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Sudanese Human Rights Society



SIHA Network



EXECUTIVE TECHNICAL REPORT

Sudan Humanitarian Crisis Conference

18th – 20th November 2023

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ABOUT THE CONFERENCE

The Sudan Humanitarian Crisis Conference was held in Cairo from from the 18th to 20th of November 2023. Over three days the conference participant's discussed the dire humanitarian crisis in the Sudan and the obstacles that impede the delivery of much needed humanitarian aid. It provided an invaluable platform for the exchange of knowledge and expertise, facilitating better coordination and communication between international stakeholders, local Sudanese initiatives, and civil society.

The conference was organized by **Fikra for Studies and Development** in partnership with:

The Strategic Initiative for Women in the Horn of Africa (SIHA)
Darfur Bar Association
The Obstetrical & Gynecological Society of Sudan (OGSS)
The Sudanese Journalists Syndicate
The Emergency Lawyers

The Preparatory Committee of the Conference included:

Dr. Elshafie Khider Saeed (Chairperson of the committee)
Dr. Elmahboub Abdelsalam
Dr. Abdelrahman Elghali
Mr. Mogo Kafi
Mr. Elsadig Ali Hassan
Mr. Adil Shareef
Dr. Sami Mahmoud
Dr. Neimat Khidir
Eng. Kholoud Hussein
Mr. Madani Abas Madani
Mr. Mohamed Hassan El-Mahdi
Ms. Nahid Hamid
Mr. Mohamed Salah
Mr. Shawgi Abdelazim
Mr. Eihab Saeed
Mohamed Fathi Orfli
Dr. Amgad Fareid Eltayeb (Rapporteur of the committee)

The presidium of sessions of the conference included:

- Ms. Zahra Hayder
- Mr. Abdallah Aldouma
- The Honorable: Adil Sameer
- Ms. Samia Elhashmi
- Dr. Amira Ahmed
- Mr. Mogo Kafi
- Ms. Areeg Hussein

Dr. Amir Ali Hassan, an esteemed Sudanese scholar in health policy and humanitarian work, served as the Conference's rapporteur.

The conference workshops and discussions covered five main thematic areas:

- **Social Protection: including the issues of IDPs, refugees, child protection and other related aspects.**
- **Food Security and Nutrition**
- **Health Situation**
- **Gender Based Violence and the situation of women during the war.**
- **Coordination, integration and logistic: including the issues of access and administrative difficulties.**

The Conference received funding from **the Norwegian and British Governments**, which showcases their dedication to endorsing Sudanese-led and owned initiatives. Furthermore, we acknowledge the significant contribution of **the Norwegian Refugee Council (NRC)** in offering vital technical and logistical support throughout the planning and execution of the Conference activities. The organizing committee would like to extend its sincere gratitude and appreciation for these valuable contributions.

About this report

The data and figures presented in this summary have been compiled from various sources including United Nations agencies such as the United Nations Office for Humanitarian Affairs (UN-OCHA), the World Health Organization (WHO), and the United Nations Children's Fund (UNICEF), among others. Supplementary statistics were also gathered from a diverse range of Sudanese and international organizations actively operating on the ground. The report also incorporates valuable insights gained from discussions held during the conference itself. To ensure the accuracy and significance of the delegates perspectives, follow-up meetings were conducted with those participants specializing in each of the five themes outlined in the recommendations.

It is important to note that this report and its recommendations are publicly owned and available to all parties interested in comprehending the perspectives of those actively involved in the field.

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1. Introduction

This report provides an overview of the Sudan Humanitarian Crisis Conference of November 2023. To establish the context of the conference, it outlines the impact and extent of the crisis and assesses the situation of the humanitarian relief efforts facing it. It also proposes a blueprint of action to be undertaken by the coalition of local, national, and international stakeholders to support the courageous relief efforts currently underway.

The report explores the discussions that took place and details the key recommendations which emerged from them, which are structured around five main themes. It concludes by building on the recommendations with a proposed plan of action outline. It is hoped that the report will perpetuate and channel the passion, expertise, and momentum of the conference participants to drive an expanded humanitarian program to assist the tens of millions of Sudanese people facing unimaginable harm and deprivation.

2. Summary of the crisis

On April 15, 2023, violence erupted between the Sudanese Armed Forces (SAF) and the Rapid Support Forces (RSF) shaking the nations, capital city Khartoum. This outbreak of violence swiftly escalated and spread throughout the country, leaving a path of utter devastation in its wake. The consequences of the conflict are nothing short of horrifying, with widespread atrocities committed against innocent civilians, particularly in densely populated areas like Khartoum and Darfur.

In Khartoum, more than 80% of the population has been forced to flee their homes, desperately seeking safety from the relentless violence. Meanwhile, in Darfur, ethnic violence and massacres have become alarmingly common. The civilian death toll has now surpassed 12,000, serving as a grim testament to the brutality of this war. The concentration of combat in residential and civilian areas has only worsened the loss of innocent lives. At least 3 million people are trapped in the warzone of Khartoum, while an estimated 5 million are caught up in the ongoing fighting in Darfur.

Displacement

The scale of displacement in Sudan is truly staggering, with at least 7.6 million individuals uprooted, and some estimates placing the total at closer to 10 million. Displacements have occurred in a recorded 5,473 locations across all 18 states of the country. Even prior to this recent wave of violence, 3.7 million people were already displaced within Sudan's borders. The Sudanese conflict is currently the largest humanitarian crisis in terms of displaced people in the world. The influx of internally displaced persons has had far-reaching consequences, even in regions that have not yet been directly affected by the conflict. Housing prices have skyrocketed, services have been stretched to their limits, and security risks have intensified.

