

SUDAN EMERGENCY REGIONAL REFUGEE RESPONSE

Progress Report, January to April 2024



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CREDITS

UNHCR wishes to acknowledge the contributions of all relevant partners at regional and country level, in the preparation of this document.

MAP & STATISTICS

The maps in this publication do not imply the expression of any opinion on the part of UNHCR concerning the legal status of any country or territory or area, of its authorities, or the delimitation of frontiers or boundaries. All statistics are provisional and subject to change. Regularly updated population figures can be found on the [Sudan Situation Portal](#).

COVER PHOTO

Sudanese refugee Aziza constructs a shade to protect her family from the scorching sun at the UNHCR transit centre in Renk, Upper Nile State, South Sudan, which is hosting thousands of refugees and returnees. She and her family fled Sudan after the conflict broke out in mid-April.
© UNHCR/Samuel Otieno

AT A GLANCE

Sudan Situation Regional Overview

Total figures as of 30th April 2024



1.9 M

Sudanese Refugees
and Refugees of Other
Nationalities*



52.9 K

Returnees**



6 K

Third
Country
Nationals



0.1 B



82***

Partners

Region	Funding received**** in million USD	Partners
Central African Republic	\$3,731,735	10
Chad	\$36,420,742	23
Egypt	\$12,506,085	27
Ethiopia	\$19,668,356	25
South Sudan	\$42,494,298	42

*This figure includes Sudanese refugees present in RRP countries prior to April 2023, and those who have arrived since.

**The returnee figure includes refugees and migrants who were hosted in Sudan and have returned to their countries of origin since April 2023. (Returnees to South Sudan are included in the Sudan HRP and not in the Regional RRP.)

***UN agencies and some international NGOs are operational in more than one country but are counted only once as a partner in the RRP although their interventions may vary by country.

**** Data retrieved from [Refugee Funding Tracker](#) as of 15 May 2024



2,365,300

Total Current figures



1,892,000

Total current
Refugees (Sudanese
and other nationalities)



53,000

Total current
Returnees (refugees
and migrant returnees)



6,000

Total current
Third Country Nationals



414,000

Total projected
Host Communities

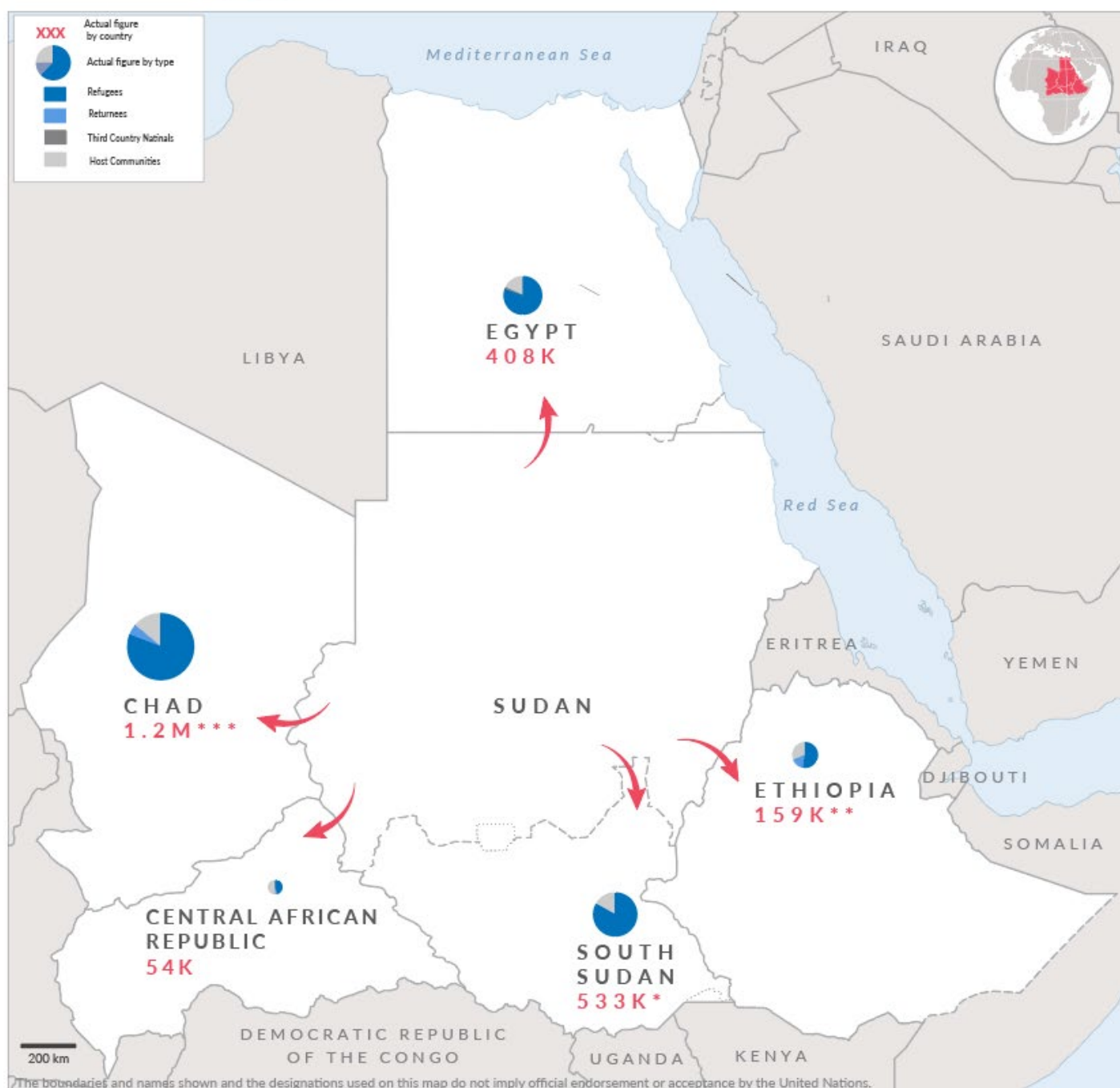
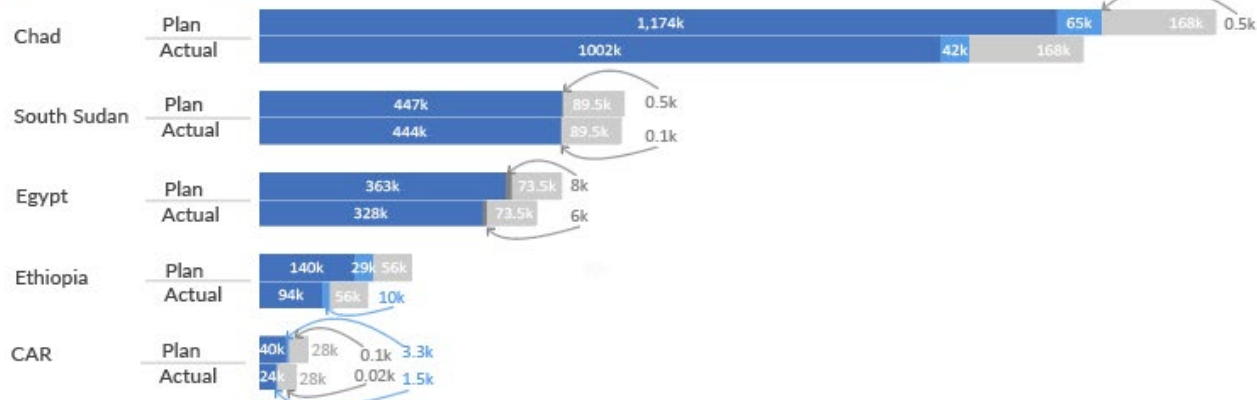
Total figures as of 30 April 2024 | in thousands

