



International Medical Corps staff members conduct a health education session for community members in South Sudan.

The conflict between the Sudanese Armed Forces (SAF) and Rapid Support Forces (RSF), which started on April 15, is ongoing. So far it has forcibly displaced about 5.5 million people, including more than 4.2 million people internally displaced and nearly 1.1 million people who have fled to neighboring countries.¹

The consequences for civilians living in Sudan have been severe, resulting in a humanitarian crisis there and surrounding countries. Before the conflict, the region was already challenged with displacement, economic and political instability, as well as extreme weather due to climate change.

Resources in the region are stretched, with refugees and returnees—primarily women and children—in dire need of medical care, food, clean water, shelter and non-food items such as cooking equipment and blankets. Host communities and those traveling from Sudan are also at high risk for disease, violence and malnutrition. Providing aid to communities across the region has proved to be challenging given the unpredictability of conflict and the current rainy season.²

International Medical Corps Response

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

In **Sudan**, International Medical Corps has maintained the functionality of 48 health facilities and revitalized nine more. Fifty-seven health facilities are now functional, including eight hospitals, 25 primary healthcare centers (PHCs), 19 basic health units and five mobile health and nutrition teams (MHNTs). The capacity of these functioning health facilities has been impacted by limited supplies and staff displacement, with only 22 of the 57 functioning health facilities able to provide reports on activities. Over the past two weeks, 13,451 people received medical consultations, 945 pregnant women received with antenatal

FAST FACTS

- On April 15, clashes between the Sudanese Armed Forces (SAF) and the Rapid Support Forces (RSF) erupted in Khartoum. Since then, thousands of deaths and injuries have been confirmed nationwide.
- More than 1 million people have fled Sudan to neighboring countries, while more than 4 million have been displaced inside the country. These numbers have been rising as the violence continues.

OUR FOOTPRINT

- International Medical Corps has been providing critical health, nutrition, protection, mental health and psychosocial support (MHPSS), and water, sanitation and hygiene (WASH) services in Sudan since 2004.

OUR RESPONSE

- International Medical Corps has launched a regional response focused on expanding existing services and activities to meet the increased needs of internally displaced persons (IDPs) in Sudan and refugees seeking safety in the Central African Republic (CAR), Chad and South Sudan.
- In Sudan, we have provided 13,451 medical consultations over the past two weeks.
- In CAR, we are providing food assistance to refugees through cash distribution.
- In Chad, we have finalized a memorandum of understanding with the Chadian government and are now fully authorized to operate in the country.
- In South Sudan, our teams have reached 17,836 people through awareness-raising sessions over the past month.

¹ <https://reliefweb.int/report/sudan/sudan-situation-unhcr-external-update-28-18-25-september-2023>

² <https://www.unhcr.org/news/stories/five-things-know-about-crisis-sudan>

consultations, 396 deliveries were assisted by trained birth attendants, and 491 mothers and newborns were provided with postnatal care consultations.

International Medical Corps continues to conduct routine nutrition activities, including the treatment of severe acute malnutrition (SAM), activities involving infant and young-child feeding (IYCF) and the distribution of donated ready-to-use therapeutic food (RUTF) to nutrition centers in Madani, Sennar and South Kordofan.

International Medical Corps has started providing health services in Alryad through a mobile clinic in West Darfur. On the first day of operation, we provide medical consultations to 30 patients, one-third of whom had confirmed malaria. There are ongoing efforts from the community members to mobilize those staying in West Darfur to benefit from the services we are providing.

In Blue Nile State, we deployed two mobile teams to Giesan locality to respond to the measles outbreak there. So far, the teams have identified and managed 108 patients with suspected measles among the 1,115 people that have received medical consultations.

We are supporting the Tayba PHC and operate an MHNT in gathering areas for internally displaced persons (IDPs) in Shegiddi, Souqatra North and Souqatra South. International Medical Corps has also incentivized 38 staff seconded by the Ministry of Health (MoH) to provide PHC services. Our teams have received 12 boxes of interagency emergency health kits (IEHKs) containing antimalarial and antibiotic medicines, as well as medical equipment. We dispatched pharmaceuticals and medical supplies to the Tayba PHC, as well as to the MHNT for use in IDP camps.

Our field teams visited two main referral hospitals—the maternity and pediatrics hospitals—in Wad Madani. Both hospitals have serious patient loads, a severe shortage of supplies, and extreme challenges with water, sanitation and hygiene (WASH) and infection prevention and control (IPC). At the pediatrics hospital, there are more children admitted to intensive treatment in foster care (ITFC) than the hospital bed capacity, meaning children and their mothers have been admitted and are being treated outside. In response, International Medical Corps is exploring ways to support both hospitals by providing medical supplies and pharmaceuticals, capacity building, data management, immunization support, and WASH and IPC services. Our teams have also already conducted a waste management assessment of the maternity hospital in Madani.