Sexual violence

Sexual violence has been extensively employed as a weapon of war throughout the conflict. Assaults have been reported in various regions of the country. According to the World Health Organization (WHO), more than 4 million women and girls in Sudan are at risk of experiencing violence. As of November 2, the UN Joint Human Rights Office in Sudan has received credible information on over 50 cases of violence linked to conflicts, impacting at least 105 individuals. Women's rights organizations have also independently documented and verified a total of between 103 and 105 occurrences. However, these published figures are almost certainly significant underestimations with accurate assessments hampered by difficulties in reaching the victims in combat zones, documenting incidents amid social stigma, and fear of reprisals from the perpetrators.

Collapse of healthcare infrastructure

Sudan's health system is on the brink of collapse. Health facilities have been attacked, occupied and face drastic shortages of crucial supplies so that many of them – up to 70% - have ceased operations entirely. The country is facing an outbreak of epidemics, including Cholera and Malaria, which have already caused countless deaths that would be preventable with a functioning healthcare infrastructure.

The remaining elements of the healthcare system have seen their routine operations significantly affected and curtailed. Over 1 million polio vaccines have been destroyed and due to the ban on the movement of medical supplies, Médecins Sans Frontières (MSF) may be forced to suspend surgical operations at the Turkish Hospital in Khartoum. This would have devastating consequences for those in need of urgent medical care.

Impact on children

Since mid-April, there have been over 3,130 reported cases of severe child rights violations in Sudan. The Darfur region alone accounts for at least half of these cases. A minimum of 9.4 million children urgently require assistance in areas such as healthcare, nutrition, water, sanitation, and hygiene (WASH). Shockingly, children make up approximately half of the total number of displaced people. Due to the ongoing conflict, no fewer than 19 million children have been forcibly removed from school, abruptly terminating their education. Higher education institutions such as universities and colleges are also now non-operational in Sudan.

The economic impact

The effects on Sudan's economy have been devastating, with estimated losses exceeding \$15 billion, nearly 48%, of the total GDP by year-end. The average household income has dropped by nearly 40%, and approximately 50.3% of the Sudanese workforce has lost their jobs. The economy has therefore diminished to half of its pre-war size by every significant metric.

3. Humanitarian Relief Efforts

Despite the immense challenges the conflict poses, humanitarian efforts have made a significant impact. Between April and October 15th, 154 humanitarian partners provided life-saving assistance to approximately 4.5 million people, demonstrating the tireless dedication and resilience of those working to alleviate the suffering of the Sudanese people. But the UN's revised 2023 Sudan Humanitarian Response Plan appeal has received only 39% of the required funds as of December 7th. This lack of funding poses a significant obstacle to providing the necessary aid and support to those in need.

4. Shortfalls

19.9 million people lack access to adequate food, with only 2.1 million receiving assistance - a coverage rate of just 10.6%. Of the 11 million citizens in need of health assistance, only 820,000 have received the necessary support - a mere 7.4%. In the elementary school sector, 8.6 million children require support, yet only 58,800 students, barely 1%, are currently receiving any form of assistance. The housing sector is also in dire need, with a population of 5.7 million individuals requiring adequate shelter, but only 110,800 individuals having received aid, just 1.9%. The financial need for humanitarian aid in Sudan stands at \$2.6 billion, but the current financial allocation falls far short at \$998 million. This deficit is particularly concerning in crucial sectors such as nutrition (75.9%), health (34.5%), education (78.2%) protection (65.5%), refugee response (83.2%) food security (54.2%), Emergency Shelter and Non-Food Items (62.3%), and Water, Sanitation and Hygiene (61.2%). Urgent action is required to address these shortfalls and ensure that basic needs are met. It is paramount that international organizations, NGOs, and local partners co-operate to ensure the flow of resources and their effective distribution to those in need.

5. The Sudan Humanitarian Crisis Conference

Against the backdrop of this dreadful conflict and the outstanding humanitarian work being done despite it, the Sudan Humanitarian Crisis Conference brought together a wide range of stakeholders to discuss the crisis and the urgent need for further action to bolster the humanitarian response. The agenda focused on how to mobilize and scale up aid efforts, protect civilians, and empower Sudanese people.

Participants

The Conference saw a remarkable turnout of national grassroots organizations and frontline respondents, regional and international entities. In total, there were 420 participants. 120 of them were from Sudan, and their distribution was as follows: 54 delegates from Sudan's 18 states represented Emergency Response Rooms (ERR) and various local initiatives. The remainder represented 37 national non-governmental organizations and trade unions active in Sudan, including the elected Sudanese Journalists Syndicate, Sudan Doctors' Union, Teachers Committee, and the Sudanese Bar Association. These bodies underwent reconstruction and free elections in the wake of the 2019 revolution. In addition, attendees from Sudanese refugees in Chad, Uganda, Kenya, Ethiopia, South Sudan, Egypt, and other locations took part. The participants also included 102 members from the international community and international organizations. Notably, diplomatic representatives from Norway, Germany, France, the Netherlands, Switzerland, Spain, Poland, the European Union, the United Kingdom, the United States, and the Egyptian Red Crescent were present. The presence of various international and UN agencies, led by UN-OCHA, further enriched the conference by bringing diverse perspectives to the table.

Key themes

Each participant made significant contributions within their specific areas of expertise and activity. The discussions encompassed a wide range of topics, but centered on five key themes: localization, protection, health, gender-based violence (GBV), and food security. These issues were examined holistically, allowing for a comprehensive understanding of the challenges at hand. Through collaborative efforts, the participants identified key priorities that require immediate attention.

Protecting civilians

The conference established protecting civilians as the top priority. The UN Security Council Resolution 1265 (1999) recognizes “that civilians account for the vast majority of casualties in armed conflict and are increasingly targeted by combatants and armed elements”. It also stated the ‘Willingness to respond to situations of armed conflict where civilians are being targeted or humanitarian assistance to civilians is being deliberately obstructed, including through the consideration of appropriate measures at the Security Council’s disposal in accordance with the Charter of the United Nations’. Civilian populations and humanitarian aid have suffered unimaginably through the violence in Sudan. It was widely agreed amid the conference that relief efforts should emphasize on using the appropriate enforcement tools for creating safe humanitarian corridors, promoting human rights, and holding perpetrators accountable for their violations.