Refugees

Returnees

Third Country Nationals

Host Communities



* There are an additional 820,000 returnees (refugees and migrants) who are included in the Humanitarian Response Plan (HRP) for South Sudan that are not included in the Sudan Regional RRP.

** There are 18,000 Ethiopian migrant returnees and 5,000 third country nationals in Ethiopia who are also not included in this RRP; they are reflected in the IOM Response Overview for the Sudan Crisis and Neighbouring Countries.

*** 110,000 migrant returnees from 2023 are included in the HRP for Chad.

Population Figures

Population Type	Planned population as at end 2024	Actual population figures as of 30 April 2024
Refugee Population	2,163,584	1,891,995
Returnee Population	97,300	52,872
Third Country Nationals	9,474	6,129
Total	2,270,358	1,950,996

Note: The plan also assists 414,000 individuals in host communities in the five countries

Regional Overview

Situation Overview

Now known as the world's largest displacement crisis, Sudan continues to be a conflict that shows little sign of ending. Exactly a year since the fighting began on 15 April 2023, more than 8.8 million had fled their homes, including close to 2 million people outside the country.

It is one of the fastest unfolding crises globally, with unprecedented needs. In Sudan, about 25 million people – of whom over 14 million are children – need humanitarian assistance and support. Some 17.7 million people are facing acute food insecurity--of these, 4.9 million people are on the brink of famine¹.

Over 6.6 million people are internally displaced and sheltered mainly with host communities. With close to 4 million children displaced, Sudan is facing the largest child displacement crisis in the world. With most schools closed or struggling to re-open across the country, a staggering 19 million school-aged children risk losing out on their education.

Disease outbreaks are increasing and about 65 per cent of the population lack access to healthcare and between 70 - 80 per cent of hospitals in conflict-affected areas are no longer functional. Over 11,000 suspected cases of cholera, including 305 deaths, were reported. Other disease outbreaks are ongoing in several states, including measles (4,000 cases with 106 deaths), malaria, and dengue fever. Over 700,000 children are expected to suffer from severe acute malnutrition.

The neighbouring countries of the Central African Republic, Chad, Egypt, Ethiopia and South Sudan, continue to receive new arrivals as the fighting continued and living conditions deteriorated in Sudan.

The crisis is spreading, and Uganda – which already has over 1 million refugees –welcomed 30,000 Sudanese refugees, including over 14,000 since the start of the year. In the past year, close to 16,000 Sudanese refugees have registered with UNHCR in Libya after travelling either directly from Sudan or through Chad and Egypt, while another 2,700 Sudanese are awaiting registration. The number of refugees and asylum-seekers registered with UNHCR in Tunisia has reached around 6,500. Both Libya and Tunisia are departure points for people attempting to move onwards to Europe. Nearly 6,000 Sudanese arrivals were recorded in Italy last year compared to 1,000 in 2022.

