sustainable Development Cooperation Framework (UNSDCF) for Sudan, which features development activities across sectors such as social services, governance, community mobilization among others. The RCF will continue to strategically engage through UNSDCF to ensure that the development needs of refugees and host communities can be addressed in alignment with national development priorities.

SUDAN PLEDGES AT THE GLOBAL REFUGEE FORUM

Continue to maintain and implement an open-door policy for refugees

1

Develop solutions for the root causes of forced displacement

2

Create and enhance an enabling environment for return of refugees and IDPs and facilitate their reintegration

3

Integrate refugee education in national education system in gradual manner

4

Integrate health services for refugees in National Health System in a gradual manner

5

Adopt self-reliance policy for refugees and host communities

6

Facilitate humanitarian access to affected people

7

Facilitate movement for refugees

8

Facilitate work for refugees

9

Refugees, from Ethiopia, sit under a shade near the WFP food distribution centre to protect themselves from the scorching sun after receiving their food rations from the World Food Programme
Um Rakuba/ Gedaref State/ Sudan.
© UNHCR/OTIENO SAMUEL

The response strategy aligns with the key priorities and solutions raised by targeted refugee populations through UNHCR's annual Participatory Assessment exercise, as well as the outcomes of inter-agency needs assessments in specific refugee locations, which include multi-sectoral assessments and technical surveys, such as the Standardised Expanded Nutrition Survey (SENS), Joint Assessment Missions (JAM), and Knowledge, Attitudes and Practices (KAP) Surveys. The BANVA report, published in September 2021 provided a current analysis of existing vulnerabilities among the refugee populations. The response strategy aims to ensure that the protection and humanitarian needs of refugees and asylum-seekers are addressed, while promoting solutions through local integration in Sudan, resettlement, and complementary pathways to third countries, and voluntary repatriation to countries of origin where possible.

Advocacy to improve refugees' freedom of movement, access to labour markets, land and properties supports these aims, as does partners' work to strengthen public service systems such as education and health to enhance refugees' access to basic services in out-of-camp and urban locations. Timely delivery of protection services, including access to registration, documentation and reception services will bolster refugees' access to realizing their fundamental human rights, including access to lifesaving assistance. Capacity building and sensitization initiatives with local authorities, host communities and service providers will be used to address discrimination and social cohesion issues.

In camps, individual and household-level assistance will continue to be provided to address ongoing needs in Protection (including GBV and Child Protection), Shelter, Core Relief Items (CRIs), Energy, Food Security, Nutrition, Health, WASH and Livelihoods. I/NGO partners will play an indispensable part to ensure a quality and speedy delivery of services. CRP partners will continue to work with COR, and with relevant line ministries, to ensure the sustainability of interventions. This includes greater participation by refugees in camp management, shelter and latrine construction, protection and security functions within their communities, community mobilization and service delivery. The overall strategy of receiving new arrivals at transit centres and relocating them within 72 hours to reception centres adjacent to camp sites remains in place.

The response will also seek to integrate cash-based interventions (CBIs) across all locations where feasible to support stabilization of existing assistance programmes and complement self-reliance initiatives, which will be scaled up. This is especially important for refugees, particularly those with specific needs living in urban areas, where they often form part of the "urban poor" with limited access to social safety nets and struggle to meet their basic needs. This situation leaves them at heightened risk of harassment, exploitation and abuse, with women and children being particularly at-risk. Partners will work closely with the cash technical working group to ensure harmonized approaches and assistance levels.

To enhance sustainability of service provision particularly in the WASH, Health and Energy sectors, partners will invest in sustainable energy sources, particularly solar energy, and energy efficient stoves to reduce the environmental footprint. This will reduce the dependency on an unreliable supply of wood as cooking fuel and mitigate protection risks coming from a lack of lighting and the need to travel long distances to collect firewood.

Despite progress of the transitional government of Sudan in negotiating peace with several armed groups across the country, the situation in Sudan's neighbouring countries has remained unstable. CRP partners will develop and update emergency preparedness and response plans for potential large refugee influxes to enhance response capacities.

CRP partners commit to ensure that responses engage beneficiaries in programme design and implementation by following an age, gender and diversity mainstreaming approach including persons living with disabilities. Communication with Communities (CwC) will be strengthened to inform refugees and asylum-seekers of their rights and obligations, as well as services available to them. Feedback and response mechanisms will be established for refugees and asylum-seekers as well as affected host communities to improve the quality of programming and services that partners provide. In addition, CRP partners will inform beneficiaries on how their feedback has been utilized through community-based networks. Special efforts will be made to strengthen Prevention of Sexual Exploitation and Abuse (PSEA) to protect both beneficiaries and staff members through prevention interventions such as trainings, community engagement, establishing and strengthening confidential feedback and complaint channels, and lastly ensuring that the referral mechanism for survivors' support is functioning.

Strengthening Livelihoods and Resilience

Effective livelihood support to refugees in Sudan remains hampered by the economic downturn, movement restrictions and access to work permits, as well as the large informal economy that is not fully regulated or protected by the GoS. Despite these challenges, partners will look at innovative interventions to increase refugees' self-reliance and resilience by promoting economic inclusion, employability, and income generation opportunities, while moving towards more sustainable interventions. Assistance will focus on agricultural inputs and extension services, as well as capacity development, such as vocational training to increase employability. By investing in refugees' self-reliance, local markets will be supported by benefitting from increased economic activities. This is in line with the GoS's commitments at the 2019 Global Refugee Forum which aims to enhance the integration of refugees into national education and health systems, support self-reliance of refugees, as well as facilitate the right to work and freedom of movement for refugees.



Refugee birth registration and birth certificate issuance at Dinka camp, North Darfur State.
Dinka/ North Darfur State/ Sudan.
© UNHCR/MODESTA NDUBI

Partnership and Coordination

The purpose of the Sudan CRP is to provide strategic guidance and coordination to the Refugee Response in Sudan under the co-leadership of UNHCR and COR. It provides a platform for facilitating partnerships that combine and leverage resources by working together in a transparent, respectful and mutually beneficial way and according to the principles of partnership of the Global Humanitarian Platform. The UNHCR Refugee Coordination Model (RCM) is implemented in Sudan alongside the coordination of the response to IDPs and other vulnerable populations under the Humanitarian Coordinator⁴.

On country level, the Refugee Consultation Forum (RCF) provides a coordination platform that brings together national, international non-governmental organization and UN agencies. Chaired by COR and UNHCR, the RCF leads the refugee response on a strategic level and seeks complementarities among the expertise of all members. The RCF is supported at the national level by the Protection Technical Advisory Group (TAG) to ensure that the specific protection concerns of refugees in Sudan are adequately integrated in the national refugee response strategy as laid out in the CRP. Coordination with the authorities continues to take place at federal and state levels, with extensive support from COR. Government line ministries also engage in sector-level coordination mechanisms at the national and state levels.

State level Refugee Working Groups (RWG) are established in refugee hosting states to lead the operational response. RWGs have been established in Khartoum, Kassala, Gedaref, Blue Nile, White Nile, South and West Kordofan and Central, East, South and North Darfur. CRP partners work in seven sectors: Protection, Education, Health & Nutrition, Shelter and Non-Food Items, Food Security & Livelihoods, Energy & Environment, and WASH.

Except for protection, the sectoral coordination of the refugee response works in close cooperation with the IASC coordination structure. Efforts are ongoing to formalize the interaction between both structures to improve efficiency, reap synergies and harmonize processes between both coordination structures under UNHCR's leadership role in the Refugee Response.

In 2014, Sudan promulgated the Counter Human Trafficking Act (CHTA). Under this law, the National Committee for Combating Human Trafficking (NCCT) was established as the highest authority for combating and addressing the causes of human trafficking. The NCCT is composed of members from all relevant government ministries and bodies. Mixed migration and counter trafficking responses are coordinated through the State Committee on Counter-trafficking (CCT) in Kassala, chaired by Kassala Ministry of Social Welfare and supported by UNHCR, and the East Sudan Mixed-Migration Working Group.

The CRP supports Sudan's pledges at the GRF and engages with development actors to ensure that development interventions include refugees and host communities where appropriate and possible. The refugee response also involves relevant donors and development partners to further build political, financial, and technical support for the

⁴ <https://www.unhcr.org/53679e679.pdf>

implementation of the GRF pledges. Areas of particular interest are access to health and education services for refugees and access to formal work.

As a basis for addressing its' key priorities, strengthening partnership, and enhancing the overall effectiveness of the Sudan CRP, all partners have committed to aligning CRP activities with national strategies and to working closely with the refugee and host communities. Accordingly, this plan has been prepared based on assessments and consultations with all stakeholders, including government authorities, NGO partners, donors, and refugees.



Ethiopian asylum-seeker in Camp 6, Blue Nile State, jumps on a rope. Camp 6 refugee camp, southeast of Sudan, is home to more than 3,200 refugees from Ethiopia.

Camp 6/ Blue Nile State/ Sudan.

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List of Organization

#	NAME OF ORGANIZATION	ACRONYM
01	Agency for Technical Cooperation and Development	ACTED
02	Adventist Development and Relief Agency	ADRA
03	Al Manar Voluntary Organization	Almanar
04	Alight	ARC/Alight
05	Business and Professional Women Organization	BPWO
06	Catholic Agency for Overseas Development	CAFOD
07	Care International Sudan	CARE
08	Concern Worldwide	Concern
09	Cooperazione Internazionale	COOPI
10	Danish Refugee Council	DRC
11	Food and Agriculture Organization	FAO
12	Global Aid Hand	GAH
13	Hope and Friendship for Development Organization	HOPE
14	International Organization for Migration	IOM
15	International Rescue Committee	IRC
16	Islamic Relief Worldwide	IRW
17	Joint Aid Management International	JAM
18	JASMAR Human Security Organization	JASMAR
19	Medair	Medair
20	Mercy Corps	Mercy Corps
21	Mutawinat	Mutawinat
22	Nada El Azhar for Disaster Prevention and Sustainable Development	NADA
23	Norwegian Church Aid	NCA
24	Norwegian Refugee Council	NRC
25	Plan International Sudan	Plan Int.
26	Premier Urgence	PUI
27	Relief International	RI
28	Save the Children International	SCI
29	Solidarites International	SI
30	Sudanese Red Crescent Society	SRCS
31	United Nations Development Programme	UNDP
32	United Nations Population Fund	UNFPA
33	United Nations High Commissioner for Refugees	UNHCR
34	United Nations Children's Fund	UNICEF
35	United Peace Organization	UPO
36	World Food Programme	WFP
37	Welthungerhilfe	WHH
38	World Health Organization	WHO
39	World Vision International	WVI
40	ZOA International Sudan	ZOA

South Sudanese refugees in Pan Jadid Site, El Fasher, North Darfur State, are accessing a grinding mill which was handed over by UNHCR in partnership with AHA. This mill was suggested by refugees as an income generating activity for the community and their hosts
El Fasher/ North Darfur State/ Sudan
© UNHCR/MODESTA NDUBI

Accountability to Affected Populations

The Sudan CRP was developed after consultation with refugees, government authorities, and NGO partners. All CRP partners are committed to ensure that their planned interventions are based on beneficiaries' needs, preferences, and priorities, and reflected in the programme design and implementation. Additionally, CRP partners agreed to strengthening monitoring frameworks across the sectors to improve the quality of programming and services that are provided. The RCF will work closely with the established Sudan Accountability to Affected People and Community Engagement Working Group and PSEA Task Force and working groups linking its actions to the PSEA Joint Framework of Action (JFA), and Collective Framework for AAP/CEA 2020 – 2021 in Sudan.