Co-ordination

The role played by grassroots initiatives in the humanitarian aid and relief efforts is truly inspiring. These initiatives, deeply rooted in the remarkable solidarity and capacity for mobilization of the Sudanese people during times of distress, serve as a crucial pillar in responding to the suffering caused by war. This pivotal role must be permanently borne in mind when planning any relief initiatives.

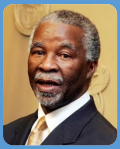
However, prior to the conference, grassroots efforts were scattered and lacked cohesion. The conference shed light on this fragmentation, emphasizing the need for a unified approach and providing a platform for all stakeholders to collaborate, including grassroots organizations and donors. One of its main outcomes was to establish a standing committee that will coordinate and channel aid efforts. This committee will serve as a bridge between grassroots organizations, national, regional, and international entities, ensuring effective local distribution and targeting of resources and aid activities.

The conference should be considered as part of an ongoing process, and it is hoped that the outcomes proposed within it will act as a catalyst for realizing the aspirations of all concerned parties and energizing a more efficient humanitarian response to the crisis in Sudan. The key recommendations and operational plan of action established at the conference are included in the second part of this report.

6. Highlights



The Organizing committee: “This conference is not a singular event; it is the beginning of a process that we hope will materialize soon on the ground into effective means to revitalize the humanitarian response to the crisis in Sudan”.



Former South Africa President Thabo Mbeki: “African and International response to Sudan disaster is woefully inadequate”



Mr. Jan Egeland – Secretary General of the Norwegian Refugee Council: “I have been a humanitarian aid worker for many, many years. I have hardly seen such a mega-catastrophe. It's not just a crisis; it's a catastrophe engulfing tens of millions of people.”



Mr. Dr. Mohammad Tahir – Emergency Response Room Representative: “We are committed to serving our community tirelessly, undeterred by any challenges that may arise. Our dedication knows no bounds, as we strive to make a lasting impact on those we serve.”



Ms. Anne-Beth Christiansen Tvenrim – Norwegian Minister of International Development: “All parties must comply with their obligations under international law and international humanitarian law. This means protecting the civilians who are suffering immensely because of this war.”



Dr. Buthaina Maamoun Ali Hassan – Sudan Doctors Union: “Political coordination should not be tied to humanitarian action coordination. The outcomes of political agreements must be separated from those of this Conference.”



Mr. William Carter- Head of the Norwegian Refugee Council (NRC) mission in Sudan: “This conference is a move from what can we do to the question of what can we do together to go forward.”



Congressman James McGovern: “It is time for everyone to step up to the plate. It is past time to place the crisis in Sudan at the top of the priority list.”



Ms. Hala Al-Karib – Regional director of the Strategic Initiative for the Women in the Horn of Africa (SIHA): “At this point in time, it is crucial to address the issue of protection. It is crucial to address the fact that what is happening in Sudan is beyond a war between two generals. Right now, it is a systematic campaign of atrocities.”



Ambassador Linda Thomas-Greenfield - The permanent representative of the United States of America to the United Nations: “In the midst of all that suffering, I saw glimpses of humanity and hope... the bravery and selflessness of the Sudanese Community volunteers and others on the frontlines working around the clock to protect the most vulnerable. We are all counting on them.”



Dr. Amgad Fareid Eltayeb – Executive Director of Fikra for Studies and Development: “Arrangements for the provision of humanitarian assistance should be separated and independent from all military and political discussions. These are basic rights for civilians, not pressure cards, and should not be weaponized.”

FACTS AND FIGURES*



12,000

Civilians killed



19,000,000

Children forced
out of school



**7,500,000 -
10,000,000**

people displaced



24,700,000

people in need of
humanitarian assistance



39%

Funding coverage



\$1,570,000,000

Funding deficit (USD)

FACTS AND FIGURES



19,900,000

people in need of food assistance



15,000,000,000

Economic cost of fighting (estimated by the end of 2023 in USD)



5,200,000

jobs lost



50.80%

Labor income reduction



46.50%

Capital income reduction



40%

Reduction in the average household income

FACTS AND FIGURES



30%

Remaining functional health facilities in the war areas.



50+

Attacks on health care workers verified by WHO.



100,000+

Children under five years old suffering from medical complications



14,700,000

People in need of health assistance



1,500,000

People with no access to emergency healthcare in Darfur



5,400,000

million People in need of protection



5,700,000

People in need of shelter and NFIs



14,900,000

People in need of WASH



8,600,000

Students in need of education support



4,000,000

Women and girls under the risk of sexual violence

Strategic Objectives

1

To preserve human lives through the development of efficient and effective emergency response plans. This includes ensuring access to vital healthcare services, clean water, and food provisions.

2

To protect the most vulnerable and deliver aid to most affected areas. This involves securing shelter for those affected, providing legal support to both vulnerable individuals and aid providers.

3

Support frontline respondents in their crucial roles by ensuring their safety and well-being. This includes protecting them from potential harm, such as attacks or arrests by warring factions. And enhance their capabilities by equipping them with essential skills and information.

8. Recommendations

Drawing on the contributions, expertise and experience of its participants, the conference established several recommendations to support the strategic objectives outlined above. This set of recommendations is aimed to improve and revitalize the humanitarian response to the crisis in Sudan as follows:

8.1. Overarching Recommendations

Discussions that took place within the five specialist tracks of the conference have resulted in the following recommendations being reaffirmed in a variety of contexts and discussions. Because of its cross-cutting relevance in tackling the crisis, we present it as a comprehensive primer at the beginning of this section.

