

Sudan



International Medical Corps has worked in Sudan since 2004, offering primary healthcare, nutrition and WASH (water, sanitation and hygiene) programs, often integrating them with existing services in the country to achieve more effective outcomes.

We currently provide all three services in 71 health facilities to residents across five of Sudan's 18 states, including three in Sudan's Darfur Region, and in Blue Nile and South Kordofan states. The ongoing humanitarian crisis in Darfur has claimed thousands of lives, uprooted millions of people, disrupted already fragile healthcare systems and prevented families from returning to their homes. Despite limited access and chronic instability, we provide humanitarian assistance to more than 2 million people per year.

Once the largest and one of the most geographically diverse nations in Africa, Sudan split into two separate countries in July 2011, after the people of what is now South Sudan voted for independence.

Today, tribal conflict and communal violence continue to have a severe impact on much of Sudan's population, especially women and children. Millions remain in displacement camps, relying almost entirely on humanitarian aid for essential services, while funding constraints continue to affect the ongoing humanitarian response. Distracted by humanitarian emergencies and increasing poverty caused by deteriorating economic conditions, Sudan continues to face critical unmet basic needs. The overall situation declined further following a military coup in October 2021, and the collapse of a transitional government. The political and economic crises that followed continue to disrupt humanitarian relief efforts across the country. Those in need of aid in Sudan have increased to 14.3 million in 2022 from 8.5 million in 2019. Of those 14.3 million, approximately 2.9 million are internally displaced, 900,000 are returnees and 1.2 million are refugees.

In 2021, Sudan's humanitarian landscape was defined by three major issues: political instability, tribal conflict and the COVID-19 pandemic. Sudan's health system remained significantly underfunded, compromising its ability to fight disease and provide quality health services. This crisis is further compounded by annual outbreaks of disease that include malaria, cholera, dengue fever and chikungunya. By mid-April 2022, the World Health Organization (WHO) had reported more than 62,000 confirmed cases of COVID-19 and almost 5,000 COVID-related deaths since the start of the pandemic—figures that are certainly undercounted. Amid these challenges, International Medical Corps provides emergency medical relief to more than 2 million people per year in Sudan.



With an estimated 10.9 million people facing heightened levels of food insecurity (IPC Phase 3 and 4), and 10.4 million people needing health assistance because they do not have access to a functional health center within two hours of their location, Sudan requires significant support. Many clinics are overwhelmed or simply closing down because of the lack of staff and absence of essential medicines and equipment.

HEALTH

International Medical Corps currently supports and operates in 71 health facilities across Sudan, delivering essential health services, strengthening health systems and providing resources to deploy skilled health workers to those facilities. Essential health services include treatment and prevention of disease, reproductive healthcare, health education, immunization, child healthcare and surveillance, as well as referrals to emergency- and secondary-level health services, including surgery and obstetric care. Reproductive health services include prenatal care, clean and safe deliveries attended by skilled birth attendants, postnatal and newborn care, and family planning. For children, we provide integrated management of childhood illnesses, immunizations and nutrition screening.

In 2021, International Medical Corps reached an estimated 1.63 million Sudanese with our integrated health, WASH and nutrition programs. During the same period, we

provided 1.5 million outpatient consultations to those in need, including thousands of patients treated for acute respiratory infections, diarrhea and malaria, which continue to be the leading causes of disease in our program areas.

We also reached women with comprehensive reproductive health services. In 2021, this included 36,237 women who received antenatal care, 22,876 who delivered babies assisted by skilled healthcare personnel and 19,823 who received postnatal care. In addition, we immunized 79,419 children, including 41,843 vaccinated against measles. We have also been intensively engaged in the country's COVID-19 response, and continue to respond in five of the country's 18 states, supporting coordination meetings led by state ministries of health that are attended by stakeholders involved in the COVID-19 response and screening 278,056 people for COVID-19 since we began our response in March 2020.

WATER, SANITATION AND HYGIENE (WASH)

Many communities in Sudan experience sub-standard water quality and insufficient quantity. Influxes of refugees frequently strain already fragile host community and camp water-collection and sanitation systems. By expanding access to clean water, creating proper waste-disposal systems and providing safe sanitation facilities, we restore and protect healthy living conditions.

In Sudan, we implement WASH activities as part of health and nutrition interventions. These include:

- ▶ promotion of—and education about—good hygiene practices;
- ▶ creation of waste disposal facilities and safe practices;
- ▶ chlorination, rehabilitation and maintenance of water points;
- ▶ construction and rehabilitation of drainage canals and latrines; and
- ▶ improvement of WASH and infection prevention and control in health facilities.

In 2021, we trucked an estimated 5,690,520 liters of water to health facilities. In the same year, we reached 565,922 people with information about the need for safe hygiene practices and other WASH activities.



NUTRITION

We provide nutrition services in Sudan to those most vulnerable to hunger, including children under 5, pregnant women and nursing mothers. We operate 68 outpatient therapeutic programs (OTPs), 58 target supplementary treatment centers (TSFPs) and nine stabilization centers for malnourished children with life-threatening medical complications. In 2021, of the 429,391 people we screened for malnutrition, 80% were children under 5. Of those, thousands were malnourished. We treated 12,622 in OTPs, 29,998 in TSFPs, 24,319 children under 5 and 5,679 pregnant or nursing mothers.

HEALTH SYSTEMS STRENGTHENING

We support Sudan's Ministry of Health (MoH) efforts to promote a stronger healthcare-delivery system. Our activities include supporting service delivery, information management, health facility rehabilitation, deploying healthcare workers and providing medical supplies and drugs. In addition, we support the MoH with disease control, disease surveillance and immunization. We also train MoH staff on emergency preparedness.





CAPACITY BUILDING

Overall low capacity of the health system and its response mechanisms has severely weakened the ability to provide adequate healthcare. Strengthening the capacity of health staff, largely through training, helps communities move toward sustainability and self-reliance. Since arriving in Sudan in 2004, we have trained thousands of local national medical personnel, traditional birth attendants and community leaders. In 2021, we trained 3,693 people, providing them with skills that included:

- ▶ maternal and newborn healthcare;
- ▶ emergency obstetric and newborn care;
- ▶ rationed use of essential drugs;
- ▶ prevention and treatment of common communicable and non-communicable diseases;

- ▶ reproductive-health and early-childhood care;
- ▶ identification and management of common childhood illnesses;
- ▶ nutritional screening, treatment and prevention of malnutrition;
- ▶ outbreak preparedness and response-management care;
- ▶ infection prevention and control (IPC); and
- ▶ community-based feedback and response mechanisms.

The expertise of these providers is crucial to integrating healthcare services into the community. Their skills also provide the continuity of care needed to stabilize fragile healthcare systems and foster long-term recovery.



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A pre-eminent first responder since 1984, International Medical Corps delivers emergency medical and related services to those affected by conflict, disaster and disease, no matter where they are, no matter what the conditions. We also train people in their communities, providing them with the skills they need to recover, chart their own path to self-reliance and become effective first responders themselves.

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