The 2022 CRP aims to strengthen specialized mechanisms to address PSEA to handle sensitive complaints around staff behaviour. To protect both beneficiaries and staff members from exploitation, trainings are planned throughout 2022 to further sensitize beneficiaries on their rights and entitlements. Partners are currently undergoing PSEA capacity assessments, while ensuring that Minimum Operating Standards PSEA are in place. This include sensitization of staff and volunteers of UN, I/NGOs and service providers on PSEA zero-tolerance policy, establishing and strengthening confidential feedback and complaint mechanisms, and ensuring that the referral mechanism for survivors' support is operational.



Ethiopian asylum-seekers receive non-food items in Camp 6, Blue Nile State. Camp 6 refugee camp, southeast of Sudan, is home to more than 3,200 refugees from Ethiopia. Camp 6/ Blue Nile State/ Sudan.

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Age, Gender and Diversity

Conflict and forced displacement affect individuals differently, depending on their age, gender, disability, and other diversity characteristics. To ensure an effective response to refugees in Sudan, the CRRP will follow an Age, Gender and Diversity (AGD) approach as guided by UNHCR's age, gender, and diversity (AGD) policy, which seeks to ensure that all persons of concern to UNHCR (PoC) fully participate in decisions that affect them and enjoy their rights on an equal footing with others.

Age denotes the different stages in a person's life cycle. It is important to know where people are in their life cycle because their capacities and needs change over time. Age influences and can enhance or diminish people's capacity to exercise their rights, and must be considered in all protection, assistance, and solutions programmes.

Gender denotes the socially constructed roles of women and men, which are often central to the way in which people define themselves and are defined by others. Unlike sex, gender is not a biological determinant. Gender roles are learned, may change over time, and vary within and between cultures. Gender often defines the duties, responsibilities, constraints, opportunities and privileges of women, men, girls, and boys in any context. The principle of gender equality affirms that women, men, girls, and boys should enjoy rights, responsibilities, and opportunities on equal terms. It implies respect for the interests, needs and priorities of each gender. Combating discrimination based on sexual orientation and gender identity is inextricably linked to gender equality, since it challenges negative gender stereotypes and systemic discrimination arising from prejudice.

Diversity denotes the different values, attitudes, cultural perspectives, beliefs, ethnic backgrounds, nationalities, sexual orientations, gender identities, abilities, disabilities, health, social and economic status, skills, and other specific personal characteristics that people possess. Diversity characteristics vary from person to person and intersect with age and gender, making each person unique. UNHCR undertakes to recognize, understand, respect and value these differences in each specific context and operation, to ensure that all persons of concern are protected appropriately. Respecting diversity means recognizing and valuing those differences and creating a protective, inclusive, and non-discriminatory environment in which every person's rights are upheld.

The AGD approach can be achieved by using participatory methodologies to incorporate the capacities and priorities of women, men, girls, and boys of diverse backgrounds into protection, assistance, and solutions programmes. It also encompasses collection and analysis of age and sex (and diversity where contextually appropriate and possible) disaggregated data in the programming process. Communication with Communities (CwC) will be strengthened by using means that are appropriate and accessible to all groups in a community, as well as by establishing and operating feedback and response systems (including for confidential complaints), such as helplines, suggestion boxes, SMS systems, social media platforms, and networks of community feedback assistants. Simultaneously, communication channels will be assessed to improve two-way communication with refugees and host communities. Gender equality principles should be placed at the core of the response to promote the participation, empowerment and protection of women and girls, including through individual documentation, equal access to basic services and operationalization of GBV standard operating procedures and four main referral pathways for all survivors (safety/security, legal, medical, and psychosocial).



SECTOR STRATEGIES



Protection

BUDGET		
SOUTH SUDAN REFUGEES	ETHIOPIAN REFUGEES	OTHER REFUGEE POPULATIONS
USD 82,174,847	USD 42,483,580	USD 22,941,838
TOTAL REQUIREMENTS		USD 147,600,265
NUMBER OF RESPONDING AGENCIES		23

Needs Analysis

In 2021, COVID-19 restrictions have gradually loosened. GoS has maintained its open-door policy and ensured access to territory and asylum for new arrivals. Meanwhile, inflation and natural disasters such as floods, coupled with influxes of new arrivals in some areas, continued to affect the overall protection environment for refugees and asylum-seekers, particularly women and children. In addition, incidents of armed conflicts and attacks have been reported throughout 2021 in some areas of Darfur, Kordofan, White Nile, Blue Nile and Khartoum, exacerbating protection needs of host and displaced communities (including refugees) alike.

Lack of individual refugee registration and documentation remains a key driver of refugee vulnerability in Sudan, especially for refugees living in out-of-camp settlements, as those without documentation are unable to access socio-economic and protection (including legal) services, and formal and stable livelihoods opportunities, and face heightened protection risks such as arrest, detention and refoulement. According to the BANVA, refugee households with only some documentation or no work permit attributes to higher vulnerability, and vulnerability in this regard is found to be significantly higher among the refugee population than host communities in all states, indicating a serious protection need. As for work permits, while the Asylum (Organization) Act 2014 recognizes refugees' right to work, there are regulatory and administrative hurdles hindering their access to work permits. Moreover, in the context of GoS' encampment policy, the same law requires refugees to obtain travel permissions to formally move outside of the refugee camp or any designated area of residence, which is implemented in a restrictive manner. The difficulty in obtaining work permits and the restrictive out of camp policy are posing further challenges to refugees in terms of their access to socio-economic and protection services and opportunities in the country.

Amongst different nationalities of refugees and asylum-seekers residing in Sudan, the precarious situation of refugees from Syria, Yemen and other Arab countries is of particular concern as they are not granted access to the national asylum procedure in Sudan, while a clear government policy is missing. Furthermore, access to birth registration is limited for refugee children in most locations due to government policy and capacity constraints, posing challenges to exercise of their fundamental right to birth registration and placing those born in Sudan at risk of statelessness. Awareness-raising about the eligibility requirements for Sudanese nationality has not been

widely conducted despite the presence of some protracted refugee populations and mixed marriage cases.

Generally, refugees' and asylum-seekers' access to legal aid, access to information about availability of protection services, and awareness about their legal rights and obligations under the relevant national laws (including labour related laws) remain limited. The findings of the BANVA 2021 showed that in most states, in terms of access to protection services and sense of safety, protection vulnerability scored higher among the refugee population than host communities and it is also higher for refugees living in in-camp/camp-like situations compared to those in out-of-camp situations. Specifically severe vulnerability in terms of availability of protection services was found among those with no awareness of legal aid in their communities. Awareness of informal protection services resulted in moderate vulnerability and those with awareness of formal protection services were included in the category of persons with low vulnerability.

Understanding communities of concern, their leadership and other community-based structures and their dynamics, remain key to understanding how communities protect themselves. Humanitarian actors have become more reliant on community networks, particularly during the COVID-19 pandemic when access to populations of concern became more restricted. Security, logistical constraints posed by the rainy season and seasonal flooding and connectivity challenges, all impacted negatively on access to protection throughout 2021 in both camp and out of camp locations, including in urban areas like Khartoum. Yet, despite working with communities to identify and provide targeted support to persons with specific needs, many groups in particular persons with disabilities, LGBTIQ+ persons of concern and others continue to face numerous attitudinal, environmental, and systemic barriers to access protection and assistance. The 2020-2011 Participatory Assessments revealed that many services and structures lack universal design and inclusive safe spaces. Furthermore, while community leaders are often influential members in their communities, their roles in overseeing traditional justice mechanisms and mediation do not incorporate a human rights approach and adherence to rule of law. Social tensions between refugees and host communities also continue to be reported, particularly in relation to competition over use and access to natural resources, affecting the overall well-being of refugee populations.

GBV Sub-sector

The 2020-2021 Participatory Assessment for refugee communities across Sudan explored the theme of safety and findings indicate that refugees are concerned about the risk of gender-based violence (GBV) in their communities. GBV risks are aggravated by inadequate lighting in camps/settlements, limited access to energy and the long distances that women and girls need to walk to collect firewood and fetch water, and lack of adequate gender-segregated latrines. Limited livelihoods opportunities and the continued deteriorating economic situation as well as the COVID-19 pandemic further undermine the safety and well-being of refugee women, men, girls, and boys. Early marriage, sexual exploitation and illicit alcohol brewing are among negative coping mechanisms practiced by different nationalities. Barriers to accessing legal recourse were noted, with GBV incidents frequently settled through traditional justice mechanisms. There remain significant gaps in survivors' access to timely health and other support services.

Child Protection Sub-sector

Some 43% the registered refugee population in Sudan are under 18 years old and a significant number are unaccompanied and separated children (UASC). Vulnerabilities of children have been further exacerbated by the COVID-19 pandemic since 2020. Children – and in particular UASC (many of whom require family reunification support, alternative care arrangements and assistance) – continue to remain at heightened risk of exploitation, neglect, and abuse. Limited livelihood opportunities coupled with high levels of poverty are also linked to the large number of out- of-school refugee children. As a result, many children are exposed to child labour, early marriage, and onward movement, including smuggling and trafficking. Effective identification, assessment, and targeted support for children at risk remain a challenge. This is further compounded by the lack of specialised child protection services, particularly in remote areas.



A young refugee from Ethiopia attends a class run by volunteer teachers at a school supported by UNHCR partner the Norwegian Refugee Council, in Um Rakuba Refugee Camp, Al Qadarif State, Sudan. Senait 8, fled her home in Humera in Ethiopia with her mother Shashu Belay Amaru 27, when fighting erupted between government soldiers and regional security forces. Um Rakuba/ Gedaref State/ Sudan.
© UNHCR/WILL SWANSON

Response Strategy and Priorities

The protection response will focus on supporting the Government of Sudan (GoS) in solutions-oriented approach through alignment of the relevant national legislation with the international refugee and human rights law and inclusion of refugees in national systems, that will result in enhanced opportunities for local integration, as well as improved protection services for refugees and asylum-seekers, while continuing to pursue other durable solutions. The protection response will prioritize in particular the following objectives:

- 1. Enhanced advocacy and technical support for policy and legislative framework to support local integration as per the GRF pledge.**
- 2. Improved access to individual registration and documentation.**
- 3. Improved access to information, counselling, and legal aid.**
- 4. Strengthened community-based protection networks.**
- 5. Enhanced GBV prevention, risk mitigation and response.**
- 6. Improved child protection case management with prioritization of UASCs.**
- 7. Expanded access to durable solutions of voluntary repatriation when feasible, as well as resettlement and complementary legal pathways opportunities.**

In order to support self-reliance of refugees and their local integration in Sudan, enhanced efforts will be made to advocate with GOS to amend the current policy and legislative framework, particularly in relation to the GOS's encampment policy, which imposes movement restrictions on refugees who wish to seek employment/livelihoods, education, health and other opportunities and services outside of their designated areas of residence within the country. Such advocacy will also encompass making recommendations on legislative and administrative steps which need to be taken by GOS in order to ensure that refugees can fully enjoy the rights enshrined in the Asylum (Organization) Act 2014 and other relevant laws, including the right to work and the right to housing, land and properties.

Focus will be placed on enhancing individual registration of refugees and asylum-seekers to ensure that they are protected from refoulement and other protection risks, and are systematically given access to the national asylum procedure. This will include focusing on rapid registration, verification, roll-out of the Population Registration and Identity Management EcoSystem (PRIMES) and issuance of individual refugee documentation. Full coverage of biometric registration for all refugees and asylum-seekers living in camps and out-of-camps remains a priority. Efforts to build capacity of COR in the area of Refugee Status Determination (RSD) for certain nationalities are also a priority. The provision of refugee and civil registration, particularly birth registration, will be prioritized, including capacity building for civil registry staff and mobile birth registration teams.