8.1.1. Advocacy and Communications:

The escalating number of other global issues is diverting attention away from the humanitarian crisis in Sudan. In addition to the escalating dangers confronting the media, the dearth of access to the ground for journalists and media outlets further complicates the task of obtaining accurate news from Sudan. To prevent the international community from forgetting Sudan, there is a pressing need for ongoing and accurate reflection on the human suffering in the country and for humanizing the statistics associated with the most severe and escalating crisis there. Launching and supporting advocacy and communication efforts to Keep Eyes on Sudan are crucial. The more advocacy work is able to draw on credible evidence, the more likely it is that it will prove protective.

8.1.2. Sudan's social fabric suffered a great deal of damage as a result of the fighting, putting the country at serious risk of disintegration. The situation is exceedingly volatile when it comes to the harmonious coexistence of the different ethnic groups, particularly in rural areas. The reconstruction of the social fabric and the implementation of constructive social peace initiatives are critical steps toward restoring stability in Sudan.

8.1.3. Recognizing and acknowledging the truth regarding the violations that have occurred and continue to occur is critical for enabling future endeavors towards transitional justice. It is imperative to cease the normalization of the ongoing occurrence of atrocities and violations.

8.2. Localization, Coordination, Integration

Sudan is a large country with a complex and varied geographical, socio-economic and ethnic character. The conflict is experienced differently in different regions. The skill and courage of local responders remains the greatest asset in combating the crisis. Any effective humanitarian approach therefore demands a localized approach to ensure a more effective, sustainable, and contextually appropriate response to meet the urgent needs of the affected population and supports their long-term recovery. Nevertheless, the scale of the crisis and the resources needed necessitate an effective mechanism to co-ordinate and integrate responses.

Key Insights

- The level of need and the humanitarian infrastructure varies widely across Sudan.
- Despite their shared dedication and skill, the composition, capacity and reach of Emergency Response Rooms (ERRs) and local responders differs from region to region.
- Stakeholders hold diverse interpretations of "localization" in action, and these definitions may undergo changes as the response efforts unfold.

Key Recommendations

All stakeholders should work to enhance coordination among frontline responders, national organizations, and international organizations to avoid duplication of efforts and maximize the impact of interventions.

8.2.1. Coordination Platform

8.2.1.1. The conference recommends the establishment of a coordination platform that facilitates planning, collaboration, and knowledge sharing among local responders, in addition to being a coordination mechanism between the local responders and the international community apparatuses.

8.2.1.2. This platform should help align efforts, gather data on needs, and adapt approaches accordingly.

8.2.1.3. It should also mobilize a sense of solidarity across the country during a time of division.

8.2.1.4. Delegate representatives from the platform should engage in various coordination opportunities, such as IGAD meetings, and HCT/cluster meetings, at different levels.

8.2.1.5. The platform should use media channels to amplify the work of ERRs and local responders, increasing awareness of, and support for, their efforts.

8.2.1.6. It should engage in effective communication with other local stakeholders to ensure their involvement and support. This includes establishing communication channels with National Non-Government Organizations (NNGOs) through the various coalitions of the NNGOs such as: the Confederation of the Sudanese Civil Society and the National NNGOs Forum.

8.2.1.7. This platform also functions as a two-way learning mechanism, enabling international organizations to acquire knowledge from the practical experiences of local responders in their recent activities while empowering local volunteers to improve their abilities and effectiveness in carrying out their humanitarian work. The conference recommends establishing clear operating principles for the coordination platform, emphasizing transparency as a fundamental value.

8.2.2. Protection of local responders:

8.2.2.1. The conference recommends that national and international initiatives provide local responders and ERRs with comprehensive support, including psychosocial assistance tailored to their specific requirements.

8.2.2.2. Stakeholders must work to ensure the neutrality of ERRs and the safety of the dedicated volunteers involved. This can be achieved through diplomatic channels and mediation initiatives.

8.2.2.3. OCHA must foster a more inclusive and collaborative humanitarian landscape, by advocating for increased engagement with ERRs by other partners. By actively involving them in the humanitarian system and framing them as vital aid actors, their expertise and local knowledge can be harnessed to address pressing challenges effectively.

8.2.2.4. OCHA, as a leading entity, should take the initiative in championing the UN's localization approach, which emphasizes the importance of empowering local actors and communities in humanitarian efforts.

8.2.2.5. The international community should recognize, adopt, and announce the protection of first-line responders and local volunteers of the ERRs in Sudan under the international law obligations that safeguard and protect humanitarian aid workers. They should explicitly be defined as humanitarian aid workers under the protection of the Geneva Conventions, particularly Article 3 common to the four Geneva Conventions of 1949, which addresses situations of non-international armed conflicts, and Article 26 of the First Geneva Convention, which protects the voluntary aid society.

8.2.3. Effective aid delivery:

8.2.3.1. Aid actors must acknowledge and appreciate the vital role played by local providers. Trusting them to make decisions, such as aid allocation, based on the specific context is crucial for successful engagement and intervention.

8.2.3.2. It is imperative for aid and diplomatic actors to encourage regional countries to participate in establishing multiple geographic entry points to Sudan. Relying solely on Port Sudan as the sole entry point for aid is not a sustainable approach.

8.2.3.3. The international community must co-ordinate to maximize the efficient use of resources, prevent duplication of efforts and ensure that no areas are neglected or overlooked.

8.2.3.4. The proposed coordination platform can greatly enhance the accuracy and reliability of aid data, particularly in terms of aid delivery. This platform will enable the verification and cross-referencing of information, ensuring transparency and accountability.

8.2.3.5. The presence of humanitarian relief organizations and UN agencies, particularly UN-OCHA, in the conflict zone is crucial for their capacity to deliver assistance and the deconflicting between the two warring parties. Additionally, this provides a degree of safeguarding and protection to humanitarian volunteers and front-line responders. The conference recommends that these organizations promptly re-establish their presence in Khartoum and Darfur, utilizing the Jeddah negotiating forum and other platforms available for this purpose. The experience of the NRC, ICRC, and MSF in their continued ground presence could be utilized and adapted to that end.