The Sudan Regional Refugee Response Plan (RRP) partners have mounted a life-saving response but, in many locations in the five refugee hosting countries, the response struggles to meet acceptable humanitarian standards and fails to provide resilience programming due to insufficient funding, with the RRP funded at just 7 per cent. Relocation of refugees away from the extremely congested transit centres in Chad and South Sudan, that risk outbreaks of disease, and more exposure to protection risks, such as gender-based violence (GBV) need continued funding.

There are very high levels of GBV and this requires much more support for a holistic response – this includes safe spaces, facilities for counselling, staff resources, and other much-needed interventions.

¹Data in first 3 paras sourced from <https://reliefweb.int/report/sudan/sudan-one-year-conflict-key-facts-and-figures-15-april-2024>

South Sudan received an average of 1,350 people daily, the largest influx from Sudan of over 640,000 people in total. The country continues to struggle with humanitarian challenges due to the conflict and poverty. The rainy season is fast approaching, and without additional funding, more people will be at risk.

WASH services are affected --in Ethiopia for example there is one latrine for 100 people – this does not allow for people to live in dignity and increases risk of disease. In Chad, nearly 50,000 malnourished children have been identified. Without funding, more than 1 million refugee children will be out of school in the RRP refugee hosting countries.

The joint launch of the 2024 Sudan Humanitarian Needs and Response Plan (HNRP), and the 2024 Sudan Situation Regional Refugee Response Plan (RRP) was held on 7 February in Geneva. The 2024 Sudan Regional Refugee Response Plan (RRP) is projected to cover the needs of 2.7 million people, including refugees, returnees (both refugees and migrants), third-country nationals, and host communities. The 82 partners are seeking USD 1.4 billion. The plan focuses on resilience, system strengthening, and critical humanitarian and lifesaving activities. The plan complements the 2024 Sudan Humanitarian Response Plan which appeals for \$2.6 billion to reach over 18 million people with food, healthcare, cash, and other life-saving assistance in Sudan. This progress report covers the first four months of 2024, and assesses how RRP partners are helping those most affected in the Central African Republic, Chad, Egypt, Ethiopia and South Sudan.

Highlights and Achievements

January –April 2024



Central African Republic

The security situation in Vakaga prefecture where most refugees are hosted, remains volatile due to the presence of non-state armed groups in localities neighboring Birao, such as Saf-Rah, Haiffa, Boromata, Am Dafock, Tiringoulou and in Birao. Continuing military operations including by the Central African Armed Forces (FACA) and their allies and other armed groups in prefectures hosting refugees could undermine the fragile protection environment.

Chad

The five sites established in 2023 to respond to the Sudanese refugee influx and the extensions of the older refugee sites are now filled to capacity, two new refugee sites are urgently required to facilitate the relocation of 160,000 refugees from Adré and other spontaneous sites, also including daily arrivals before the rainy season begins. The Government

² Includes Child Protection services and GBV responses

has requested support from all stakeholders to develop a national response strategy in Eastern Chad to respond to the influx of Sudanese refugees. RRP partners and the local authorities carried out a joint assessment during which they met community leaders to prepare for the re-opening the sixth refugee site in Chad.



As of April 2024, over 570,000 Sudanese refugees have arrived in Chad since the Sudan conflict started one year ago, nearly as many as Sudanese refugees as Chad has received in the past two decades. Women and children represent some 90 per cent of the refugees, with 77 per cent of women arrived alone in Chad, with children © UNHCR/Ying Hu

Egypt

In February 2024, UNHCR and UNDP signed a Memorandum of Understanding (MoU) on programming for resilience in the refugee response. The MoU includes the operationalization of the Humanitarian Development Peace Nexus (HDPN), setting up and co-leading an inclusive Resilience Technical Working Group (RTWG) and providing support to the government.

Ethiopia

By the end of April 2024, Ethiopia had received 92,435 arrivals from Sudan adding to a pre-existing Sudanese population of 51,377 hosted in Sherkole, Tsore and Bambasi camps in Benishangul-Gumuz region.

South Sudan

RRP partners maintained their presence in key locations such as Renk, Malakal, Abyei, Wedwil, Gorom, Jamjang, and Maban, delivered essential protection services, shelter, NFIs/CRIs, and food assistance. The new extension of the Renk Transit Centre was opened in early January, allowing to decongest the old site. However, challenges such as overcrowding at transit centres and increasing protection risks, particularly for women and girls, persist.

There were also significant changes in the profiles of refugees compared to 2023. In 2023, 51 per cent of Sudanese refugees came from Khartoum, which dropped to 14 per cent in 2024. Given the shifting nature of conflict in Sudan,

arrivals from the White Nile increased from 35 per cent in 2023 to 56 per cent in 2024, and those from Al Jazira rose from 3 per cent in 2023 to 20 per cent in 2024.

Sectoral Responses



Protection

Some 8,158 (3,610 households) Sudanese refugees and 1,457 (363 households) Central African returnees crossed the border from South Darfur, Sudan, to the northeastern province of Vakaga in the **Central African Republic** between January and April 2024. Some 8,291 refugees (3,516 households) moved to Korsi in Birao during the first four months of the year, quadrupling the settlement's population. As of 17 April 2024, Korsi hosted 11,196 refugees, about half the number of Sudanese refugees who have entered the Central African Republic. All refugees received protection services, including civil documentation, identification of specific needs, and referrals. Three community-based protection committees and 30 community outreach workers were trained on protection themes, including child protection, prevention of GBV, and referral pathway mechanisms. Outreach workers led awareness-raising sessions, which reached 4,222 refugees and host community members.