Interventions in the area of birth registration and statelessness will focus on advocating for law and policy reform on civil registration and nationality, which includes removal of gender discrimination, promoting access to civil registration, particularly birth registration, and nationality (Sudanese, South Sudanese or otherwise), and provision of

legal aid. Improving access to information, counselling and legal aid on available protection systems and services for refugees and asylum-seekers in both in- and out-of-camp situations will help to fulfill their basic rights.

Community-based protection interventions will support outreach, information dissemination, access to services and enhancing networks including with community, faith, and other leaders to support community-based solutions through capacity building and support. Strengthening individual case management for refugees with specific needs will support improved access to individual assistance for those who need it most and greater integration in national/local services. Assistance will be pursued to enhance accessibility for all persons of concern. Host community sensitization will be pursued to support social cohesion and address social tensions that aggravate refugee protection risks.

Partners will increase the use of Multipurpose Cash Assistance (MPC) in their interventions to prevent and mitigate protection risks and social exclusion stemming from poverty or other vulnerabilities. It supports access to basic services and strengthens the capacity of families to care for their children and other family members with specific needs. MPC is expected to expand and go beyond the current central/urban geographic locations to reach other rural and peri-urban locations where markets are fully functional. Through MPC, partners aim to meet (partially or fully) the basic needs of at least 10% of the refugees and asylum-seekers in Sudan.

The three traditional durable solutions that are advanced for refugees are complementary and are pursued together. They include: (i) local integration, in which refugees legally, economically and socially integrate in the host country, availing themselves of the national protection of the host government; (ii) resettlement, in which refugees are selected based on established criteria and transferred from the country of asylum to a third country which has agreed to admit them as refugees with permanent residence status; and (iii) voluntary repatriation, in which refugees voluntarily return in safety and in dignity to their countries of origin and re-avail themselves of national/state protection.

Most refugees in Sudan have no immediate prospect for or intention of voluntary return due to continued instability in their countries of origin. Nevertheless, some 31,800 South Sudanese refugees are reported to have spontaneously returned from refugee sites in Sudan in 2021 due to various push and pull factors. Self-organized returns are tracked and monitored to the extent possible in South Sudan. Also, there is an emerging interest in voluntary return among some South Sudanese refugees in Khartoum. Resettlement remains a valuable protection tool to address the specific needs of refugees, although it is available only to an extremely limited number of refugees who meet very specific criteria as per the quotas provided by resettlement countries, which are far below the current estimated needs. Case identification for resettlement referrals will be strengthened to fully utilize the limited quota for refugees in Sudan. At the same time, complementary legal pathways for refugees, particularly family reunification in third countries, will continue to be explored. Focus will also be enhanced on expanding solutions-oriented programmes for refugees through the expansion of opportunities for local integration in line with the Government's GRF pledges, as stated above.

GBV Sub-sector

GBV prevention, mitigation and response programming will focus on expanding awareness raising with communities of concern to prevent GBV, while also ensuring greater inclusion of men and boys. GBV mainstreaming will be scaled up across sectors through capacity building and dedicated interventions to mitigate risks that expose persons of concern to GBV. CRP partners will prioritize strengthening GBV responses through improved understanding of GBV guiding principles, functioning referral pathways, expanded women's empowerment programming including self-reliance opportunities and enhanced understanding of roles, responsibilities, and coordination mechanisms. Capacity building will target service providers to enhance survivors' access to multi-sectoral assistance and quality care. Improved data collection and information management on GBV in line with best practices and standards will also be prioritized.

Child Protection Sub-sector

The child protection response will focus on improving access to birth registration, optimizing case management systems and best interest procedures to support the effective identification of children at risk, including strengthening appropriate alternative care arrangements for UASCs, family tracing and reunification, and establishing mechanisms to bolster the prevention and response to abuse, neglect, violence, and exploitation. Durable solutions in the child's best interests will also be promoted. In addition, community-based child protection networks will be strengthened to support the identification of vulnerable children, information dissemination and the development and uptake of community-level responses to child protection issues. Linkages between child protection, GBV and education sub-sectors will also be built up through coordination and collaboration. Youth-led initiatives and targeted programmes will also be prioritized with the aim of building capacity and resilience and fostering their participation in their communities.



Refugee children in Um Rakuba refugee camp in Gedaref State participating in handwashing sensitization activities
Um Rakuba/ Gedaref State/ Sudan
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Education

BUDGET		
SOUTH SUDAN REFUGEES	ETHIOPIAN REFUGEES	OTHER REFUGEE POPULATIONS
USD 20,213,537	USD 7,149,354	USD 2,237,429
TOTAL REQUIREMENTS		USD 29,600,320
NUMBER OF RESPONDING AGENCIES		12

Needs Analysis

One of the biggest barriers that refugees and asylum-seekers face is the opportunity to access education. While the 1951 Refugee Convention provides that all refugees are entitled to education in host countries, there are several challenges in Sudan. These challenges range from availability of schools in the host communities and school materials and infrastructure to the availability of qualified teachers. The current context in Sudan is changing, with limited predictability of how the regulatory and governance environment will evolve. These changes are attributed to the ongoing economic crisis, unpredictable political environment, tribal conflicts, and flooding among others. Education needs remain high, with about 67 percent of primary-school aged refugee children remaining out-of-school and over 90 percent estimated to be out-of-school in more remote refugee-hosting areas where many South Sudanese refugee children are living. In addition, over 90 percent of refugee children eligible to attend secondary school are out-of-school.

In the context of the COVID-19 pandemic water, sanitation and hygiene have become a priority in Education. Most schools do not have adequate WASH facilities. Many of these schools also do not have access to water that would enable them to comply with the new COVID-19 protocols set out by the Federal Ministry of Education (FMoE).

Many refugees must pay a fee to access education in Sudan and the absorption capacity is limited in public schools. This often deters refugees from accessing public schools. In many locations, education services for refugees are provided through parallel service providers, usually through UNHCR, UNICEF or NGOs. As pre-primary education is a prerequisite for admission to elementary education under the Ministry of Education's policy, refugees face difficulties in the current circumstances because of the shortage of pre-schools.

Drop-out rates are high among refugees, particularly in the East among Eritreans and among girls in upper primary classes. The quality of education is poor with significant gaps in school equipment and insufficient classrooms particularly in the South. The lack of school feeding also drives drop-out and retention issues. Parents often cannot afford to cover school costs due to a lack of livelihoods/income opportunities. The language barrier for non-Arabic speakers poses a further challenge.

South Sudanese refugees are widely dispersed across the country. This makes it difficult to design programmes that can cover all of them. They are settled in areas where the host population is underserved in terms of basic services. The existing schools lack basic infrastructure and suffer from severe teacher shortages and a lack of school supplies.

There is also a lack of secondary schools that refugee students can access, as the few secondary schools are located in the host communities with limited capacity and lack of boarding facilities. Many young refugees are unable to access tertiary level education and training in Sudan, as they lack the finances to do so, they often cannot start their studies due to lack of proof of past education for example, and they are at risk of dropping out from school as a result of their disadvantaged social and financial background. Adult literacy levels are low and gaps in adult learning programmes persist.

Refugee children who are out-of-school face serious protection risks, including a risk of exploitation and abuse, as well as GBV and early marriage for young girls. The situation is particularly concerning for the high numbers of UASCs who are especially vulnerable. A lack of education also reduces a child's income-earning capacity in adulthood, which perpetuates the cycle of poverty and dependence on humanitarian assistance, particularly in protracted situations of displacement. These compounded protection risks disproportionately affect girls, notably adolescent girls.

Response Strategy and Priorities

The **overarching objective** is to support the GoS to achieve its GRF pledge to integrate refugees into national education systems in a gradual manner and ensure that all refugees and other Persons of Concern to UNHCR in Sudan have access to quality elementary, secondary, and tertiary education.

The key objectives are:

- 1. Refugees are mainstreamed into the national education system and have access to quality education.**
- 2. The capacity of teachers and other education personnel on COVID-19 protocols and prevention measures, including WASH infrastructure is improved.**

Education in Sudan is guided by global instruments including the Convention on the Rights of the Child (CRC), Education for All (EFA) and the Sustainable Development Goals (SDGs), and a national strategy, the Sudan Education Sector Strategic Plan (ESSP) 2019-2023.

In 2018, Sudan executed its commitment to the Djibouti Plan of Action on Education by including Refugee Education in the ESSP. This plan was finalized and endorsed by the Minister for Education, the Cabinet, and various international agencies among other key stakeholders. In addition, the Education Management Information System (EMIS) was rolled out across the country with the inclusion of a refugee questionnaire to collect data on refugee children.

In 2019, the National Strategy and Costed Plan of Action for the Refugees 2020/21-2022/23 was developed on the background of the ESSP and in light of the Djibouti Declaration. The plan was developed through a comprehensive review of general education, which covered institutional capacity to accommodate the growing number of school aged children. The review provided the status of education at both the federal level and at state levels, thereby providing an opportunity to understand issues and constraints from diverse perspectives.

CRP partners will continue to work closely with the Ministry of Education, both at the Federal and State levels to ensure quality education for all refugees and integration into public systems. For refugee children scattered within host communities, UNICEF will take the leading role in coordinating with partners on community-based assistance to increase the enrolment of refugee children in host community schools. Additionally, this approach will aim at mobilizing and empowering the community to participate in the management and improvement of schools, enhance learning environments and reduce school dropouts.

In camp situations, CRP partners will continue to focus on primary and secondary school education while seeking opportunities to ensure sustainability of education services by introducing user fees and community involvement wherever possible. Focus on school drop-out rates and ensuring girls' access to education will also be a priority and will be pursued through awareness campaigns on the importance of education especially for girls and prevention of early marriages, particularly in East Sudan. In Khartoum State, there are eight community schools hosting Eritrean, Ethiopian and Congolese refugees. These schools are supported by the Sudan CRP partners and follow the Sudanese curriculum. To mainstream refugee education, CRP partners will advocate for the absorption of these and other refugee community schools into the national system so that education across Sudan is provided by the GoS and staffing and oversight undertaken by the MoE.

Many schools (including camp schools) suffer from severe shortage of teachers. This has led to the engagement of refugee volunteer teachers to address this gap. However, the shortages remain severe. With the support of MoE, most of the refugee volunteer teachers have been assessed and graded as per the MoE guidelines and are receiving incentives that are equivalent to their national counterparts. Through the ESSP, CRP partners will continue to advocate for the recruitment and absorption of these teachers into the MoE payroll for continuity and sustainability. Many of the South Sudanese teachers received their qualifications in Sudan and are competent in delivering the Sudanese curriculum. CRP partners will continue to support the MoE in training teachers.

The COVID-19 pandemic has emphasised the need for handwashing stations at schools for COVID-19 prevention and to increase overall hygiene at schools, including gender appropriate facilities. CRP partners will work in coordination with the FMoE and SMOE to increase the availability of handwashing stations at schools.

In collaboration with WFP, partners will explore the possibility of initiating sustainable school feeding programs for refugees as a student retention mechanism, given the high rate of school dropouts. Child protection activities will be mainstreamed in all education programs. Child protection and education partners will work together to ensure that challenges faced by children in schools and at home are addressed to the extent possible. Selection criteria for support to children with specific needs will include UASCs, children from single parents, children from ailing parents,

orphaned children, and children with disabilities. Cases identified by the Child Protection actors will be reviewed and prioritized for support.