8.2.3.6. Aid actors involved in the delivery chain must proactively seek ways to overcome obstacles that may hinder the process. By finding alternative methods and bypassing impediments such as the Humanitarian Aid Commission (HAC), the delivery of aid can be expedited and made more effective. Effective collaboration and complementation between domestic and international actors working on the ground can play a significant role in achieving this.

8.2.4. Funding:

8.2.4.1. The conference found that it is imperative that funders introduce greater flexibility in terms of funding mobilization and processes. This entails allocating more resources to unearmarked or flexible funding, allowing for greater adaptability and responsiveness.

8.2.4.2. Funders should consider waivers for certain bureaucratic impediments that hinder the efficient utilization of funds. Streamlining administrative procedures can expedite the delivery of aid to those in need.

8.2.4.3. The international and regional community must provide resources for social protection programs. This can be achieved through direct cash transfers, support for healthcare services, and provision of food to the most vulnerable groups.

8.2.4.4. The conference recommends that international actors take on the responsibility of risk management, rather than burdening local responders. This shift in accountability will ensure a more coordinated and efficient approach to addressing challenges and mitigating potential risks.

8.2.4.5. It may be difficult to continue to require mandatory HAC registration of international organizations as a requirement for funding, especially since many of these organizations already operate through local partners. With the eruption of the crisis, many organizations were willing to provide their capacities and expertise to work in Sudan. It might be reasonable to propose establishing a register of organizations capable of working and performing in the Sudan under the auspices of UN-OCHA or the Joint Coordinating Mechanism for the purposes of recognition for funding.

8.3. Protection

The scope and intensity of the conflict is causing harm to the civilian population on an appalling scale. Violence is unfolding in densely populated regions, with combatants deliberately disregarding the fundamental principles of International Humanitarian Law. Action to protect civilians at risk of violence, experiencing displacement, the disruption of education and wider privations is urgently required.

Key Insights

- The toll of the conflict continues to rise as innocent men, women, and children bear the brunt of the senseless violence – a staggering 12,000 civilians have been killed, and countless injured.
- The stated casualty figures are likely to be an underestimation, as many victims of the violence faced obstacles in reaching hospitals because of the fighting.
- The principles of discrimination and proportionality, which are meant to safeguard the safety and well-being of civilians, are being cruelly violated.
- As well as immediate threat of violence, Sudanese citizens face the interruption of the core activities of everyday life and service provision such as agriculture, education and shelter.

Key Recommendations

8.3.1. Establishment of a dedicated Electronic Civilian Causality Database (similar to the one established by the UN in Afghanistan in 2009) to allow data from reports collected across Sudan to be disaggregated by gender, age, perpetrator, and method, among other characteristics. [Practical evidence](#) shows a connection between the robust reporting of violations against civilians and a decrease in the number of civilian casualties and victims. Reporting of violations also proved to have an impact on all warring sides in similar conflicts to make concessions aimed at reducing civilian casualties.

8.3.2. Social protection

8.3.2.1. All humanitarian stakeholders must press the combatants for an immediate long-term ceasefire.

8.3.2.2. All parties must press Government agencies and social protection institutions to fulfill their responsibilities and swiftly respond to humanitarian disasters.

8.3.2.3. The conference recommends supporting families hosting groups displaced from conflict areas and those who are displaced outside of shelters. It is also necessary to design livelihood programs for internally displaced persons and refugees.

8.3.2.4. Donors, government agencies, and civil society organizations must establish channels of communication and collaboration with neighborhood emergency committees and local initiatives to provide effective social protection services.

8.3.2.5. Efforts should be made to overcome the complexities associated with the registration of emergency committees and local initiatives, ensuring the presence of necessary adjustment mechanisms.

8.3.2.6. The coalition of humanitarian partners must also work to support Sudanese refugees in neighboring countries, providing them with legal and psychological guidance.

8.3.2.7. Partners must work to ensure the safety of workers and volunteers providing social protection services, caring for women, children and those with disabilities, and to enhance their capabilities.

8.3.3. Protecting Education

8.3.3.1. International stakeholders must build on the collective efforts of the community to resume the provision of educational services. This can be achieved by establishing mechanisms for coordination among all stakeholders involved in the education sector.

8.3.3.2. The conference recommends the construction of sufficient temporary buildings and educational institutions to provide safe locations where education can continue.

8.3.3.3. Stakeholders must support internal displacement camps and develop suitable alternatives to the current camp setup in schools. This will help restore schools to their role in the educational process.

8.3.3.4. Alongside this, stakeholders should work to promote self-education and traditional educational models, such as Khalawi in order to attempt to keep the process of education uninterrupted.

8.3.3.5. Stakeholders must strengthen and facilitate access to Internet services for those working in education and in wider society.

8.3.3.6. UNICEF's expertise in providing educational books online should be leveraged and expanded.

8.3.3.7. Adherence to principles of justice is crucial in the educational process, particularly in terms of determining the timing for resuming the school year and providing necessary aids.

8.4. Health

The already fragile Sudanese healthcare system, burdened by structural weaknesses, violence, disease outbreaks, and widespread hunger, is now on the brink of collapse due to the immense pressure exerted by the war. The health and welfare of 14.7 million people hang in the balance, as they face mass displacement, injuries, famine, and flooding.

The international community must rally together to provide the necessary support and resources to bolster Sudan's healthcare system so that it can effectively respond to the pressing needs of its population, alleviate the suffering of millions and prevent further loss of life.

Key insights

- According to the World Health Organization (WHO), approximately 70% of hospitals in conflict-affected states are non-operational, while the remaining facilities are struggling to cope with the overwhelming influx of individuals seeking medical assistance.
- The country is currently struggling with multiple disease outbreaks, namely acute watery diarrhea/cholera, measles, dengue, and malaria. More than 3.1 million individuals in Sudan are at risk of contracting cholera.
- This health crisis is further exacerbated by the inherent risks associated with seasonal rains and inadequate hygiene and waste management practices.
- Many vital programs have been terminated due to attacks on healthcare facilities, disruptions in the supply chain, and limited access to functioning facilities. These disruptions have also impacted the power grid, water piping systems, fuel availability, and the mobility of healthcare staff.