The Government of **Chad**, through the “Commission Nationale pour l'Accueil et la Réinsertion des Réfugiés et des Rapatriés” (CNARR), RRP partners, continued to monitor the 32 border crossing points between Chad and Sudan. At the Adré/Adikong border, where most of the new arrivals entered, UNHCR operates a registration centre where the new arrivals undergo pre-registration using basic biometric data (fingerprints). The gathered information was analyzed, and the [protection dashboard](#) was produced regularly.

From 15 April 2023, when the conflict began, to 28 April 2024, the government of Chad has recorded a total of 585,201 individuals (165,861 households) including 124,439 individuals who arrived in 2024 for the period covering January to April. UNHCR and partners biometrically registered and pre-registered 511,503 individuals (142,303 households) 88 per cent are women and children, and 14 per cent have specific needs. Out of this figure, 124,439 refugees have been registered from January to April 2024. A total of 261,013 new arrivals (71,105 households) were relocated from border areas to consolidated refugee sites away from the border in safety and dignity.

Persons with potential exclusion triggers were identified during screening, pre-registration, or registration, so as to maintain the civilian character of asylum; mechanisms were in place to identify and manage protection sensitive cases including some minorities who were exposed to high protection risks. Efforts were made to identify urgent/imminent resettlement cases among the new population for the Canada “human rights defenders” program. Awareness-raising sessions were held to understand the possibilities of complementary pathways which includes study programs/private sponsorship/labor mobility/diversity visa and family reunification.

IOM and the Government of Chad estimated that 165,499 migrant returnees crossed into Chad, with 93 per cent of them being women and children. IOM provided cash assistance to returnees to help them meet their basic needs.

As of 30 April 2024, UNHCR **Egypt** had registered 605,000 refugees and asylum seekers, including 328,000 Sudanese (54 per cent of the total registered refugee population), of which 135,000 individuals were registered in the first four months of 2024. 90 per cent (121,000) of those registered this year, are Sudanese. Among the Sudanese registered this year, 85 per cent were new arrivals.

In total, 340,000 new arrivals from Sudan have received appointments via [Infoline](#) for registration, referring vulnerable refugees to specific services and replying to queries. There are currently 239,000 individuals with pending appointments, of which 160,000 (70 per cent) are people from Sudan. The backlog of appointments with UNHCR for registration because of the overwhelming number of requests led to a long waiting period (from four to six months). Registration is required for a residence permit, a process that takes more than a year. The permit is valid for a six-month period.

The inability of people in need of international protection to regularise their stay, including timely documentation and residency issuance/renewal, resulted in the lack of a sense of security and restricted freedom of movement, due to the risk of arrest, detention, and deportation. It also limited access to basic services, including housing, education, health, and justice. This, along with scarce livelihood opportunities, drove many refugees and asylum seekers to onward movements.

RRP partners delivered legal assistance and information awareness sessions on the legal framework, civil status registration, filing police reports, among others to 1,834 people. The Protection Sector Working Group (PSWG) improved the response to legal and physical protection needs, streamlining engagement with government entities and tackling issues such as housing or mental health challenges.

Community-based protection (CBP) partners provided psycho-social support to 717 Sudanese refugees. By the end of April, 248 active refugee-led organizations (RLOs) were mapped across Egypt. The CBP sub-sector working group reviewed its TOR which includes refugee representation from RLOs, ensuring their meaningful participation in the coordination forum.

In **Ethiopia**, From January 2024, the Government's Refugees and Returnees Service (RRS) and UNHCR pre-registered at household level a total of 11,008 new arrivals from Sudan, including 6,699 Sudanese, 362 non-Sudanese refugees (Eritreans, South Sudanese etc.) and 3,947 Ethiopian refugee returnees. This makes the total recorded new arrivals since the outbreak of the conflict to 53,572 individuals. 69 per cent of the new arrivals crossed through the Kurmuk entry point in Benishangul-Gumuz region, 30 per cent arrived through the Metema entry point in Amhara region and 1 per cent of individuals at different entry points in Gambella region (Pagak, Burbiey). For the 9,556 Ethiopian refugee returnees from Sudan, most have joined IDP settings in central Tigray as they could not return to their places of origin in Western Tigray due to security concerns.

Individual biometric registration (Level 3) was conducted, and proof of registration issued for 5,358 individuals (2,841 households). 13,209 refugees received protection services, including protection counselling at transit centres and home visits were made in the various settlements. Also, rapid assessment and identification of people with specific needs were conducted at Kurmuk Transit Centre. 187 elderly and 54 people with disabilities received available support.

In **South Sudan**, through coordinated [joint border monitoring](#), IOM, UNHCR, and the Government of South Sudan documented 176,957 new arrivals from Sudan, comprising 66 per cent of South Sudanese returnees, almost 34 per cent of Sudanese refugees and less than 1 per cent of eight other nationalities. Since the start of the conflict in Sudan 144,419 refugees from Sudan were individually [registered](#) in transit, reception centres and refugee camps and settlements. Among them, 53 per cent of those were female, while 55 per cent were children. At least 8,204 were identified as individuals with protection-specific needs.