Increased access to tertiary education and vocational training will also be pursued through the promotion of education grants and improved access for refugee students to public universities. A focus on youth and education will also contribute to preventing irregular onward movement. Opportunities for programs engaging youth will be pursued, working jointly with a broad spectrum of peacebuilding practitioners, universities, and peers to develop the skills and networks they need to shape their future.



An Ethiopian refugee is studying in Education Cannot Wait Secondary School constructed by Islamic Relief at Um Rakuba Camp. Um Rakuba/ Gedaref State/ Sudan.
© ISLAMIC RELIEF/AYA EL-FATIH



Health & Nutrition

BUDGET		
SOUTH SUDAN REFUGEES	ETHIOPIAN REFUGEES	OTHER REFUGEE POPULATIONS
USD 38,281,765	USD 25,519,126	USD 4,940,655
TOTAL REQUIREMENTS		USD 68,741,545
NUMBER OF RESPONDING AGENCIES		23

Needs Analysis

The fragile health system coupled with recurrent multiple emergencies and the ongoing economic crisis in Sudan have negatively impacted the health and nutrition levels of refugees living in Sudan. Refugees and their host communities live in areas with limited health infrastructure and inadequate availability of drugs, understaffing and medical supply shortages. Refugees reported higher healthcare needs in their households compared to their host communities except for refugees in Khartoum and Central Darfur. Additionally, refugees in Kassala and Khartoum spend a larger proportion of their monthly income on healthcare compared to host communities, while both refugees and host communities in East Darfur allocate a large proportion of their household income to healthcare.

The economic difficulties facing Sudan with historic levels of inflation across the country, and the effects of the COVID-19 pandemic have made it difficult to maintain sufficient medicine stocks across the country. During 2021, the availability of emergency medicines declined to 43 percent compared to 57 percent during 2020. This has been especially hard on vulnerable groups, including refugees in urban areas.

In 2021, 4 out of 18 States have reported measles cases affecting refugees. In addition, cases of Hepatitis E were also reported in 8 States including East Sudan. Heavier-than-usual rains also negatively affected refugees with an increased risk of suffering waterborne diseases driven by heavy flooding. This has resulted in increasing concerns regarding the health and nutrition status of refugees, especially among South Sudanese refugees arriving in White Nile.

Acute and chronic malnutrition have been problems of public health significance among refugees in Sudan for the past several decades. The drivers of malnutrition are multi-sectoral that include high poverty, poor WASH conditions leading to epidemics, limited access to health services, illiteracy and high food prices contributing to inadequate food intake and dietary diversity at household level. Inappropriate feeding practices and cultural norms affect children's growth and development from an early age. Displacement due to floods or inter-communal clashes continue to be one of the main drivers of malnutrition, as it disrupts affected communities' access to health and

WASH services, therefore increasing risks to disease outbreaks and food insecurity. COVID-19 continues to contribute to loss of livelihoods, disrupting access to food and to the health care system. The ongoing inflation has reduced purchasing power, increasing the number of families with food insecurity and malnutrition risks. Moreover, the humanitarian crisis tends to increase nutrition related protections risks, especially among children who might engage in child labour and early child marriage compounding risks of malnutrition.

Sustaining health and nutrition screening services at border crossing points and reception centres remains a challenge. The SENS survey conducted in White Nile, East Darfur, South and West Kordofan indicate 'critical' rates (>15 percent) of Global Acute Malnutrition (GAM) and Severe Acute Malnutrition (SAM) (>3 percent) among children of 6 to 59 months of age. The SENS also indicate high rates of anaemia (>40 percent) among children and women (aged 15-49 years), as well as low antenatal service, measles immunization and Vitamin A supplementation coverage for refugees in all the refugee hosting States. While food insecurity remains a key driver of poor nutrition status across the camps, the findings also point to the wider effects of chronic underfunding for the response, especially in WASH, Health, and Livelihoods sectors.

Response Strategy and Priorities

The strategy intends to scale-up health and nutrition service provision to both refugees and host communities. Camp-based assistance will include direct support to health facilities and services inside the camp, as well as the provision of nutrition services, while out-of-camp support will focus on strengthening local health infrastructure and services to improve coverage and quality of service delivery. In line with the GRF pledges, efforts will also support gradual integration of refugees into national health systems, including through enhancing access to public health services, providing capacity building, and supporting standardization and harmonization of health packages to align with MOH policies. For the 2022 CRP, the refugee health and nutrition sector will focus on the following objectives:

- 1. Comprehensive essential life-saving primary, secondary and tertiary health care services are provided to refugees.**
- 2. Health services for refugees are integrated in the national healthy system in a gradual manner.**
- 3. Nutrition prevention and treatment services, as well as geographic coverage of Community-based Management of Acute Malnutrition (CMAM) services in prioritized states and localities are scaled up.**

The health interventions include provision of essential medicines, medical equipment and other medical supplies, recruitment and capacity building of health personnel, supporting referral services and conducting minor rehabilitation of health facilities.

The overall objective of the health interventions is to ensure refugees have access to essential life-saving health care services through the implementation of a basic package of primary, secondary and tertiary healthcare services. This will include treatment of communicable and non-communicable diseases, treatment of injuries, provision of reproductive healthcare services and mental health and psychosocial support.

Strengthening of community health services and immunization services will be prioritized, as well as timely identification and response to any disease outbreak with the aim of ensuring that all disease outbreaks/emergencies alerts are investigated within 72 hours from notification to protect communities from avoidable death (mortality) and illnesses (morbidity) and prevent further spread. The Early Warning and Alert System (EWARS) for diseases with outbreak potential in all refugee hosting locations will be strengthened.

The overall objective of the nutrition interventions is to improve the nutritional well-being of refugees and host communities. Comprehensive and integrated nutrition, health, and food security interventions are needed to attain such a result. Regular and timely nutritional screening to ensure early detection of active cases will be promoted and implemented at entry points, reception centres and camps/settlements. Treatment options for acute malnutrition will be available through service provided in refugee camps or through the national system. Treatment of acute malnutrition in refugee situations will be managed using the principles of community-based management of acute malnutrition (CMAM), as per the national CMAM treatment guideline and protocols.

SAM will be treated through in-patient and out-patient platforms with nutritional treatment products. CRP partners will coordinate with main primary health care actors and other stakeholders to scale-up in-patient severe acute malnutrition treatment at the stabilization centres in health facilities to ensure refugees can access services.

Treatment of moderate acute malnutrition (MAM) using out-patient modalities will be prioritized by providing the food products required for such treatment. Community outreach programs will further detect moderate acute malnutrition through volunteers and outreach workers. Community involvement and awareness in the identification of malnourished individuals, and their inclusion and retention in the treatment of acute malnutrition is crucial in the success of this program, as well as in obtaining effective coverage. Establishing and maintaining strong linkages between the different components of the CMAM programs, as well as with health and preventative services are key features of effective treatment programs. In emergency situations where MAM levels are high (>15 percent with aggravating factors), it is important to ensure optimal organization and coordination of services among all partners and to maintain communications with and raise awareness among the refugee population.

Further focus will be on effective prevention of malnutrition and undernutrient deficiencies with a focus on morbidity and mortality prevention associated with acute malnutrition in children under five years and pregnant and lactating women (PLW) who constitute the most vulnerable groups. Specific projects for the prevention of undernutrition, namely blanket feeding for young children and PLW using special nutritional products or fortified blended foods, will be put in place where the prevalence of acute malnutrition is high or where there are aggravating risk factors. Effective prevention of undernutrition and micronutrient deficiencies, including anaemia and stunting, will be prioritized by gradually integrating refugees into the national nutrition strategy and thus ensure that refugees have access to food fortification, deworming, immunization, and vitamin A/micro-nutrient supplementations. In addition, promotion of adequate Infant and Young Children Feeding (IYCF) and care practices will be prioritized. Prevention will also be assured through the improvement of the WASH situation, health conditions, shelter and livelihood opportunities. Not doing so increases protection risks, as well as food insecurity and malnutrition.



Shelter & Non Food Items

BUDGET		
SOUTH SUDAN REFUGEES	ETHIOPIAN REFUGEES	OTHER REFUGEE POPULATIONS
USD 22,067,019	USD 23,713,560	USD 6,197,928
TOTAL REQUIREMENTS		USD 51,978,507
NUMBER OF RESPONDING AGENCIES		13

Needs Analysis

The Shelter and NFI needs of refugees remain significant, especially for those living in camps in East Sudan, White Nile, and East Darfur, where many refugee arrivals from Ethiopia and from South Sudan were registered in 2021.

According to the BaNVA, only 22 percent of refugees (living in camps and outside) live in adequate shelters, while 36 percent of refugees live in substandard shelters, 28 percent of refugees in unsafe shelters and 14% of refugees live in shelters that do not protect from the weather elements. Congestion and overcrowding continue to pose a serious concern across camps and settlements, where residents frequently face difficulties with poor infrastructure and lack of access to essential services. Ensuring privacy and dignity in these conditions, as well as reducing risks of exploitation and abuse, remains a challenge, while the lack of access to basic services continues to drive negative coping mechanisms, such as selling of humanitarian aid and NFIs to pay for school fees, medical services, water, and food, etc.

Due to limited resources and competing needs of refugees, IDPs, returnees and flood affected populations, CRP partners will prioritise the newly displaced populations for life-saving shelter and NFI responses. The protracted caseload remains neglected with limited opportunities for durable solutions. Almost half of the refugee population (49%) resides in emergency/makeshift shelter typologies, followed by 39% of refugees that live in semi-permanent structures, while only 12% of refugees live in permanent shelters. Complex HLP arrangements continue to pose an obstacle for durable solutions by discouraging investments and exposing refugees to threats of eviction and rent manipulation. 66% of refugees reported having no documents that guarantee security of tenure.

Torrential rains and floods combined with the seasonal overflow of the River Nile and its tributaries continue to affect refugee communities across Sudan, with White Nile being the worst hit state in 2021, where Algana'a refugee camp was completely submerged by high flood waters, displacing approximately 40,000 refugees while also causing devastation to infrastructure, services, agriculture, and livestock.

Newly displaced refugees fleeing without their belongings are also in need of life-saving core relief items to recover from the crisis and resume their lives. The protracted caseload and especially the vulnerable households require targeted replenishment of key items that are worn out, lost and/or stolen. More than 50 percent of refugees reported not owning any type of bed, mattress, or sleeping mat and 59 percent reported not having kitchen sets. Amongst the most pressing NFI needs are solar lamps that 75 percent of refugee population lack and mosquito nets that 69% of refugees do not possess. The economic crisis further compounds this complex set of humanitarian needs, which are further exacerbated by the COVID-19 pandemic.

Response Strategy and Priorities

For the 2022 CRRP, the Shelter and NFI sector will focus on the following objectives:

- 1. Enable refugees and asylum-seekers to access adequate shelter solutions that provide protection, safety, security and space to live in a dignified manner.**
- 2. Provide life-saving CRIs for refugees and asylum-seekers.**

The response will focus on providing timely emergency shelters and core relief items to newly displaced refugees and asylum-seekers, while at the same time supporting the existing caseload with shelter maintenance and upgrade, as well as NFI replenishment through in-kind or conditional cash assistance. Priority will be given to ensuring durable shelter solutions for refugees in protracted displacement, as well as promoting an area-based response with closer linkages between shelter and site planning interventions together with other sectors, such as WASH, E&E, Health, Education, Livelihoods, GBV, etc., to support access to essential services as well as decongest overpopulated and at-risk areas and thereby develop a safe and dignified living environment. Furthermore, settlement interventions will focus on improved infrastructure, site development works and better flood preparedness to increase the resilience of at-risk populations, while at the same time strengthening community-based response mechanisms.