Key Recommendations

It is imperative that immediate action be taken to mitigate the spread of diseases and restore the functionality of healthcare facilities. This requires a comprehensive approach that includes increased funding, targeted resource allocation, support for healthcare workers on the frontlines and focus on care and support for internally displaced individuals who are particularly vulnerable.

8.4.1. Establish a coordination body to facilitate streamlined coordination and mediate communication between conflicting parties. The coordination body should include representatives from the following:

- Professional medical societies and the Sudanese Doctors Union
- Emergency room committees/resistance committees
- Police forces
- In-line ministries
- Monitored by external international bodies and donors. The coordination body will ensure:
 - Safe access to supplies
 - Safe referral processes
 - Protection of care providers
 - Protection of civilians ("beneficiaries")

8.4.2. Establish an accountability framework to guarantee transparency and responsible conduct throughout the mission, including needs assessment to identify priorities.

8.4.3. The creation of a robust medicine supply chain and distribution network that spans the territories held by the two opposing factions, supervised by an impartial third party.

8.4.4. Rehabilitate primary health centers and establish safe houses to be used as evacuation centers and referral centers.

- These centers should be geographically located in relatively safe areas around the conflict zones.

- To ensure the provision of life-saving interventions, stakeholders must resource Sudanese health services to draw upon and offer:
 - Consistent supply of sustainable clean water and utilization of solar energy.
 - Special population care (maternal care, children, adolescents, geriatrics).
 - Mental health and psychological support.
 - Treatment for communicable and non-communicable diseases.

8.4.5. Stakeholders must help to create the following modalities required to deliver effective care:

- Fixed facilities (referral sites)
- Mobile units
- Safe houses (coordinating with schools to provide primary healthcare packages, health promotion, and health awareness)
- Community healthcare workers (midwives)
- The services should be intensified in conflict zones, displacement zones and crossing zones

8.4.6. Ensure the continuation of the routine activities.

8.4.7. Developing an adaptable and implementable comprehensive primary health care package that covers routine activities such as vaccination, management of non-communicable disease, reproductive health services, reporting of communicable disease, and others to be implemented in a decentralized manner and by the appropriate available health care providers.

8.4.8. Facilitating the adaptation and implementation of a functional and practical health information system that guarantees the consolidation of data from various regions within the country.

8.4.9. Capacity development

- Services must be supported to identify and resource potential emergency rooms and community networks that can serve as:
 - o Care providers and community health promoters
 - o Agents for safe referrals
 - o Local mapping and needs identifiers.
- Stakeholders must work to establish regional hospitals and warehouses to further strengthen the response to emergencies.

8.5. Sexual and Gender Based Violence (SGBV)

Amid the unspeakable horrors of war faced by the civilian population; women, girls, and at-risk groups in Sudan are facing increased threats of sexual and gender-based violence (SGBV). The use of such violence as a weapon of war predates this conflict, being prevalent in fighting in the western region of Sudan as early as 2003. The combination of social factors, poverty, and now the wider ramifications of the current conflict including the breakdown of specialist health, psychological and legal support, further exacerbate the problem.

Key Insights

- Displaced and conflict-affected women and girls are particularly vulnerable to GBV, as they face an increased risk of violence during displacement and in temporary accommodations.
- Risk is further exacerbated by the presence of armed actors in these areas.
- Woman, girls and at-risk groups are struggling with the loss of income, skyrocketing prices for essential commodities, and limited access to basic services and support which in turn increase their vulnerability to SGBV.
- The unit of Combating Violence against Women (CVAW) reported 56 incidents of SGBV in Khartoum and 46 incidents in Darfur by July 2023 – despite the fact that it officially ceased operations in May, indicating that these reported numbers are a fraction of the total.
- The Sudanese Organization for Research and Development (SORD) documented, to date, 50 stories of direct sexual violence including rape, 16 stories of victims of GBV including battering, deprivation of financial resources, exploitation of labor in Gezira state alone.
- Domestic violence has surged due to limitations on mobility, heightened stressors, decreased access to basic needs, and increased vulnerability to exploitation and other forms of abuse.
- Older people, individuals with disabilities, survivors of violence, exploitation, and abuse, and at-risk boys and men may encounter additional obstacles when trying to access crucial gender-based violence services.

Key Recommendations

8.5.1. Tackling this terrible scourge to provide safety and support for those vulnerable to SGBV requires a comprehensive, multi-agency system of support which combines services in health, social protection, legal and psychological support.

8.5.2. The conference recommends establishing a comprehensive system for documenting and monitoring cases of SGBV. This system should include a central observatory dedicated to tracking violations, as well as smaller monitoring and documentation units in various states.

8.5.3. The system should be divided into specialized units, each with a specific focus. These units would include monitoring and documentation, protection, legal, medical, psychological/social support, and media and awareness centers.

8.5.4. The system must establish mobile medical centers to address the urgent needs of those who have suffered SGBV.

8.5.5. To provide the necessary expertise and support, the system must recruit a cadre of specialists, including midwives, nurses, and other professionals in the fields of protection, medical intervention, and psychological support. Additionally, community committees and local initiatives, such as emergency rooms and youth and women's committees, should be trained and equipped to provide essential services.

8.5.6. To ensure the safety and well-being of survivors, it is imperative to establish safe passages in collaboration with international and human rights organizations, such as the Red Cross.

8.5.7. Accountability for war crimes and violations against civilians must be enforced, and those involved in such acts should face consequences. The activation of Geneva Convention No. 4 and the imposition of sanctions are necessary steps in this regard.