The [Protection Analysis Update \(PAU\)](#) published in February 2024 jointly by the Protection Cluster and UNHCR comprehensively documented the protection environment at crucial stages of the displacement journey, including risks, vulnerabilities, and preventive measures. During the reporting period, 126,163 refugees and asylum seekers received various protection services. These services included refugee registration and provision of identity documents, renewal of lost identity documents, provision of individual protection assistance, and psycho-social support. At least 1,536 refugees and asylum-seekers were registered in Boro Medina and Raga of the Western Bahr el Ghazal State by mobile teams.

The trend in border crossings has remained consistent, with most arrivals entering through the Joda-Wunthou border crossing (82 per cent). Most refugee arrivals from Sudan during this period have settled in North Renk, Bunj-Maban, Wedwil, and Gorom Refugee Settlement in Juba. Approximately 10 per cent of Sudanese refugees reported joining family members who had been displaced to South Sudan earlier.

Following the re-opening of the road from Renk to Maban, many refugees have refused to go to Maban arguing poor conditions, security threats, lack of livelihoods and prospects. Nevertheless, since the start of the year, 3,394 refugees from Renk have been relocated to Maban, and 1,698 individuals to Jamjang. Deteriorating security conditions in Abyei have impacted refugees' stays in the transit centre. Despite these challenges, the first relocation in four months took place recently, with 261 individuals successfully relocated to Wedwil Refugee Settlement.



Sub-Sector: Child Protection

In the **Central African Republic**, from January to April, the government and humanitarian partners supported 40 unaccompanied and separated children (UASC) in Korsi with case management, mental health, and psychosocial support (MHPSS) through Safe Spaces. The two Child-Friendly Spaces provided MHPSS activities to more than 400 children and adolescents. 33 community relays and MHPSS focal points identified and trained in 2023 received refresher training early in the year on child protection, MHPSS, prevention of GBV, and the referral pathway mechanism to identify and support children with protection concerns. 14 child survivors of GBV were identified and supported with case management services, individual and group therapy, and individual and family support including dignity kits, cash support, and clothing distributions.

In **Chad**, partners provided child protection services, including best interest assessments, risk prevention campaigns, psychosocial support through recreation and sports, and various forms of other assistance targeting 22,245 children in Ouaddaï, Sila, and Wadi Fira provinces. 3,518 UASC were identified and provided with support including through 112 host families who were trained in care for UASC.

ICRC also finalized documentation for family tracing for 249 children in Sila province. 4,572 newborns were registered at birth, as part of statelessness prevention. Community-based child protection structures were strengthened with the work of at least 531 community volunteers who are using the service mapping and child protection referral pathways. Eight child-friendly spaces were built in Ouaddaï and Wadi Fira provinces by Plan International, World Vision and Croix Rouge du Tchad between January and March.



Refugee and host community children share this playground, and have joint activities, and sports at this community centre run by Caritas in Alexandria, Egypt. Egyptians, Sudanese, Syrians, and other refugee families share this common space that allows for social cohesion within society. © UNHCR/Firas Al-Khateeb

In **Egypt**, there was a 49 per cent rise in the number of registered Sudanese UASC compared to 2023 –increased from 1,660 to 2,483 UASC children. Child protection risks such as physical, verbal, and sexual abuse, were increasingly reported in public spaces and at home. Plus, the economic crisis in Egypt is also affecting vulnerable refugee women and girls, exposing them to higher risks of GBV and sexual exploitation. The GBV survivors find it difficult to escape from the cycles of violence due to the lack of stable income sources that can sustain their safety and dignity. Increasing debt,

medical needs, high cost of their children's education fees, and rapidly increasing housing costs leave refugees vulnerable to exploitation.

Through a network of five specialized hubs, nine child-friendly spaces and 30 family clubs operating across Aswan, Greater Cairo, Damietta and Alexandria, provided Mental Health Psychosocial Support (MHPSS) services to 9,596 Sudanese children and 171 caregivers. In addition, 3,336 children at risk including UASC Sudanese refugees and asylum seekers with case management services.

In **Ethiopia**, during the reporting period, a total of 513 children were identified as UASC including 229 from the newly arrived refugees. Child protection partners supported a total of 3,171 children at various locations with services including Best Interest Assessments, case management, psychological first aid, alternative care arrangement, multipurpose cash and awareness activities. In addition, 8,367 children and their caregivers were provided with community-based mental health and psychosocial support. Also, 1,250 members of community-based child protection mechanisms and 20 incentive caseworkers benefited from awareness sessions on child protection. Funding shortfalls impacted the capacity of the RRP partners to respond to the needs in particular in the Tigray region, where there was no child protection partner to support the response to Ethiopian children returning from Sudan.

In **South Sudan**, child protection partners provided specialised services to 7,444 refugee children. These services included sessions with children and their caregivers to assess needs and risks and referrals to specialised service providers like placement into alternative care, family tracing, and reunification. 26,204 refugee children were supported in accessing both specialised and non-specialised mental health services in child-friendly spaces. Additionally, 1,670 youth received psychosocial support in Maban.