In terms of the NFI response, the standard kit consists of plastic sheeting, blankets, sleeping mats, jerry cans, mosquito nets, a solar lamp and the kitchen set. Larger households (more than 5 people) are provided with additional items to meet their needs. On-site distribution monitoring and Post Distribution Monitoring (PDM) are in place to measure the effectiveness and appropriateness of NFI interventions, as well as identify possible associated protection risks to be able to adjust the response accordingly.

Due to limited resources, CRP partners will prioritize targeting vulnerable refugees, including women and children (especially pregnant and lactating women, female and child headed households as well as UASCs), older persons (especially those that are single or with children in care or unable to care for self), persons with physical and mental disabilities as well as those with serious medical conditions, and persons at risk or survivors of GBV.

The aim is to ensure safe and easy access (universal) to shelters and essential services, considering specific needs of all vulnerable groups, as well as providing good lighting and adequate security at night. Gender specific considerations will guide shelter design. Therefore, partitions and door locks will be prioritized to better protect

women and girls. Additional measures such as cash grants for the labor component or community-based (volunteer) structures will be put in place to reach persons with disabilities, older persons, and others that are unable to construct their own shelters or to come to distribution sites to collect assistance. All efforts will be undertaken to secure safe housing for UASCs and persons at risk or survivors of GBV. Finally, a coordinated intersectoral response will ensure cross-cutting issues are addressed, so that negative coping mechanisms, such as child labor (construction), sale of humanitarian aid to compensate for the lack of basic services, etc., are eliminated.



Isaac Akoum, 21 years, have been living in Darbatti refugee settlement for five years. He fled Togo, South Sudan in 2016 with his families due to conflict and food scarcity. He has started working as a masonry in the settlement to make his living. ; Darbatti refugee settlement is one of the biggest refugee settlements in South Kordofan, Sudan that hosts around 14,000 South Sudanese refugees. It is located in Al Ieri locality, South Kordofan, Sudan. The settlement was created in late 2013 after conflict in South Sudan forced people to flee into Sudan. Currently, the South Sudanese refugees are living in more than 35 hundred shelters.

Al Ieri/ South Kordofan State/ Sudan.

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Energy & Environment

BUDGET		
SOUTH SUDAN REFUGEES	ETHIOPIAN REFUGEES	OTHER REFUGEE POPULATIONS
USD 5,606,473	USD 4,220,848	USD 1,395,497
TOTAL REQUIREMENTS		USD 11,222,818
NUMBER OF RESPONDING AGENCIES		11

Needs Analysis

Most refugees live in remote areas where electricity is not available or is extremely unreliable for them and the host communities. As ethanol and Liquefied Natural Gas (LNG) are either unavailable or unaffordable, refugees face a situation where firewood is the only available energy source for cooking. This requires refugees to travel far distances to collect firewood which puts women and children who are often the primary collectors of firewood, at heightened GBV risks. Most households rely on inefficient three-stone stoves, which are a major fire hazard due to their instability and they present negative health impacts for households due to smoke inhalation through household air pollution (HAP) that causes eye infection, respiratory diseases and burn risks. This results in a high need to provide fuel efficient stoves and alternative cooking fuel like LNG, bagasse from sugarcane (as residues), ethanol (by product from Sugar manufacturers) or briquettes from stalk of cotton. These are all environmentally friendly solutions.

The reliance on firewood has led to deforestation in many areas, increasing tension with the host community over this scarce resource. This has caused a need for reforestation and afforestation, as well as awareness building on environmental degradation and preservation. Additionally, the general fuel shortages in Sudan, as well as the environmental impact of using fossil fuel has increased the need for solar systems as a power source for lightning, pumping and cooling.

The need for energy sources has a significant impact on the lives of refugees touching several other sectors. The availability of lighting at home and in the streets, as well as reducing the need to collect firewood outside the villages significantly impact on the protection and safety, especially of women and children. Furthermore, the change to energy efficient stoves can considerably enhance the health of refugees. Providing solar power systems to schools and health centres increases the availability and quality of public services for refugees and host communities. Besides, the availability of solar energy has low operation costs. Hence, operation of cooling fans will be possible to provide a comfortable learning environment and contribute to preservation of drugs for health facilities and prolonged water supply for irrigation, home gardening etc. among other benefits.

Data assessment is available for various refugee groups which will be utilized to mobilize resources to further meet the increasing needs for energy & environment interventions, such as fuel-efficient stoves and alternative energy generation through solar energy and alternative fuel sources.

Response Strategy and Priorities

The Energy and Environment Response strategy for 2022 includes the provision of clean cooking fuel and energy efficient stoves and reforestation and afforestation to protect the refugees and the environment. The energy and environment sector will focus on the following objectives:

- 1. Improve access to clean and sustainable energy sources;**
- 2. Increase sustainable firewood supply and environmental conservation through afforestation & reforestations;**
- 3. Increase awareness raising on energy & environment conservation among refugees and other stakeholders.**

CRP partners will prioritize the provision of Fuel-Efficient Stoves (FES) to all refugees in need and replacement of the inefficient 3-stone stoves, to reduce firewood fuel consumption. The latter will also help reduce the trips of women to collect firewood, thereby lowering their exposure to protection risks and increase availability of time for child care, income generating activities and education (in the case of girls). In addition, the response will introduce availability of mixed energy sources such as gas stoves, charcoal briquettes, ethanol, solar cookers, sawdust wood cooking stoves, community improved cooking stoves and ethanol in order to relieve the pressure on scarce natural resources and improve the management of resources by refugees and host communities.

Moreover, the provision of solar energy to ensure sustainable lighting in the street, at communal latrines and at home with chargeable solar lamps through solar energy charging centres at the refugee camps will be prioritized for the protection and safe movement of women and children. CRRP partners will also support persons with specific needs (PSN) with mobile charger units run by solar energy as an income generating activity (IGA). In addition, the response will focus on the reforestation of degraded forests and afforestation of newly identified areas surrounding the refugee settlements/camps, where refugees continue to depend on firewood for cooking. The planting of community forests will be achieved jointly with the host communities to create livelihood opportunities, to foster peaceful co-existence, community empowerment and to promote environment conservation and climate change adaptation. To this end, CRP partners will train refugee and host communities to develop skills for making energy efficient cooking stoves and for tree planting & seedlings raising, among other environment related protection awareness sessions, notwithstanding liquid and waste management practices at household level.



Food Security & Livelihoods

BUDGET		
SOUTH SUDAN REFUGEES	ETHIOPIAN REFUGEES	OTHER REFUGEE POPULATIONS
USD 91,920,971	USD 28,243,494	USD 17,435,367
TOTAL REQUIREMENTS		USD 137,599,832
NUMBER OF RESPONDING AGENCIES		22

Needs Analysis

Sudan's economy is projected to remain in recession in 2021, with a return to modest growth expected in 2022. High inflation and the devaluation of the Sudanese Pound resulted in soaring food and non-food prices in 2021. This has curtailed household purchasing power for all people living in Sudan, including refugees. In addition to the unfavourable external conditions, refugees continue to face challenges in accessing work permits, despite improvements on refugees' eligibility to work. The 2021 BANVA estimates that 21 percent of refugee are unemployed, and 55 percent have less than 20,000 SDG (approximately USD 45) income per month.

Elimination of large fuel and wheat flour subsidies and the liberalization of fuel prices have further increased transportation costs and inflated the already high food and non-food item prices. On 9 June 2021, the Government of Sudan removed all fuel subsidies, completely liberalizing fuel prices, resulting in a 128 percent increase in diesel prices and a 93 percent increase in gasoline prices. This is the second significant increase in fuel prices following a 400 percent increase in October 2020 after the partial elimination of subsidies. Currently, fuel prices are 285 SDG per liter of diesel and 290 SDG per liter of gasoline. In June 2021, diesel and gasoline prices were 170 and 142 percent higher than in October 2020 and around 936 and 1,139 percent higher than prices in September 2020 before subsidies were lifted. The rise in fuel prices has led to an increase in transportation tariffs of more than 85 percent in the country. This has resulted in a steep increase in food and non-food prices compared to May 2021, as the price of cooking oil, sugar and wheat flour increased by 25-35 percent within one week. Most traders and producers have reduced the sale of their products, anticipating further price increases.

The Sudanese Pound (SDG) has continued to depreciate on the parallel market, and the inflation rate continues to rise. As part of the planned economic reform, the transitional government adopted a flexible managed exchange rate after devaluing the SDG in the official banking system from 55 SDG/USD to 375 SDG/USD in February 2021. The official SDG exchange rate was further devaluated from 395 SDG/USD in April to 450 SDG/USD in September 2021.

According to WFP's Food Security Monitoring System (FSMS) report for Q3 2021, 51 percent of refugee households were found to be food insecure with the highest prevalence of food insecurity affecting refugee households in Darfur

According to WFP's Food Security Monitoring System (FSMS) report for Q3 2021, 51 percent of refugee households were found to be food insecure with the highest prevalence of food insecurity affecting refugee households in Darfur (70 percent). In Southern and Eastern Sudan, 42 percent of refugee households are food insecure. FSMS results for refugees who had fled from Tigray indicate 59 percent prevalence of food insecurity.

The main contributing factor is economic vulnerability, as 94 percent of refugee households are spending more than 65 percent of their total expenditure on food. 52 percent of refugee households adopted negative food-based coping strategies, such as relying on less expensive food, eating borrowed food or borrowing money to buy food.

The households' market reliance for food commodities often reach more than 90 percent, with the other significant source being food assistance. With the deterioration of the macroeconomic environment characterized by high inflation of food prices, the purchasing power of the households significantly diminished. Other factors that negatively impacted livelihoods include the continued political instability and the COVID-19 pandemic. Households headed by women are at least 12 percent more likely to be food insecure than a household headed by men, mostly due to limited access to the labour market. Similarly, households with low levels of education are 6 percent more likely to be food insecure compared to those with primary education.

The 2021 Integrated Food Security Phase Classification (IPC) report for Sudan forecasts persistent high food insecurity levels in Sudan driven by high inflation, increasing food prices and a deteriorating economy. Key drivers of food insecurity are annual floods, the economic downturn and forced displacement, with refugees among the most affected groups in Sudan.

Access to livelihood opportunities remains extremely limited for refugees in Sudan. In addition to the economic crisis, the economic vulnerability of the refugee households is the main factor contributing to their food insecurity. More than one third of households rely on food-based and livelihood-based negative coping strategies, focusing on immediate food needs and depleting their assets. Most common livelihood coping strategies include spending savings and cutting down on expenses for other basic needs, such as education and health.

Movement restrictions further reduce the capacity for self-reliance by preventing refugees from moving to areas in Sudan with better work opportunities. Livelihoods gaps have direct impacts on child protection by reducing families' capacity to keep their children in school, thereby increasing the risk of turning to negative coping strategies including early marriage and child labour. The available livelihoods opportunities for refugees are largely in the informal sector with high uncertainty of daily labour accompanied by high risks of exploitation, sexual harassment and abuse.

Response Strategy and Priorities

The Sudan CRP food security and livelihood response will aim to ensure that refugees who are in need of food assistance and livelihood support will receive assistance to mitigate negative coping mechanisms. The response strategy for the food security and livelihood sector will focus on two objectives:

- 1. Provide timely food support, in-kind or through cash, to the food insecure refugees in new and protracted situations.**
- 2. Enhance the self-reliance of refugees by promoting activities targeting households and individuals through conditional seasonal programmes linked to livelihoods and asset creation.**

The first objective aims to ensure food assistance to vulnerable refugees, including new arrivals, children and pregnant and lactating women. In 2021, CRP partners explored different modalities to provide food assistance according to the local context. Increasingly cash modalities are used considering market conditions, availability of food products and preferences of vulnerable populations. Further cultural and gender dynamics, safety and security of cash receiving populations and potential effects on social cohesion have to be assessed before transitioning to cash based interventions.

