

EMPHNET Emergency Bulletin

April 29, 2024

The One-Year Mark on the Conflict in Sudan

Situation Overview

One year has passed since the war broke out in Sudan last April, a war causing one of the world's most horrific humanitarian crises, where the conflict has resulted in the largest displacement of populations. This in turn has further exasperated existing challenges, leading to a severe strain on healthcare infrastructure. The ongoing war limited access to essential services, and it has heightened vulnerability among marginalized populations. The delivery of healthcare continues to be hindered due to the scarcity of medical supplies and personnel, while the displacement of communities has disrupted the continuity of care, and it has worsened health disparities.

From another angle, the conflict has led to a surge in communicable diseases, malnutrition, and mental health issues, further burdening an already fragile healthcare system.

In Numbers

As of April 23, 2024

16,000
deaths

8.7 million
people displaced including
6.5 million internally displaced
and **1.76 million** refugees to
neighboring countries

3 million
displaced from
previous conflicts

25 million
people in need
humanitarian
assistance

60
or more attacks
on health care

>200
violations against medical
staff including, **34** deaths
and **38** injuries among the
health workforces

65%
of the population lacks
access to healthcare

\$700 million
is the financial burden on
an already underfunded
healthcare sector

4 million
girls and boys, are
fleeing widespread
violence

For women and girls experiencing displacement, there are extremely high risks of sexual violence and abuse as they lack protection while they journey.



Nutrition

4.9 million
lack access to food

37%
(18 million) are at the
borderline of having
adequate food access

27%
(12.8 million) people
are highly stressed

- According to the Integrated Food Security Phase Classification (IPC) alert, a catastrophic food insecurity level IPC 5 (famine level) is anticipated for households in parts of West Darfur and Khartoum, as well as among the broader displaced populations, especially in the more isolated areas of Greater Darfur,
- Save the Children warns that **230,000** children, pregnant women, and new mothers could die in the coming months due to hunger.

Implications

A Health System Tragedy

The armed conflict, affecting Sudan for more than a year, created a significant humanitarian crisis that has implications on the country's infrastructures including:

A Disrupted Health System:

Among the infrastructure damaged is the country's monitoring and health information systems, where today it is extremely difficult to rely on the current numbers reflecting the implications of the war.

Limited Hospital Functionality:

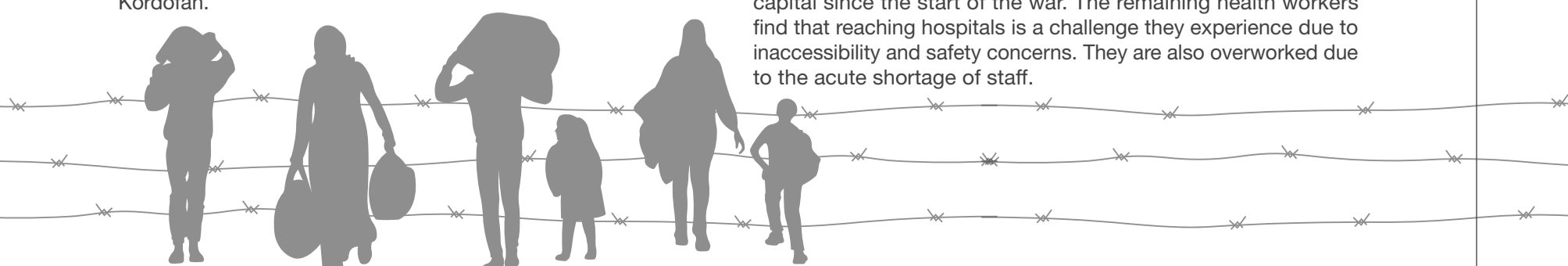
Due to direct attacks, lack of medications and medical supplies, as well as attacks on health workers. Only one-third of hospitals in conflict zones are operational.

Areas of Conflict Being Not Easily Accessible:

Especially in regions in desperate need of aid, such as Darfur and Kordofan.