In Al Jazira state there is a considerable waste management issue, as the disruptive effects of the conflict in Khartoum have caused a significant number of IDPs to travel to Al Jazira. Poor hygiene and sanitation conditions, coupled with limited access to water, increases the risk of cholera or an outbreak of acute watery diarrhea. We held a meeting with the Emergency and Environmental Health departments of the state MoH to coordinate efforts and introduce International Medical Corps as a WASH partner.

Our teams are continuing to provide integrated mental health and psychosocial support (MHPSS) services, such as mental health consultations and individual and group-based PSS activities through an MoH seconded psychologist. PSS activities include psychological first aid (PFA), basic emotional support and psychoeducation on topics such as how to deal with stress, anxiety and depression. International Medical Corps is also helping to develop the Sudan National MHPSS Response Guidelines, to enhance partners' ability to respond to MHPSS emergencies.

In Khartoum state, International Medical Corps has signed a memorandum of understanding (MOU) with the state's MoH and the Humanitarian Aid Commission to support four health facilities, and will deploy a team this week to begin implementation. Our teams are continuing to support the Al Now Hospital, delivering lifesaving services to more than 1,500 patients in September.

International Medical Corps has been working in Sudan since 2004, providing critically needed health, nutrition, MHPSS, protection, and WASH services. We have also supported efforts by the country's MoH to strengthen health systems and build capacity for providers.

In **CAR**, our emergency response team based in Am-Dafok continues to support the MoH health facility. Our mobile medical unit (MMU) has also been deploying daily to the Korsi refugee camp to work alongside MoH personnel, delivering integrated health, MHPSS, nutrition and GBV services to refugees, returnees and vulnerable host communities.

Over approximately the past month, we provided 2,279 outpatient consultations through the Am-Dafok health facility and the MMU. Among the top reported health issues were respiratory infection (ARI), malaria and acute diarrhea. In addition to these consultations, our teams provided additional health, MHPSS, GBV and nutrition services. During the same reporting period, our teams delivered antenatal care services to 74 women, assisted with three deliveries, provided 61 postnatal care consultations, provided psychosocial services to 23 GBV survivors, delivered nine mental health consultations, conducted nutrition surveys for 190 households and screened 183 children for malnutrition.

In response to nutrition needs, we are providing food assistance to refugees through cash distribution, and have allocated one pallet of 10 IEHKs to support the response in CAR. These kits will be shipped to Bangui during the coming days.

Our teams have worked in CAR since 2007, providing support in primary healthcare, nutrition, GBV treatment and prevention, and reproductive, maternal and child health. International Medical Corps has also provided training for healthcare providers, midwives and protection assistants to help build the capacity and awareness of community groups.

In **Chad**, we have four team members assessing the humanitarian situation in the east, which is dealing with an influx of refugees from Sudan. Additionally, the team is exploring and establishing cross-border operations into the Darfur region of Sudan. To streamline our response logistics and support assessment efforts, we have initiated market research to identify suitable customs agents, transportation options and car rental services.

Our team has held several meetings with key government stakeholders, international NGOs and United Nations agencies. Over the next few weeks, the team will conduct assessments in the Ouidai, Silla and Wadi Fira regions to assess the existing humanitarian situation.

Our teams have worked in intermittently in Chad since 2003, providing services in nutrition, healthcare, capacity building, food security and livelihoods, maternal and child health, and MHPSS.

Since May, International Medical Corps has been responding to the influx of refugees and returnees in **South Sudan** by providing integrated health, GBV and mental health services at the Renk transit center. We also have been providing primary healthcare, GBV and nutrition services at the Bulukat reception center in Malakal. There are still surges of people coming into the country from Sudan, with most of them having been exposed to injuries and diseases due to lack of shelter as they travel and poor WASH conditions. They also are facing increased the risk of malaria, diarrheal diseases, acute respiratory infections and acute malnutrition due to the rainy season. High numbers of patients with various health challenges have overwhelmed healthcare workers in Bulukat and Renk, affecting the quality of services being provided, so the support International Medical Corps is providing there has been critical.

In response to the increased health needs in South Sudan, over the past month we have provided 9,422 curative outpatient consultations—primarily cases of malaria, acute watery diarrhea, upper respiratory tract infections and acute malnutrition. During the same time, we have provided awareness sessions on health, mental health, GBV and nutrition to 17,836 people; provided 484 people with psychological support; reached 2,478 women, girls and persons with disabilities with GBV response services; screened 4,130 people for acute malnutrition; and distributed BP5 (a high-calorie, vitamin-fortified, compact emergency food) to 1,728 children between the ages of 6 and 59 months. International Medical Corps will continue to collaborate with key stakeholders, including other NGOs, the MoH and relevant government authorities, to strengthen the response in South Sudan.

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



International Medical Corps team members use horse-drawn wagons to travel in CAR, ensuring continuity of operations despite the ongoing rainy season.