The BANVA from 2021 has shown that cash preferences, access to markets and perceived safety of receiving cash differs from state to state with access to markets and perceived safety to travel to markets being higher in Kassala, Gedaref, West Kordofan and North Darfur compared to other states.

Food assistance in camps is a high priority, as refugees living in camps are highly reliant on food assistance. Given the high inflation and challenging economic situation in Sudan, voucher and cash values must be periodically adjusted to ensure that the minimum daily food consumption requirement of 2,100 Kcal per person is maintained. CRP partners will be ready to scale up food assistance and provide cooked meals at the outset of an emergency with large scale refugee inflows, if required.

As refugees in Sudan continue to face challenges to access work permits, support to refugees in this respect remains a key priority. Livelihood interventions include agricultural and livestock support through the provision of inputs and productive assets to facilitate either seasonal labour or small scale income opportunities. Support of agricultural extension services and capacity development provides refugee farmers with technical advice and inputs to support their agricultural production. Farming interventions will incorporate climate considerations and promote farming techniques that minimize impact on the environment.

Vocational and language training, as well as training in financial literacy and entrepreneurship followed up with coaching and mentoring support help refugees to apply their existing skills and build on them to further increase their income. Small scale business grants provide start-up capital for refugees to promote entrepreneurship, especially for the youth.

The response will advocate with development partners to strengthen refugee and host community's access to livelihoods, including through facilitating access to markets and financial services, TVET programs, integrating livelihood interventions with other key sectors, improving access to productive assets, and continued policy dialogue on self-reliance and access to work in line with GRF pledges.



Refugee youths in Um Rakuba camp in eastern Sudan started a business cutting firewood for fellow camp residents. Many refugees in the camp have found innovative and resourceful ways to begin rebuilding their lives. Set up in January this year, the camp already has a vibrant market, coffee shops, kiosks, hair salons
Um Rakuba/ Gedaref State/ Sudan.
© UNHCR/AHMED KWARTE



Water, Sanitation & Hygiene

BUDGET		
SOUTH SUDAN REFUGEES	ETHIOPIAN REFUGEES	OTHER REFUGEE POPULATIONS
USD 26,331,637	USD 37,083,839	USD 7,223,655
TOTAL REQUIREMENTS		USD 70,639,131
NUMBER OF RESPONDING AGENCIES		28

Needs Analysis

Based on the Basic Needs and Vulnerability Assessment (BANVA) for Refugees in Sudan, a high WASH vulnerability is affecting both refugees and host communities across all surveyed states, namely Gedaref, Sennar, Khartoum, North Darfur, Central Darfur and North Kordofan. Except in White Nile, refugees have a higher WASH vulnerability compared to their host communities. Most refugees experienced high and severe WASH vulnerability in all states.

Access to sufficient safe water is a fundamental human need. Water supply quantities average 17 litres per person per day for South Sudanese refugees (below the sphere standard). Some areas remain far below international standards with just 8 litres per person per day, especially in Gedeid and Gereid in South Kordofan where refugees walk for over 5km in search of water, especially during the dry season. In general, populations are accessing water from unprotected sources and the water is consumed untreated. Water storage is also problematic with households typically only having access to a limited number of unclean jerry cans. This issue, also coupled with the lack of adequate ground water sources, remains challenging. The hafirs or dam constructions appear to be the most viable options, although they require significant initial investment, and it is difficult to ensure water quality which requires establishment of water treatment units.

Several public facilities do not have access to water on site and water is usually transported by donkey carts. Outside of El Radom settlement in South Darfur, CAR refugees have only access to 5-10 litres per person per day, which is still far below the water daily per capita standard of 20 l/p/d. Reduced water quantities are also a result of erratic fuel supplies in the local market. In Dimso, South Darfur, CAR refugees are living in settlements in Maramosa and Karakada towns, where water distribution networks need to be rehabilitated to accommodate the needs of both refugees and host communities. Due to lack of adequate ground water sources in Karkada, the construction of one hafir is required to improve the water coverage for refugees and host communities.

Moreover, solarisation of some water facilities is urgently required to increase sustainability and reliability in case of fuel shortages, and reduce their operational costs, as well as the negative environmental impact associated with fossil fuels. Whilst water provision is within desired quantities of ≥ 20 l/p/d for Chadian refugees in Central Darfur,

there is a need to support operation and maintenance of existing facilities to ensure continued supply of water. In Eastern Sudan, per capita water consumption remains well above 20 l/p/d for both new arrivals and refugees in protracted situations. For the protracted situation, camp water supply systems need to be connected with the national water systems, especially where host communities and local livestock are relying on camp water systems. Fluoride concentrations in Wad Sharifey and Um Gargour boreholes in Kassala exceeds that of the Sudanese water quality standard and of WHO of 1.5 mg/l. Current concentrations of Fluoride ranges between 1.7 and 4.6 mg/L. Excess fluoride consumed over long periods can cause skeletal fluorosis. This requires urgent attention to mitigate the undesirable effects of excessive fluoride. To this end, rainwater harvesting for the case of Um Gargour and river water supply are the proposed alternative interventions.

For new arrivals of Ethiopian refugees, water distribution networks in Um Rakuba, Tunaydbah, Babikri, Village 8 and Hamdayet need to be expanded to phase out water trucking, which is unsustainable due to very high running costs, to respond to the needs of the growing refugee population and the host communities.

Due to the high numbers of South Sudanese refugees arriving in 2021, the camps are overcrowded, and WASH service provision is overstretched. 52% of in-camp and large camp-like settlement refugee households across all states hosting refugees still do not have access to household latrines, while access to communal latrines is low and poorly managed. High latrine usage ratios remain a major challenge across all refuge hosting states especially in White Nile State, Khartoum and Gedaref with the highest latrine usage ratio of 94, 37 and 96 persons per latrine compared to the desired number of 20 persons per latrine. Open defecation due to poor latrine coverage and poor hygiene practices remain a challenge in most refugee hosting states, posing grave public health threats and risks, including the transmission of water borne diseases such as Hepatitis A and E, AWD, diarrhoea, dysentery, polio, and typhoid among others.

Heavy rains and flash floods hit several refugee camps/sites, including Um Rakuba and Tunaydbah in Gedaref state, Alganna and Algaya in White Nile and Naivasha “Open Area” in Khartoum where several houses, water points and latrines were affected and collapsed. This worsened the latrine situation, with some latrines having collapsed or filled with water, worsening the sanitation situation of the refugees.

In Alganna, White Nile State, a newly established refugee site, there is an urgent need for latrines and water facilities to be established. Household latrines remain the preferred approach together with family shared latrines where space availability is a challenge. The rapid depreciation of the Sudanese currency has greatly affected past targets of latrine construction, particularly in White Nile State. This means the latrine coverage remains quite low with widespread open defecation. Jerry can replenishment and cleaning, and hygiene promotion are urgently needed. Khartoum “Open Areas” have largely remained underserved with very limited partners’ presence to cover the overwhelming needs in all refugee hosting locations. Consistent and regular distribution of Personal Hygiene items for Menstrual Hygiene Management remains an area requiring urgent attention for all refugees. Investments in innovative low-cost household sanitation facilities and hygiene awareness raising are urgently needed to mitigate ongoing health related risks. Installation of hand washing facilities at all schools, health facilities, marketplaces, and at restaurants, and ensuring consistent provision of soap and water availability are of critical importance.

Soap distribution to the general population of at least 450 g/p/month across all locations is highly recommended to prevent the spread of COVID-19 and other WASH-related diseases.

Management of solid waste from household levels, to collection points and final disposal sites continues to be a challenge with limited household waste collection containers, improper use of collection points, and strained transportation means of waste from collection points to final disposal sites.

Response Strategy and Priorities

The overall objective of WASH is to provide uninterrupted safe and adequate water supply, sanitation and adequate hygiene support to refugees, surrounding host communities and other persons of concern. For the 2022 CRP, the WASH sector focuses on the following three objectives:

- 1. Refugees and affected host communities have improved access to safe and sufficient water supply.**
- 2. Access to safe, dignified and segregated sanitation facilities is improved.**
- 3. Hygiene promotion services are improved.**

To ensure improved and sustained access to safe and sufficient water supply, CRP partners will focus on continued operation, rehabilitation and maintenance of existing systems, as well as construction of new water supply systems. Solarisation of existing and new water pumping systems will be prioritised across all areas to improve sustainability and reduce negative environmental impact. In line with environmental protection, ground water quality monitoring will be done at all boreholes and water level trends will be analyzed. The water quality monitoring results will be shared periodically with all stakeholders. Rehabilitation and construction of new hafirs will be prioritised in areas with underground water scarcity, especially in South Kordofan and Dimsu locality of South Darfur. To promote peaceful co-existence, provision of water will also be extended to host communities sharing the same resources with refugees. For Eastern Sudan, priority will be given to improving and sustaining the water supply through operation and maintenance of existing boreholes, construction of new water points, expansion of water networks and improvement of water quality monitoring. It will be crucial to support and manage the transition from a care and maintenance water and sanitation supply model for refugees to an integrated supply model, serving both forcibly displaced populations and host communities, based on sustainable service delivery and an improvement of cost efficiency. Fluoride level mitigation measures will be put in place through provision of supplementary water supply sources, particularly in Wad Sharifey and Um Gargour camps to ensure the water quality is within acceptable drinking standards. Household water treatment products will be provided where inevitably households access raw water. Capacity building of community representatives in operation, maintenance of water supply facilities and basic repairs will be envisioned. Furthermore, community engagement and the establishment of community maintenance structures will be supported to increase local ownership and sustainability.

For sanitation and waste disposal and management, support for the construction and rehabilitation of household latrines will be prioritised. Family household shared latrines will be constructed where there is limited space. Communities will be consulted and included in the planning and construction of new latrines. For communal latrines,

cleaning modalities will be discussed with the beneficiaries who are expected to clean their latrines. Apart from construction, decommissioning and desludging of existing communal latrines will continue. To ensure a safe living environment, vector control and solid waste management will be undertaken. CRP partners will provide vector chemicals & equipment, engage personnel to mobilize the communities and participate in vector control & prevention activities, as well as in effective waste management through provision of waste transportation means, designation of waste disposal areas, provision of communal waste collection tools and encouraging households to effectively manage waste through various hygiene promotion sessions.

Timely and consistent soap provision together with hygiene promotion sessions remain important to promote sound personal hygiene practices, such as hand washing especially in the fight against infectious diseases such as waterborne diseases and the COVID-19 virus. In addition to soap provision, timely and consistent provision of menstrual hygiene management items will be effected for women and girls of reproductive age. Key emphasis will also be on awareness sessions on menstrual hygiene management to empower teenage girls in particular.

Cash-based interventions will be incorporated into WASH programming whenever feasible. Pre-positioning of emergency WASH supplies and items will be ensured for timely delivery of WASH services and strengthening Hepatitis E (HEV), dengue fever, AWD, Cholera, floods preparedness and response. Continued emphasis will be given to strengthen WASH support in the communities and at key institutions, such as schools and health facilities. The refugee WASH sector will work closely with the refugee education sector in the areas of hygiene promotion and awareness, as well as provision of WASH facilities at schools. Inter-sectoral coordination will continue to be strengthened in order to increase the WASH impact in the communities in achievement of durable solutions for refugees and peaceful co-existence with the host communities.