Fleeing of Health Workers:

Health workers are amongst the thousands that have fled the capital since the start of the war. The remaining health workers find that reaching hospitals is a challenge they experience due to inaccessibility and safety concerns. They are also overworked due to the acute shortage of staff.



Communicable and Non-communicable Diseases

Sudan's healthcare system was already vulnerable, and the country was prone to disease outbreaks. Following the conflict, these issues have worsened due to large-scale displacements that led to overcrowded conditions. This reality resulted in increased and intensified outbreaks, particularly because healthcare services are inaccessible. Additionally, the cessation of vaccinations during the conflict has given rise to other infectious diseases. As of February 13, 2024, approximately 5,000 cases of measles, 8,000 cases of dengue fever, and over 1.2 million clinical cases of malaria were documented. An estimated three million people are at risk of cholera. Additionally, there have been 11,000 suspected cholera cases recorded and 305 confirmed deaths. The disruption of the disease surveillance system presents a significant obstacle in identifying and confirming outbreaks of infectious diseases.

According to Save the Children, power outages across Sudan have destroyed cold chain storage facilities for lifesaving vaccines, the national stock of insulin, and several antibiotics, thus putting millions of children at risk of disease and further health complications.

Service disruption, including the transport and availability of chronic medication, has been affecting millions of people and will add to the death toll of the crisis. Around 9,000 hemodialysis patients, including 240 children, face severe risks due to service disruptions, and 4,500 kidney transplant patients require uninterrupted treatment. The collapse of cancer care services in Khartoum and many parts of Sudan left thousands of Sudanese patients without the care and treatment they need. Refugees and internally displaced individuals are facing hardships in managing their treatment for non-communicable diseases.

"Attacks on health care include attacks on health facilities, transport personnel, patients, supplies, and warehouses. Refugees and migrants face barriers to accessing health care, especially for the management of NCDs during protracted crises." AL Balkhi, WHO Regional Director Said

Food insecurity

Deteriorating food security risks are triggering the "world's largest hunger crisis," where around 75% of the population is facing severe and critical food insecurity. World Food Program's Deputy Executive Director, Carl Skau stated, "We are running out of time". The correlation between disease and malnutrition worsens health outcomes, as inadequate nutrition weakens the immune system, making individuals more prone to infections and increasing death rates.

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UNICEF/UNI236324/Noorani



What is Needed

"What the country really needs is a ceasefire and, ideally, a peaceful end to the conflict" said Dr. Heitham Awadallah Sudan's Federal Minister of Health. He also added **"Seventy-five percent of Sudan's hospitals in each region should function at least partially by the end of 2024. In safer states, we aim to restore access to specialized surgery as well as services for cardiac, renal, and gastrointestinal needs. These ambitious goals require significant external support."**

On March 8, 2024, the UN Security Council adopted a resolution demanding an immediate halt to the violence in Sudan. However, it has not been implemented. An immediate cease-fire is demanded to stop the direct deaths of conflict and to prevent further deaths from the healthcare system collapse and further implications of the conflict on the population's health.

Until a ceasefire is implemented, a humanitarian corridor must be warranted to ensure humanitarian aid reaches civilians, the removal of corpses from the streets, the delivery of medications and

essential medical services, and the safe movement of civilians and humanitarian workers in and out of conflict zones.

Increasing resources for this underfunded response is essential so that humanitarians can provide necessities like food, water, medical care, and essential primary health care services, and core relief items are needed in conflict-affected areas. In 2024, only 7% of the Refugee Response Plan (RRP) funding was secured.

It is a matter of life or death for millions of people to urgently enable safe humanitarian access.

"Every day, we see patients dying because of violence-related injuries, children perishing due to malnutrition, women with complications after unsafe deliveries, patients who have experienced sexual violence, and people with chronic diseases who cannot access their medicines; despite all this, there is an extremely disturbing humanitarian void." Jean Stowell, MFS Head of Mission in Sudan

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This report is compiled by EMPHNET's Public Health Emergency Management Center (PHEMC)