



International Medical Corps staff members conduct recreation activities in a women's and girls' safe space at the Bulukat reception center in South Sudan.

The war in Sudan between the Sudanese Armed Forces (SAF) and Rapid Support Forces (RSF), now in its seventh month, has created one of the worst humanitarian tragedies in recent history. The conflict has left more than 9,000 people dead and another 5.6 million people displaced.¹ More than 1 million people have fled to neighboring countries, while 4.6 million people have been internally displaced.

The country's health system has been severely impacted—more than 70% of healthcare facilities in Sudan have shut down at a time when infections from cholera, dengue and malaria are rising.² Displaced people face a daily struggle in accessing public services and resources in the areas where they arrive, leading to frightening living conditions for millions. These challenges have been further exacerbated by the collapse of banking and financial services, unreliable internet, infrastructure damage and limited telecommunications and electricity supplies.³

Women and children have been left particularly vulnerable, with cases of gender-based violence (GBV) increasing and an estimated 19 million children no longer in school due to the conflict. The continued escalation in violence and the deterioration of living conditions in the region have left millions in need of urgent humanitarian assistance.

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.

FAST FACTS

- On April 15, clashes between the Sudanese Armed Forces (SAF) and the Rapid Support Forces (RSF) erupted in Khartoum. Since then, an estimated 9,000 people have been killed and thousands more have been injured.
- More than 1 million people have fled Sudan to neighboring countries, while more than 4.6 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 more than 13,000 medical consultations over the past two weeks.
- In CAR, we provided 174 pregnant women with antenatal care services over the past month.
- In Chad, we are fully authorized to operate in the country and are planning to implement integrated multisectoral services to refugee camps.
- In South Sudan, our teams have reached 97,257 people through awareness-raising sessions since May.

¹ <https://www.npr.org/2023/10/21/1206104009/sudan-war>

² <https://www.nytimes.com/2023/10/27/world/africa/sudan-war-education-children.html>

³ <https://www.iom.int/news/sudan-faces-worlds-largest-internal-displacement-crisis>

In **Sudan**, International Medical Corps continues to provide health, mental health and psychosocial support (MHPSS), nutrition, and water, sanitation and hygiene (WASH) services to affected communities. We are continuing to collaborate with local authorities and international actors to assess and address evolving humanitarian needs.

International Medical Corps has maintained the functionality of 48 health facilities and revitalized nine more, meaning that there now are 57 functional health facilities, including eight hospitals, 25 primary care centers, 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 facilities able to provide reports on program activities. In the last two weeks, our teams provided 13,541 medical consultations, conducted antenatal consultations for 945 pregnant women, assisted with 396 deliveries and provided 491 mothers and newborns with postnatal care consultations.

We are continuing our routine nutrition services, such as the treatment of severe acute malnutrition (SAM) without medical complication in outpatient therapeutic programs (OTPs) and infant and young-child feeding (IYCF) activities. Our teams have received 351 donated cartons of ready-to-use therapeutic food (RUTF) and dispatched 193 supply cartons to 10 nutrition centers in Madani, Sennar and South Kordofan. We have received an additional 500 donated cartons of RUTF that we will dispatch to four of our supported facilities in South Darfur, and have conducted a three-day refresher training session on SAM and moderate acute malnutrition (MAM) management case screening and referral.

In response to the cholera outbreak, International Medical Corps has collaborated with local actors to send a Rapid Response Team (RRT)—consisting of a team leader, medical doctor, health officer and WASH officer—to Khartoum. We have also purchased two additional cholera kits to be distributed in supported health facilities in Khartoum that have been affected by the outbreak. In Madani, our teams have supported the clean-up and repair of the permanent cholera treatment center and provided WASH supplies. To further support the cholera response, we are providing complementary WASH services, as well as risk communication and engagement by providing hygiene education, hygiene kits, water storage tanks, chlorinated water, regular monitoring and disinfection of water sources and wells, and supplies for sanitizing, cleaning and disinfecting. We have also reached more than 300,000 people in hot-spot areas by airing messages from the Ministry of Health (MOH) on cholera and dengue.

In West Darfur, International Medical Corps began operating a second MHNT in the Dorti area of Genina, and continued providing health services in Alryad through a mobile clinic. Services include outpatient medical consultations for communicable and non-communicable diseases, reproductive health, laboratory, MHPSS, nutrition screening, immunization and treatment, and health promotion sessions for pregnant and lactating women (PLW) and children under 5. In October, our MHNT provided services to 2,549 people. Our teams have started providing integrated MHPSS services through Ministry of Health (MoH)-seconded psychologists and one mobile clinic in Dorti. The West Darfur team screened 227 children aged 6–59 months for wasting, and identified 36 children with MAM and nine with SAM without medical complication, and referred them to the OTP for treatment.

Our teams are continuing to support 22 health facilities in Central Darfur state. The facilities provide outpatient consultations for noncommunicable diseases, trauma care, oral rehydration for children under five, safe delivery services, antenatal care, postnatal care, mid-upper arm circumference screening for children under five and pregnant and lactating women (PLWs), and individual health education sessions. The Golo and Ummdukun hospitals have also been supporting lifesaving emergency obstetric care and surgery. Over the past month, we have received much-needed deliveries of pharmaceuticals and medical supplies in Ummdukun via cross border support from our teams in CAR, and we have received donated reproductive health kits to support our programs in Golo.