Somai, an asylum-seeker from Ethiopia is pictured at a refugee camp in Blue Nile State. She explained she had to cross into neighbouring Sudan when her village was attacked, and everything was destroyed. Somai arrived at this camp a few days ago, and narrated how she endured days of long walks with her children, in search of safety. Camp 6/ Blue Nile State/ Sudan. © WORLD VISION

Financial Requirements (By Organization and Sector)

ORGANIZATION	PROTECTION			TOTAL PROTECTION	EDUCATION	HEALTH & NUTRITION	SHELTER & NFIS	ENERGY & ENVIRONMENT	FOOD SECURITY & LIVELIHOODS	WASH	TOTAL
	PROTECTION	GBV	CHILD PROTECTION								
ACTED	\$0	\$0	\$0	\$0	\$0	\$0	\$450,000	\$0	\$1,600,000	\$1,250,000	\$3,300,000
ADRA	\$714,000	\$30,000	\$36,700	\$780,700	\$430,000	\$0	\$711,000	\$391,000	\$306,000	\$990,000	\$3,608,700
ALMANAR	\$675,000	\$0	\$0	\$675,000	\$0	\$1,527,500	\$0	\$0	\$0	\$0	\$2,202,500
ARC/ALIGHT	\$2,600,000	\$160,000	\$0	\$2,760,000	\$0	\$4,651,735	\$0	\$0	\$1,400,000	\$1,420,000	\$10,231,735
BPWO	\$0	\$18,000	\$0	\$18,000	\$0	\$0	\$0	\$0	\$210,700	\$0	\$228,700
CAFOD	\$403,287	\$618,000	\$0	\$1,021,287	\$0	\$0	\$0	\$335,073	\$171,000	\$821,882	\$2,349,242
CARE	\$0	\$36,000	\$0	\$36,000	\$0	\$1,753,705	\$0	\$15,000	\$131,000	\$1,500,000	\$3,435,705
CONCERN	\$0	\$0	\$0	\$0	\$0	\$2,624,000	\$0	\$0	\$1,000,000	\$45,500	\$3,669,500
COOPI	\$0	\$0	\$0	\$0	\$0	\$0	\$1,780,000	\$120,000	\$400,000	\$3,100,000	\$5,400,000
DRC	\$1,500,000	\$1,500,000	\$0	\$3,000,000	\$0	\$0	\$1,350,000	\$200,000	\$150,000	\$0	\$4,700,000
FAO	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$100,000	\$5,145,000	\$0	\$5,245,000
GAH	\$387,595	\$0	\$679,410	\$1,067,005	\$2,703,864	\$0	\$0	\$0	\$0	\$0	\$3,770,869
HOPE	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$200,000	\$450,000	\$650,000
IOM	\$0	\$0	\$0	\$0	\$0	\$245,000	\$4,750,000	\$0	\$0	\$12,450,000	\$17,445,000
IRC	\$0	\$1,590,704	\$953,848	\$2,544,552	\$0	\$2,000,000	\$0	\$0	\$660,000	\$1,058,405	\$6,262,957
IRW	\$200,000	\$0	\$0	\$200,000	\$2,350,000	\$250,000	\$0	\$0	\$542,500	\$2,007,120	\$5,349,620
JAM	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$254,300	\$254,300
JASMAR	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$318,000	\$318,000
MEDAIR	\$0	\$0	\$0	\$0	\$0	\$1,660,000	\$1,825,000	\$0	\$0	\$500,000	\$3,985,000
MERCY CORPS	\$200,000	\$250,000	\$0	\$450,000	\$0	\$1,500,000	\$410,000	\$0	\$1,000,000	\$800,000	\$4,160,000
MUTAWINAT	\$1,000,000	\$500,000	\$0	\$1,500,000	\$0	\$0	\$0	\$0	\$0	\$0	\$1,500,000
NADA	\$106,750	\$175,300	\$196,500	\$478,550	\$0	\$0	\$0	\$0	\$0	\$0	\$478,550
NCA	\$0	\$502,000	\$0	\$502,000	\$58,500	\$184,644	\$0	\$350,000	\$0	\$1,004,856	\$2,100,000
NRC	\$2,950,000	\$0	\$0	\$2,950,000	\$2,500,000	\$0	\$3,500,000	\$0	\$1,550,000	\$4,000,000	\$14,500,000
PLAN INT.	\$0	\$272,000	\$1,100,000	\$1,372,000	\$1,000,000	\$900,000	\$300,000	\$450,000	\$812,000	\$600,000	\$5,434,000
PUI	\$95,000	\$105,000	\$0	\$200,000	\$0	\$2,300,000	\$0	\$0	\$0	\$0	\$2,500,000
RELIEF INT.	\$0	\$0	\$0	\$0	\$0	\$1,442,138	\$0	\$0	\$0	\$987,514	\$2,429,652
SCI	\$0	\$0	\$0	\$0	\$650,000	\$0	\$0	\$0	\$0	\$0	\$650,000
SI	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,500,000	\$1,500,000
SRCS	\$10,191	\$0	\$0	\$10,191	\$0	\$185,923	\$174,478	\$0	\$0	\$193,958	\$564,550
UNDP	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$480,000	\$10,080,000	\$0	\$10,560,000
UNFPA	\$0	\$5,558,312	\$0	\$5,558,312	\$0	\$7,947,461	\$0	\$0	\$0	\$0	\$13,505,773
UNHCR	\$104,334,459	\$9,756,593	\$9,756,593	\$118,519,418	\$11,955,911	\$15,954,651	\$35,568,529	\$8,644,445	\$2,672,921	\$22,957,617	\$216,273,492
UNICEF	\$0	\$164,635	\$2,148,665	\$2,313,300	\$6,749,745	\$6,295,780	\$0	\$0	\$0	\$4,056,640	\$19,415,465
UPO	\$134,000	\$205,000	\$160,000	\$499,000	\$475,800	\$200,000	\$347,000	\$0	\$219,000	\$515,700	\$2,256,500
WFP	\$0	\$0	\$0	\$0	\$0	\$4,242,058	\$0	\$0	\$105,797,876	\$0	\$110,039,934
WHH	\$0	\$0	\$0	\$0	\$0	\$100,300	\$812,500	\$137,300	\$326,835	\$895,313	\$2,272,248
WHO	\$0	\$0	\$0	\$0	\$0	\$10,350,000	\$0	\$0	\$0	\$4,000,000	\$14,350,000
WVI	\$490,700	\$0	\$654,250	\$1,144,950	\$222,000	\$156,400	\$0	\$0	\$3,225,000	\$692,076	\$5,440,426
ZOA	\$0	\$0	\$0	\$0	\$504,500	\$2,270,250	\$0	\$0	\$0	\$2,270,250	\$5,045,000
TOTAL	\$115,800,982	\$16,113,317	\$15,685,966	\$147,600,265	\$29,600,320	\$68,741,545	\$51,978,507	\$11,222,818	\$137,599,832	\$70,639,131	\$517,382,418

Financial Requirements

By Refugee Population and Organization

ORGANIZATION.	SOUTH SUDANESE	ETHIOPIAN	OTHER REFUGEES	TOTAL
ACTED	\$1,550,000	\$1,750,000	\$0	\$3,300,000
ADRA	\$2,707,000	\$690,000	\$211,700	\$3,608,700
ALMANAR	\$2,160,000	\$0	\$42,500	\$2,202,500
ARC/ALIGHT	\$4,600,000	\$2,431,735	\$3,200,000	\$10,231,735
BPWO	\$228,700	\$0	\$0	\$228,700
CAFOD	\$0	\$2,349,242	\$0	\$2,349,242
CARE	\$1,289,705	\$1,500,000	\$646,000	\$3,435,705
CONCERN	\$3,445,500	\$224,000	\$0	\$3,669,500
COOPI	\$1,790,000	\$2,180,000	\$1,430,000	\$5,400,000
DRC	\$1,500,000	\$1,700,000	\$1,500,000	\$4,700,000
FAO	\$0	\$5,245,000	\$0	\$5,245,000
GAH	\$3,458,540	\$0	\$312,329	\$3,770,869
HOPE	\$450,000	\$200,000	\$0	\$650,000
IOM	\$7,870,000	\$7,575,000	\$2,000,000	\$17,445,000
IRC	\$0	\$6,262,957	\$0	\$6,262,957
IRW	\$3,425,000	\$1,924,620	\$0	\$5,349,620
JAM	\$0	\$254,300	\$0	\$254,300
JASMAR	\$0	\$318,000	\$0	\$318,000
MEDAIR	\$1,505,000	\$2,480,000	\$0	\$3,985,000
MERCY CORPS	\$2,160,000	\$2,000,000	\$0	\$4,160,000
MUTAWINAT	\$900,000	\$300,000	\$300,000	\$1,500,000
NADA	\$478,550	\$0	\$0	\$478,550
NCA	\$449,235	\$1,650,765	\$0	\$2,100,000
NRC	\$6,700,000	\$7,800,000	\$0	\$14,500,000
PLAN INT.	\$4,034,000	\$1,400,000	\$0	\$5,434,000
PUI	\$0	\$2,500,000	\$0	\$2,500,000
RELIEF INT.	\$2,429,652	\$0	\$0	\$2,429,652
SCI	\$0	\$650,000	\$0	\$650,000
SI	\$0	\$1,500,000	\$0	\$1,500,000
SRCS	\$0	\$564,550	\$0	\$564,550
UNDP	\$8,976,248	\$527,864	\$1,055,888	\$10,560,000
UNFPA	\$7,582,798	\$4,651,683	\$1,271,292	\$13,505,773
UNHCR	\$110,939,219	\$71,963,792	\$33,370,481	\$216,273,492
UNICEF	\$14,165,620	\$5,249,845	\$0	\$19,415,465
UPO	\$818,000	\$526,500	\$912,000	\$2,256,500
WFP	\$75,867,439	\$19,385,912	\$14,786,583	\$110,039,934
WHH	\$1,060,201	\$486,201	\$725,846	\$2,272,248
WHO	\$7,650,000	\$6,200,000	\$500,000	\$14,350,000
WVI	\$4,660,690	\$671,986	\$107,750	\$5,440,426
ZOA	\$1,072,063	\$3,972,937	\$0	\$5,045,000
TOTAL	\$285,923,160	\$169,086,889	\$ 62,372,369	\$517,382,418



A young Ethiopian refugee girls enjoys a donkey ride on her way home after receiving in-kind food during a food distribution exercise in Um Rakuba camp
Um Rakuba/ Gedaref State/ Sudan.
© UNHCR/SAMUEL OTIENO



ANNEXES

Annex.1: Monitoring Framework

The monitoring framework of the Sudan CRP 2022 is designed to adjust to the complex circumstances in Sudan. Monitoring and Evaluation is a key component of the Response Plan and corrective action will be taken should the situation require it. Accordingly, Impact and output level indicators were selected to measure progress towards the RRP's strategic objectives. While progress on impact will be monitored by UNHCR through its internal system the RCF will collect reporting data from trained focal points of interagency partners on quarterly basis through established tools that disaggregate by gender, age and population group.