Child protection partners enrolled 330 children in the Social Emotional Learning curriculum to build their resilience. 12,480 adolescents (41 per cent female), benefited from skills-building like embroidery, beading, and crocheting. 274 caregivers, including foster parents, were trained in positive parenting skills. Through awareness activities, 1,038 people were reached on key child protection concerns such as child labour, child marriage, and emotional and physical abuse, conducted in homes, community centres, and schools through child rights clubs' activities.



Sub-sector: Gender-based Violence (GBV)

In the **Central African Republic**, partners supported survivors of GBV in two safe spaces in Korsi and two safe spaces at the District Hospital of Birao. A total of 2,012 people were reached through GBV prevention activities, and 342 GBV survivors were supported with dignity kits, life-saving services, psychosocial support, case management, and referrals. More than 2,000 dignity and menstrual hygiene kits were distributed to women and adolescents including GBV survivors. The community-based garden established through the *Ma Mbi Si* ("Listen to Me, Too") project helped survivors with agro-therapy and income-generating activities.

In **Chad**, partners conducted security audits in the Mile and Kounoungou refugee sites as well as in Guereda town, to identify protection risks, the gaps in services offered to survivors and the strengths and opportunities provided by different refugee and host communities. Women's spaces were set up in Farchana, Arkoum and Metché refugee sites to allow women and girls to participate in socio-recreational activities. 892 members of the community were trained on GBV, psychological first aid, referrals and the importance of timely disclosure of incidents of rape, avoiding unwanted pregnancies, child abandonment and family settlement of rape cases. 384 frontline workers, mainly GBV case managers, from 10 organizations were trained on Protection from Sexual Exploitation and Abuse (PSEA), GBVIMS, MHGap approach/psychosocial care for survivors and the legal framework for protection against GBV. 11,562 refugee and host communities were reached during awareness-raising activities on GBV. Service mapping and GBV referral pathways were made available in refugee sites. As part of the response, 2,371 survivors, mostly refugees women and girls (99 per cent) received support, including psychosocial, medical, legal, and security assistance, dignity kits, and cash for protection and empowerment. Despite efforts, several challenges remain notably the under-reporting of GBV incidents for fear of reprisals and stigmatization. More than 66 per cent of incidents are committed by intimate partners, meaning women are not safe at home. The lack of income-generating activities, the lack of adequate care of mental health for GBV survivors, and the lack of alternatives to firewood are also challenges.

In **Egypt**, GBV partners reached 9,675 Sudanese through comprehensive GBV response services, including case management, MHPSS, cash assistance, shelter, legal support, medical response, dignity kits, and referrals. A total of 10,860 individuals have benefitted from GBV prevention activities, including with GBV prevention messages through awareness-raising sessions and outreach efforts promoting behavioural change. The 13 Women and Girls Safe Spaces

(WGSS) provided support to up to 20,000 Sudanese refugee women and girls. GBV partners provided capacity-building sessions and delivered post-rape kits for the medical service providers in Aswan, where there are a number of Sudanese new arrivals.

In Ethiopia, partners prioritized the safety and well-being of survivors by delivering immediate and life-saving support which included medical support, case management, psychosocial support, financial assistance, needs assessments, developing safety plans, and counselling and psychotherapy following a survivor-centred approach. While legal aid was limited, partners ensured support services to critical cases. A total of 586 survivors and persons at risk including 530 from the new arrivals received available support including hygiene kits. Some 41,454 refugees and 650 refugee returnees were engaged in GBV prevention and response awareness sessions within the community and by accessing the women and girls' safe spaces.

31 GBV staff, 612 stakeholders including government staff, refugee coordination councils, women & youth groups, and community members were trained on gender equality, GBV prevention, risk mitigation, and survivor-centred response approaches. In addition, 709 women and girls in Kurmuk and Metema were engaged in women empowerment activities and 183 refugee community-based groups worked on GBV prevention and response.

In South Sudan, RRP partners assisted 16,936 GBV survivors and persons at risk with support which included medical services, dignity kits, psychosocial support, case management, and referrals for other services. 49 per cent of reported survivors were women and girls, and 12 per cent were children. The most frequently reported GBV incidents were physical violence, followed by sexual and psychological violence. The partners reached 73,377 people with GBV prevention activities. GBV safety audits were conducted in Jamjang and Renk. During this period, GBV survivors accessed specialized response services 1,022 times, including psychosocial, legal, health, safety, and livelihood support. Additionally, 1,928 women and girls engaged in activities at Women and Girls Safe Spaces. 11,390 women and girls received dignity kits. Training sessions bolstered the capacity of 51 GBV staff and frontline workers in case management and clinical management of rape, aiming to shift community norms and behaviours regarding GBV.

The SASA! program, piloted in Maban, Juba, and Jamjang, has been instrumental in promoting behavioural change and violence prevention. A survivor satisfaction survey indicated high approval of GBV case management services. The rollout of GBV Information Management Systems (GBVIMS) for all partners in South Sudan aims to streamline reporting, follow-up, and case management processes.



Education

In the **Central African Republic**, there are more than 9,620 school-age Sudanese refugee children in need of education, including more than 4,213 school-age refugee children in Korsi in Birao. In the first four months of the year, formal education enrolment quadrupled, with more than 962 refugees (46 per cent girls) enrolled in local schools, with 686 refugees in Birao and the rest in other spontaneous sites and host communities. The gross primary school enrolment rate increased to almost 3.4 per cent in April. Partners reinforced the local school system with additional classrooms, WASH facilities, and administrative structures. All teachers and education authorities in Birao were trained in child protection, MHPSS, and the prevention of GBV in schools. The 33 community relays and MHPSS focal points worked alongside teachers and school directors to identify, refer, and support refugee and host-community students needing support.