We are providing integrated primary healthcare and nutrition services in 10 health facilities in South Kordofan in and around Abbasiya, Abujebehaand Kadugli. Activities in three of the health facilities have been suspended due to military occupation in the region, but we are assessing areas to identify alternate project sites that are accessible.

In South Darfur state, we are providing integrated primary healthcare services in four health facilities in Alsalam, Kalma, Leiba and Taiba.

We have signed a memorandum of understanding with the State Ministry of Health (SMoH) of Khartoum and the Humanitarian Aid Commission to support four facilities in the East Nile locality in Khartoum state, and will deploy a team



People participate in an immunization session at Golo Hospital in Sudan.

this week to begin implementation. Facilities that we will support include two secondary health facilities and two primary health centers (PHCs) that together service a population of more than 95,000.

In Al Jazira state, International Medical Corps continues to support the Tayba PHC in Alshokaba Shaaldin, and operate an MHNT in Shegiddi, Souqatra North and Souqatra South, which are gathering areas for internally displaced persons (IDPs). We are also exploring ways to support a third facility and a maternity hospital. Our teams are continuing to provide integrated MHPSS services, such as mental health consultations, psychological first aid (PFA), basic emotional support and psychoeducation on topics such as stress, anxiety and depression. Working with the MoH and other stakeholders, we celebrated World Mental Health Day on October 10. Our MoH-seconded psychologist presented a lecture on psychological disorders to different audiences, developed MHPSS messaging for broadcasting through a local radio station and conducted various entertainment sessions for children to help raise awareness.

We deployed two mobile teams in Blue Nile state to respond to the measles outbreak there. So far, the teams have identified and managed 108 people with suspected measles among the 1,115 people who have received medical consultations. Our nutrition team in Blue Nile has also received 19.571 metric tons of donated RUTF to be used for 10 targeted supplementary feeding programs.

International Medical Corps is running an MHNT in Sennar state, specifically in the Alsuki locality. We are working with SMOH-seconded staff to provide health and nutrition services for more than 8,860 IDPs and community-hosted people affected by the ongoing conflict in Sudan. Services include medical consultations for communicable and noncommunicable diseases, reproductive health services, laboratory services, immunizations, MHPSS, nutrition screening for children under 5, health promotion sessions and treatment for PLWs. During September and October, the MHNT provided services for 2,260 people. In response to the influx of more than 50,000 IDPs in Sennar, we have started supporting five PHCs in El Suki and Sinja. Our teams are assessing additional hospitals in the region that will be secondary level for referrals from the PHCs we support.

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**, where the security situation is calm but unpredictable due to the cross-border movements of armed groups, International Medical Corps continues to provide health, nutrition and protection services in Amdafok health facility and the Korsi refugee camp. Over the past month, our teams have provided 2,742 medical consultations. The most prevalent medical issues reported have been malaria, acute respiratory infection, intestinal parasitosis and watery diarrhea. We are providing regular antenatal care for 174 pregnant women at the sites supported, and our staff carried out four healthy deliveries at Amdafok.

The mental health services we are providing in CAR include individual-based psychosocial support services, such as basic emotional assistance, PFA and stress-management interventions. In October, our teams provided 34 MHPSS consultations to refugees suffering from common mental health concerns, such as acute grief, anxiety and depression. We have continued our GBV services and nutrition activities, reaching 28 GBV survivors and screening 163 children under the age of five for malnutrition.

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

Most refugees fleeing Sudan have traveled to **Chad**. The situation in the informal settlements is dire, with people living in overcrowded conditions in makeshift structures, with limited to no access to health services and WASH facilities. These conditions have significantly increased the risk for GBV and outbreaks of disease. Many of the new arrivals are traumatized. Our assessments show that risks include mental disorders, malnutrition, protection, potential outbreaks of cholera and malaria, and the spread of HIV and tuberculosis. Through established emergency response coordination mechanisms, International Medical Corps is working to implement integrated, multisectoral lifesaving health, MHPSS, nutrition, WASH, GBV and child-protection interventions in Alarcha Camp in Ouddai, and possibly to Metche camp.

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.

Refugees and returnees are still coming through the border into **South Sudan**, with most of them having been exposed to injuries and diseases due to lack of shelter as they travel, as well as poor WASH conditions. They face increased risks for malaria, diarrheal diseases, acute respiratory tract infection and acute malnutrition.

International Medical Corps has been responding to the influx of refugees and returnees to South Sudan by providing integrated healthcare services at the Renk transit center and the Malakal Bulukat reception center. During the last month, we reached 7,642 people with outpatient consultations, with prevalent cases of malaria, acute respiratory infections and acute watery diarrhea. The teams have also provided immunizations to 1,826 people, provided awareness-raising sessions for 13,531 people, assisted 405 women with antenatal care, provided 420 people with psychological interventions, reached 1,852 people with GBV services and screened 1,276 children and PLWs for acute malnutrition.

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.