PROTECTION

- # of PoC receiving legal counselling assistance
- # of persons attending general protection awareness campaigns
- # of community-based structures established or maintained (CPBNs, community reconciliation committees, youth networks, etc.)
- # of people that receive cash under MPCA at full
- # of people that receive cash under MPCA at half
- # of service providers trained on protection approaches or issues
- # of advocacy interventions undertaken on protection issues
- # of asylum seekers and refugees individually registered at the end of reporting period
- # of identity documents issued to PoC.
- # of asylum seekers undergone individual RSD
- # refugee children receiving individual case management
- # of permanent safe spaces furnished and maintained according to the minimum standards
- # UASC receiving appropriate interim or long-term alternative care
- # of identified UASC that are reunified with their families
- # of women, men, boys and girls participating in awareness raising activities on CP issues
- # of women, men, boys and girls of community-based child protection structures trained on CP related training
- # of children assisted with civil status registration or documentation
- # of children with disability reached with direct services to improve their care and wellbeing
- # of identified SGBV survivors assisted with appropriate support
- # of campaigns to raise awareness about GBV
- # of people trained on GBV topics

EDUCATION

- # children supported with daily HEB/hot school meal/take-home food ration equivalent
- # Teacher kits provided to primary or secondary school teachers
- # Teachers trained (primary school): Training Package for Teachers in Crisis Contexts (TiCC) or similar
- # School uniforms provided to primary or secondary school children
- # School furniture sets provided to primary schools
- # Classroom kits provided to primary or secondary school classrooms

EDUCATION

- # Teachers (primary or secondary schools) who received a teacher incentive
- # Classrooms constructed (primary and secondary)
- # Classrooms rehabilitated (primary and secondary)
- # School latrines (gender segregated) constructed (to universal design to accommodate children with disabilities)
- # School latrines (gender segregated) rehabilitated (modified to universal design to accommodate children with disabilities)
- # Handwashing stations (permanent/semi-permanent) constructed
- # Handwashing stations (permanent/semi-permanent) rehabilitated
- # Schools provided with cleaning kits
- # Schools trained on COVID19 school protocols

HEALTH & NUTRITION

- # of children that received outpatient SAM treatment
- # of children that received inpatient SAM treatment
- # of children that received MAM treatment
- # of people given supplementary feeding
- # of children that receive micronutrient supplements
- # of children that receive vitamin A supplements
- # of people given IYCF counselling
- # of children receive supplementary feeding
- # of PLW receive supplementary feeding
- # of outpatient consultations conducted.
- # of trauma consultations supported
- # of mental health consultations conducted.
- # of physical rehabilitation sessions conducted.
- # of antenatal care visits conducted.
- # of vaginal deliveries attended by a skilled attendant
- # of caesarian deliveries attended by a skilled attendant.
- # of postnatal sessions conducted.
- # of cases referred for specialized treatment (between levels of care across Sudan).
- # of admissions to receive inpatient treatment.
- # of supported mobile medical units.
- # of health staff trained/re-trained on different health topics
- # of health facilities refurbished or rehabilitated

SHELTER & NFIS

- # of households that received NFI kits
- # of households that received emergency shelter kits
- # of households that received tents
- # of households that received construction materials

SHELTER & NFIS

- # of households that received durable shelters
- # of households that received cash/voucher for emergency/improved shelter
- # of households that received cash/voucher for transitional/durable shelter
- # of site maintenance activities implemented

ENERGY & ENVIRONMENT

- # of refugee households who received fuel per month
- # of refugee HH having energy saving stove and equipment
- # of persons trained on clean energy sources
- # of solar lights installed
- # of hectares of trees planted

FOOD SECURITY & LIVELIHOODS

- # of people that receive a full ration of food
- # of people that receive a half ration of food
- # of people receiving agricultural support
- # of people receiving livestock support
- # of vocational training sessions
- # of youth supported

WASH

- # of hand pumps installed
- # of water yards installed
- # of treatment plants installed
- # of new hafirs constructed
- # of handpump rehabilitated
- # of water yards rehabilitated
- # litre provided per person per day
- # of water sources maintained
- # of shared/non-shared between two household latrines installed
- # of communal (in camps and other communal locations of 4-5 stances) latrines installed
- # of shared/non-shared between two household latrines rehabilitated
- # of communal (in camps and other communal locations of 4-5 stances) latrines rehabilitated
- # of households that received soap
- # of households that received jerrycans

WASH
of hand washing facilities constructed
of women receiving sanitary materials
of people reached by campaigns in comunal set ups
of communal vector control activities
Metric tons of garbage disposed by solid waste management
of water sources running on solar power
of shower blocks/ bathing facilities constructed
of shower blocks/bathing facilities rehabilitated



Ethiopian refugee Hailu Mehari, 65, sits with his family outside their shelter in Um Rakuba refugee camp in eastern Sudan. From left his son Yemane Hailu, 23, daughter Brekti Hailu, 18, and his wife Tsebe Tekla, 50. High Commissioner for Refugees Filippo Grandi paid a one-day visit to the camp with Norway's International Development Minister, Dag-Inge Ulstein. ; Um Rakuba camp was reopened in November 2020 to accommodate Ethiopian refugees fleeing the Tigray conflict. The new arrivals arrived via the Lugdi and Hamdayet border crossing points. The refugees were relocated to Um Rakuba and another site, Tunaydbah. Um Rakuba hosts more than 8,000 refugees.

Um Rakuba/ Gedaref State/ Sudan.
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Annex.2: Refugee Severity of Needs Ranking Indicators

SECTOR	INDICATOR	DATA SOURCES
PROTECTION	# of Woman-headed HH	UNHCR ProGres
	# of girls / boys that have been separated from their parents, Unaccompanied and Separated Children	UNHCR ProGres and Field data
	% of individually registered	UNHCR ProGres
EDUCATION	# of school aged children	UNHCR ProGres
	# of projected arrival of school age children in 2022	UNHCR ProGres
HEALTH	% Measles vaccination with card (9-59 months)	SENS, S3M
	% Currently enrolled in ANC programme	SENS, S3M
	Vitamin A supplementation within past 6 months with card	SENS, S3M
NUTRITION	% GAM rate (6-59 months)	SENS, S3M
	% Anaemia (6-59 months)	SENS, S3M
	% Stunting (6-59 months)	SENS, S3M
	% Exclusive breast feeding (0-5 months)	SENS, S3M
	% Introduction of food (6-8 months)	SENS, S3M
WASH	% Diarrhea in the past 2 weeks	SENS, KAP survey
	Improved drinking water source within 30 minutes	S3M
	% households using an improved toilet facility, not shared	SENS, 3SM, KAP
FOOD SECURITY & LIVELIHOODS	IPC Phase	IPC 2021
	Age-appropriate dietary diversity	S3M
	Age-appropriate meal frequency	S3M
SHELTER & NON FOOD ITEMS	Congestion of camp (population/capacity)	UNHCR ProGres
	# of new arrival in 2021 who needs ES/NFI	UNHCR ProGres
	# of newly registration pop in 2021 who needs ES/NFI	UNHCR ProGres



Young Ethiopian asylum-seekers play volleyball in Camp 6, Blue Nile State. Camp 6 refugee camp, southeast of Sudan, is home to more than 3,200 refugees from Ethiopia. Camp 6/ Blue Nile State/ Sudan.

Annex.3: 2022 Refugee Response Prioritization

PRIORITY #1 (11 LOCALITIES)			
SEVERITY	STATE	LOCALITY	LOCATION TYPES
5	East Darfur	Bahr El Arab	Camp
5	East Darfur	Al Firdous	Rural Settlement
5	East Darfur	Abu Jabrah	Rural Settlement
5	Gedaref	Basundah	Reception point
5	Gedaref	Al Fashaga	Camp, reception point
5	Kassala	Reifi Wad Elhilaiv	Camp, reception point
5	Khartoum	Jebel Awlia	Khartoum open area
5	Khartoum	Sharg An Neel	Khartoum open area
5	North Darfur	Al Lait	Rural Settlement
5	South Kordofan	Al Leri	Camp-like settlement, reception point
5	White Nile	Aj Jabalain	Camp
PRIORITY #2 (23 LOCALITIES)			
4	Blue Nile	Wad Al Mahi	Camp
4	Central Darfur	Azum	Camp
4	Central Darfur	Um Dukhun	Camp-like settlement, reception point
4	East Darfur	Abu Karinka	Rural Settlement
4	East Darfur	Adila	Rural Settlement
4	East Darfur	Assalaya	Camp
4	Gedaref	Al Mafaza	Camp-like settlement,
4	Gedaref	Galabat Ash-Shargiah	Camp
4	Kassala	Reifi Khashm Elgirba	Camp
4	Khartoum	Khartoum	Urban
4	Khartoum	Um Bada	Khartoum open area
4	South Darfur	Beliel	Camp
4	South Darfur	Damso	Camp-like settlement

PRIORITY #2 (23 LOCALITIES)			
4	South Darfur	Al Radoum	Camp-like settlement, reception point
4	South Darfur	Um Dafoug	Camp-like settlement
4	South Kordofan	Abu Jubayhah	Camp-like settlement, reception point
4	West Kordofan	Al Meiram	Camp-like settlement, reception point
4	West Kordofan	Keilak	Rural Settlement
4	West Kordofan	Al Lagowa	Rural Settlement
4	White Nile	As Salam / Ar Rawat	Camp
4	White Nile	Kosti	Camp
PRIORITY #3 (16 LOCALITIES)			
3	Aj Jazirah	Um Algura	Camp
3	Kassala	Reifi Kassla	Camp
3	Blue Nile	Ar Rusayris	Rural Settlement
3	East Darfur	Ad Du'ayn	Urban
3	East Darfur	Yassin	Rural Settlement
3	Gedaref	Madeinat Al Gedaref	Rural Settlement
3	South Darfur	Buram	Urban
3	South Darfur	As Salam - SD	Rural Settlement
3	South Darfur	Nyala Janoub	Rural Settlement
3	South Kordofan	Al Quoz	Rural Settlement
3	South Kordofan	Dilling	Rural Settlement
3	South Kordofan	Habila - SK	Rural Settlement
3	South Kordofan	At Tadamon - SK	Rural Settlement
3	West Kordofan	Babanusa	Rural Settlement
3	West Kordofan	An Nuhud	Rural Settlement
3	West Kordofan	Al Idia	Rural Settlement
3	West Kordofan	As Salam - WK	Urban
3	West Kordofan	Al Dibab	Rural Settlement
3	West Kordofan	Ghubaish	Rural Settlement
3	North Darfur	El Fasher	Urban



Darbatti refugee settlement is one of the remotest refugee settlements in South Kordofan. The settlement faces shortage of water during the dry season. The refugee women have to spend hours to fetch drinking water from limited handpump installed inside the settlement. Haffirs (water reservoir) are the usual water sources for the refugee community but cannot suffice during the dry season making handpump only available option for drinking water. ; Darbatti refugee settlement is one of the biggest refugee settlements in South Kordofan, Sudan that hosts around 14,000 South Sudanese refugees. It is located in Al Ieri locality, South Kordofan, Sudan. The settlement was created in late 2013 after conflict in South Sudan forced people to flee into Sudan. Currently, the South Sudanese refugees are living in more than 35 hundred shelters.

Sudan has a long history of hosting refugees and by the end of 2021 over 1.14 million refugees are projected to live in Sudan. Currently Sudan is the second largest refugee hosting country in Africa, hosting refugees and asylum seekers from South Sudan, Eritrea, Ethiopia, Central African Republic (CAR), Chad, Syria, Yemen and other countries (such as Somalia and Democratic Republic of Congo (DRC)), including both protracted and newly displaced populations such as those who recently fled the conflict in the Tigray region of Ethiopia. Sudan is also one of the major hosting countries for South Sudanese refugees, with over 800,000 persons expected in the country by the end of 2021. Refugee affairs are governed by the Government of Sudan (GOS) according to its Asylum (Organization) Act 2014.



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SUDAN COUNTRY REFUGEE RESPONSE PLAN

January - December 2022