The needs remain enormous, with more than 8,600 refugee children still out of school and local structures struggling to absorb the increased enrolments.

In **Chad**, partners constructed 24 temporary learning spaces (TLS) in Aboutengue, Zabout, Metché, and Arkoum, adding to the 81 TLS already constructed in the same localities and in the extensions of the old refugee sites. The classrooms accommodated more than 36,500 children, including more than 600 Chadians. The Ministry of Education, with the support of RRP partners, developed and adopted the SOPs that regulate education interventions and ensure coherence, harmonization, and consistency among actors.

The Ministry of National Education and Civic Promotion led a joint mission through the Inspectorate of National Education of Assounga, RRP partners, and community leaders to assess the extension of education services to the spontaneous site of Adré. The assessment concluded that if the school structures in eight public schools in Adré are rehabilitated, they can accommodate up to 3,600 more children. Partners explored collaboration with the Inspectorate of National Education of Assounga and the schools to enrol refugee children in Adré.

In **Egypt**, a UN Task Team on “Inclusion in the National Education System” was established to strengthen the collaborative mechanisms in partnership with local stakeholders and NGOs, to facilitate the inclusion of refugees, migrants, and other vulnerable groups in public schools, regardless of nationality, disability, or background. UNHCR and UNICEF jointly coordinated with the Egypt Ministry of Education and Technical Education to tailor interventions that enhanced the physical and digital capacity of public schools to absorb the increasing number of Sudanese students and improve the quality of education.



Kaltouma Khalid, pregnant woman and mother of eight children, fled the violence in her village of Nyala, Sudan. She found refuge in Am-Dafock, in the Central African Republic. ©UNHCR/Stella Fatime

According to a recent survey conducted by UNICEF, by April 109,638 Sudanese children (3 - 17 years old), and 96,881 refugee youth (18—24) were registered with UNHCR with almost 50 per cent out of school and university due to challenges with access to education. This includes delays in obtaining residency permits for refugee families and the increase in university registration fees for non-Egyptian students to USD 2,000.

Partners provided education support which included grants to 1,915 Sudanese students, distribution of school kits to 1,298 students, menstrual care kits to 330 female students, remedial and catch-up classes to approximately 1,423 students and supported 266 Sudanese children with disabilities to enrol in schools. Partners also held awareness-raising sessions for more than 121 teachers and parents. Partner interventions covered areas with a high density of newly arriving Sudanese refugees in Cairo, Alexandria, and Aswan governorates. RRP partners supported the Refugee Community Learning Centres (CLCs), by conducting safety assessment visits to 17 centres, provided digital equipment to 71 centres, safeguarding and awareness-raising sessions to teachers of 30 centres, and digital literacy trainings to teaching staff from 10 centres. The joint task force between the Education sector and GBV sub- sector addressed and mitigated GBV risks in CLCs.

In **Ethiopia**, under the leadership of the government, the education response focused on integrating refugees in host community schools. An estimated 14 per cent (1,362 children) were enrolled for primary, however, no secondary school enrolment was recorded. For the pre-existing Sudanese population hosted in Benishangul-Gumuz, provision of education services continued in the schools located in the three refugee camps and host community schools, and the current enrolment stands at 96 per cent (19,093 children) in primary and 36 per cent (3,130 children) in secondary school. The overall Gross Enrolment Rate for primary education was 68 per cent and 23 per cent for secondary education. Five refugees are in Ethiopian public universities supported by the Albert Einstein German Academic Refugee Initiative (DAFI) scholarship programme. Twenty-four teachers were recruited from the refugee community to work with Ethiopian teachers to support refugee children. Catch-up and remedial classes were provided to 96 children who are registered to sit for the national examination in June 2024. Parent-teacher associations of refugee and host community members were established and they supported the back to school awareness campaigns. Five tented classrooms were provided to expand the capacity of the local school in the interim of building permanent classrooms. The Education sector continues to face challenges, such as shortage of classrooms in the host community schools, a lack of host community secondary schools, lack of school materials and furniture, and language barriers. Partners and RRS are collaborating to ensure emergency education continues for all children as long-term measures are established.

In **South Sudan**, with improvements in infrastructure, teacher incentives, and learning materials progress was made in enrolling 30,645 refugees at primary and secondary levels. Education facilities in Maban, Gorom, and Jamjang refugee camps were expanded to accommodate new arrivals, ensuring every child had access to learning opportunities. School governance was strengthened through training and efforts to encourage school attendance, particularly for girls. Cash-based interventions supported exam uptake, and scholarships were provided for secondary students. Regular school attendance was supported by WFP's school feeding program, with additional assistance from the Girls Education South Sudan Project. UNHCR, the government, and IGAD facilitated national consultations on the Costed Plan of Action for Education, assessing progress and outlining contextual challenges.

Four new DAFI scholars and one Mastercard Foundation scholar joined USIU-Africa. In 2024, 21 DAFI scholars graduated, with six successfully transitioning into the labour market through the Instant Network Schools (INS) connected learning programme. Expansion of the INS program to two centres, in collaboration with the Vodafone Foundation, led to increased connected learning opportunities.