8.5.8. The media and awareness centers should play a crucial role in recognizing and amplifying knowledge about the ongoing violence by highlighting the most vulnerable regions and groups.

8.5.9. Promoting acceptance and rejecting hate speech are essential in fostering a peaceful environment. This can be achieved through the establishment of media stations and platforms dedicated to raising awareness about violence during conflicts.

8.5.10. The United Nations and the African Union have a crucial role to play in advocating for the activation of protocols and agreements aimed at protecting women and other vulnerable groups during conflicts.

8.5.11. Stakeholders must create safe spaces and homes for survivors of SGBV to rebuild their lives and access necessary protection mechanisms.

8.5.12. Stakeholders should also provide a secure environment and resources for female journalists, as well as male and female workers, who are on the front lines of providing services.

8.5.13. Those providing aid must be sensitive in delivering the required services and interventions.

8.5.14. The police, prosecution, and court system must co-operate to establish a dedicated and transparent unit to monitor and hold accountable those responsible for violations and violence during conflicts.

8.5.15. Stakeholders should create a hotline to promptly report cases of violence.

8.6. Food Security

Even before the crisis 16.2 million people in Sudan were grappling with food insecurity - an alarming 34% of the population. The conflict is now intensifying this issue, and according to the latest forecasts, Sudan is facing a critical situation. The need for food security measures has never been more urgent.

Key insights

- As rural areas enter the “hunger gap” between the periods of traditional availability for seasonal crops, the number of people experiencing food insecurity is expected to increase by 2.5 million. This would bring the total number of food insecure people in the country to a daunting 19.1 million within the next three to six months.
- The areas predicted to experience the highest prevalence of food insecurity include West Darfur, West Kordofan, Blue Nile, Red Sea, and North Darfur.
- The summer agricultural season is a crucial target for the rebuilding the agricultural sector, empowering farmers and meeting wider food needs.

Key Recommendations

Given the scale and urgency of the challenge, these recommendations encompass a range of strategies, including emergency food aid, agricultural support, nutrition programs and addressing long term food security issues.

8.6.1. Emergency Food Aid:

8.6.1.1. Stakeholders must prioritize life-saving assistance for the immediate food needs of the affected population.

8.6.1.2. Organizations providing relief should adopt a flexible and adaptive approach, tailoring food assistance interventions to the unique requirements of each situation.

8.6.1.3. For example, the choice between in-kind donations and cash-based transfers should be determined by careful evaluation of the prevailing conditions.

8.6.1.4. Use of cash-based transfers will empower individuals to purchase food according to their specific requirement as well as supporting the local economy.

8.6.1.5. Nevertheless, in-kind donations will be vital in many areas where local markets cannot provide sufficient nutrition.

8.6.1.6. Support must also be extended to collective/communal kitchens (also known as Takaya”) and wider measures taken for the continuous supply of food in conflict-ridden areas. These kitchens play a vital role in meeting the food requirements and ensuring the continued resilience of both besieged and displaced communities. Furthermore, the establishment and promotion of communal kitchens have proven to be effective in fostering social cohesion and solidarity within these communities.

8.6.2. Agricultural Support and rehabilitation:

8.6.2.1. Stakeholders must focus interventions to revitalize agricultural systems by providing farmers with access to seeds, fertilizers, and tools, as well as training on sustainable farming practices.

8.6.2.2. Aid efforts should aim to enhance agricultural productivity and diversify crops to strengthen local food production.

8.6.3. Nutrition Programs:

8.6.3.1. Nutrition specialists should work to raise awareness of the enhanced risk of malnutrition, especially among vulnerable groups such as children and pregnant women.

8.6.3.2. All stakeholders must ensure that nutrition interventions are integrated with other humanitarian efforts, such as healthcare and water, sanitation, and hygiene (WASH) programs to enhance their effectiveness.

8.6.4. Addressing long-term food security challenges:

8.6.4.1. Stakeholders must collaborate to try to improve value chains for agricultural crops and minimize post-harvest losses.

8.6.4.2. International and regional stakeholders should encourage the development of small industries in the food processing sector to build capacity and support the local economy.

8.6.4.3. Humanitarian partners must seek to restore and protect the environment from the adverse effects of war. Environmental considerations should be integrated into all future plans, including those related to the industrial and agricultural sectors.

8.6.4.4. There is a pressing need to activate credit and savings cooperatives (SACOs) and allow them to operate under the supervision of the Central Bank of Sudan.

8.6.4.5. The food production sector should be supported to introduce animals into agricultural cycles to bolster the health of the national herd and aid in the development of the livestock sector.

8.6.4.6. Stakeholders should establish cooperative partnerships in the agricultural and livestock sectors with the goals of encouraging production and marketing of small producers' crops and livestock.

8.6.4.7. International partners must reduce input prices, and press for the resumption of work on the memorandum of understanding between the Government of Sudan and the United Nations Development Program

8.6.4.8. A comprehensive plan is needed to address the challenges faced by cooperatives in the context of war, in collaboration with stakeholders and the African Cooperative Facility of the International Labor Organization.

8.6.4.9. It is crucial to establish a service channel, such as USSD, to provide financial services to individuals without smartphones. This can be achieved by exerting pressure on the Telecommunications Regulatory Authority to utilize this channel for monetary support.

8.6.4.10. Creating a portfolio for agricultural finance and establishing a joint-stock company to market agricultural crops will contribute to the growth of the agricultural sector.

8.6.4.11. The principle of contract farming, which establishes a direct link between producers and buyers, should be emphasized to reduce monopolization.

8.6.4.12. It is essential to activate fair trade agreements with international countries, where production inputs are exchanged for agricultural crops.

8.6.4.13. Collaboration with the international community is necessary to attract funding for the reconstruction and development of the food industrial base and its intermediate industries.

8.6.4.14. A comprehensive survey should be conducted to assess the extent of infrastructure destruction, prioritize reconstruction efforts, and secure the required funding.

9. Plan of Action Outline

The outline below builds on the report's key recommendations to establish the beginnings of a plan of action for effective humanitarian assistance in Sudan, with a particular emphasis on empowering local respondents with an inclusive approach.

Principles of action

The plan should be centered on three main principles of action:

- **Stakeholder Engagement:** humanitarian efforts in Sudan must involve and empower the complete spectrum of relevant stakeholders, as broad and varied as it is, in both the planning and implementation phases. These include ERRs, national professional committees, NGOs, international and UN agencies.
- **Coordination:** the breadth and variety of stakeholder groups necessitates the establishment of an effective coordination mechanism to maximize efficiency, distribute resources appropriately and avoid duplication of efforts. This mechanism should comprise a standing committee, linking local respondents, the international aid organizations, and donor agencies to ease the flow of financial and human resources.
- **Capacity Building of Local Respondents:** Local respondents will be identified for each of the main sectors that the conference highlighted, and their capacity building needs will be assessed reported.

Impact

The desired impacts of the humanitarian relief efforts include:

- Saving lives
- Strengthening resilience of Sudanese communities and infrastructure
- Empowering local respondents and communities
- Revitalizing the humanitarian response

Outcomes:

The impacts listed above would manifest in:

- Reduced morbidity and mortality rates within the affected communities
- Strengthened local capacity to respond to emergencies.
- Enhanced collaboration and coordination among stakeholders
- Increasing awareness of the needs and vulnerabilities of the affected population
- Mobilized sustainable resources for effective humanitarian response.

Outputs:

To achieve the desired outcomes, stakeholders should work towards the following goals:

- Supporting local respondents with the training and resources lead and coordinate aid efforts.
- Enabling greater numbers of people to access health and GBV services.
- Increasing the number of livelihood opportunities for affected communities.
- Providing a greater volume of nutritious food to affected communities.
- Establishing protection mechanisms

Tactical activities:

- Conducting a formal needs assessment
- Facilitating ongoing stakeholder engagement through a variety of appropriate forums and channels including written, verbal and through face-to-face and remote meetings and assemblies
- Capacity-building of local respondents through training, resource allocation and other support
- Delivery of health and GBV services through both local service providers and external support
- Implementing food security and livelihood support programs
- Mobilizing resources from donors and external supporters and distributing and coordinating this among relief workers on the ground

Inputs:

- Financial resources
- Material resources (food, medical supplies, construction materials for shelter etc.)
- Human resources (local respondents, volunteers, professionals)

Timeline:

- 1- 2 years

KPIs

To be determined by the relevant stakeholders for each project/program proposal

Annex 1: The Program of the Conference

18 November 2023

Opening remarks by the chair of the Conference	Zahra Hayder
Opening remarks by the Secretary-General of the NRC: Mr. Jan Egeland	Jan Egeland
Opening remarks by the Director-General of WHO: Dr. Tedros Adhanom Ghebreyesus	Dr. Tedros Adhanom
Opening Remarks by the Congressman Jim McGovern	Jim McGovern
Opening Remarks by the Minister of International Cooperation of Norway	Anne Beathe Tvinnereim
Opening Remarks by Hala Al-Karib Regional Director of Strategic Initiative for Women in The Horn of Africa	Hala Al-Karib
Opening Remarks by the Representative of the United States of America to the United Nation Linda Thomas-Greenfield	Linda Thomas-Greenfield
General Impact of War on the Humanitarian situation in Sudan	Shadin Alfadil
The Situation of Health Sector amidst the War	Dr. Khalid Badreldin
The Impact of War on Basic Education	Yasir Bader Eldin
The Impact of War on Higher Education	Prof. Intisar Saghayron
The Impact of War on the Cultural Heritage of Sudan	Dr. Ismail Alfahal
Sexual Gender Based Violence amidst the Conflict	Sajaa Nurien
· Patterns of Violations	Dr. Haifa Nugud
· Legal Framework and related issues	Noon Kuskush
· Management and Care of Survivors	Einass Elhadi Elamin
The status social protection amidst the War	Abdel Hameed Elias
Obstacles facing Journalists in The Sudan conflict	Nisreen Malik
Experience and lessons learnt from local initiatives and Emergency Rooms	Dr. Mohamed Tahir
Humanitarian Challenges in Sudan; Rethinking Engagement	Mohamed Elshabik
The economic impact of the War	Ibrahim Badawi
The legal responses to the violations during the War	Mohamed Salah
Overview of the Food security status in Sudan amid War	Dr. Turkawi
Impact of the War on the industrial food Sector in Sudan	Ehab Saeed
The Impact of War on the Infrastructure	Khlood Hussein
The international media coverage of the War in Sudan	Motassim Altahir

Annex 1: The Program of the Conference

19 November 2023

Parallel Working Groups Addressing the Conference's Five Thematic Areas

Social Protection
Health Sector
Gender Based Violence and Women Situation during the War
Food Security and Nutrition
Coordination, integration, Localization and logistic: including the issues of access and administrative difficulties.

Annex 1: The Program of the Conference

20 November 2023

Presentation of the Outcomes and Recommendations of the Working Groups

Social Protection Recommendations	Abdel Hameed Elias
Health Sector Recommendations	Amaa Alwasila
Gender Based Violence Recommendations	Wihag Kamal & Zahra Adam
Food Security and Nutrition Recommendations	Dr. Zuhair Saeed
Coordination, integration, Localization and logistics recommendations	Rajaa Makawi
MSF experience in Sudan War	Abu Baker Bashir
Notes on NRC presence in Sudan During the war	Will Carter
What's happening now : The situation in the besieged areas	Mukhtar Atif
Practical approaches: The Way Forward	Dr. Amgad Fareid Eltayeb
Closing Remarks by President Thabo Mbeki	
The Closing of the Conference by the Chairperson of the Preparatory Committee	Zahra Haider

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في السودان 2023
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