However, the lack of funding left many educational needs unmet and exacerbating an already weak education system. In spite of the enrolment of some 30,000 refugee children in schools, overall, the proportion of children and young people enrolled in schools decreased, with primary and secondary enrolment rates dropping to 34 per cent and 9 per cent, respectively.



Food Security

At the Korsi settlement in Birao in the **Central African Republic**, partners provided two hot meals a day for refugees in the transit centre and also included those waiting to be part of the monthly food ration assistance programme. By the end of April, 1,000 refugees received hot meals daily, while 9,712 refugees (4,294 households) received food rations for the month of April. Because of logistical and financial constraints, last month's ration of rice, as beans, oil, and salt was not distributed.

In **Chad**, during the reporting period, a total of 402,326 persons received food assistance. WFP provided monthly in-kind food assistance to all new arrivals at the border and refugee sites. Hot meals were provided for two days to all the refugees during relocation from border areas, and as they waited to receive core relief items and dry food rations. The old Sudanese refugee caseload received targeted cash assistance based on their vulnerability. Concern remains about the regular food assistance in the coming months. In case of a halt in food assistance, the food security situation of refugees will be detrimental to an already vulnerable population.

In **Egypt**, WFP provided ready-to-eat food meals to 25,000 new arrivals from Sudan at the border crossings of Argeen and Qustol. This brought the total number of Sudanese and others who received this assistance since the onset of the Sudan crisis in April 2023 to 265,300 individuals. Also, about 80,000 Sudanese received "monthly emergency cash for food assistance" and 3,950 Sudanese pregnant and breastfeeding women and their children under 2 years old "monthly

conditional cash assistance”. In addition, WFP, in collaboration with the National Nutrition Institution, provided nutrition counselling and awareness-raising to refugee pregnant and breastfeeding mothers on infant and young child feeding practices. In April WFP adapted a major programming change, integrating registered Sudanese refugees and other crisis-affected populations into WFP’s regular monthly food assistance programme. This provides a better food assistance system for the refugees. However, as a result of the successive devaluations of the Egyptian Pound, the proportion of the food basket covered by the Cash-Based Transfers value (EGP 450) steadily decreased from 63 percent in February 2023 to 41 percent in February 2024. WFP increased its monthly transfer value from EGP 450 to EGP 700 (equivalent to USD 14.6), which will cover 56 percentage of the food basket cost. Key findings of a post-monitoring distribution survey (PDMs) WFP conducted with 350 Sudanese beneficiaries from the assistance, showed that there was an improvement in the overall food security levels of the beneficiaries and that the cash assistance had highly contributed to meeting food needs of households, given that almost nine out of ten households reported having spent the cash assistance on food.

In **Ethiopia**, in line with the new frameworks on general food distribution, partners adhered to agreed roles on general food distribution for newly arriving refugees from Sudan and the pre-existing population settled in Benishangul-Gumuz region. Emergency food rations, mainly high energy biscuits and hot meals, were provided by RRP partners at entry points to refugees and general food rations at the level of 60 per cent of recommended dietary allowance were provided to refugees in camps. Around 98,115 refugees received general food rations monthly in camps and settlements.

Recent large-scale surveys and assessments pointed towards severe food insecurity among refugees with increased negative coping strategies to meet household food needs which is also aggravated by conflict and insecurity limiting access.



Majok, 9, sits on his family's luggage at the UNHCR transit centre in Renk, South Sudan. The centre, which has long reached its capacity and is hosting more people than originally estimated, provides access to water, food and medicine for many refugees and South Sudanese returnees fleeing the conflict in Sudan. © UNHCR/Andrew McConnell

In **South Sudan**, WFP and partners provided in-kind food and cash-based transfers at 50 per cent rations (15 feeding days per month) to more than 310,400 refugees. Since the Sudan response began, food security partners have provided assistance to more than 517,000 individuals, including at border reception centres, transit centres, and final destinations. WFP and its partners offered lifesaving food, nutrition, protection, livelihood, and other assistance in nine major refugee camps and settlements (Aweil, Gorom, Makpandu, four Maban camps, and two Jamjang camps). Assessments have revealed high levels of food insecurity and malnutrition among children and mothers in families crossing the border and among those staying in transit for longer periods, as no recurrent food assistance is provided in Renk Transit Centre.

Despite persistently high humanitarian needs, partners faced severe funding shortfalls forcing partners to shift from blanket assistance to targeted food assistance in refugee camps despite general levels of vulnerability and food insecurity across the refugee and returnee populations.



Public Health & Nutrition

In the **Central African Republic**, in collaboration with the district hospital of Birao, partners operated three health posts with specialists in primary care, maternal health, sexual and reproductive health, MHPSS, and nutrition. The health posts received 12,537 consultations, including 10 per cent from the host-community neighbourhoods around the refugee settlement. Maternal health providers assisted with 552 pre-natal consultations, 46 post-natal consultations, 59 gynaecology consultations, and 39 births. Some 121 refugee children received multi-antigen vaccinations, and 68 pregnant women received tetanus vaccines. 438 refugee children were supported for moderate malnutrition, 54 were treated for severe malnutrition, and 197 children between 6 and 23 months old at risk of malnutrition received food supplements to prevent malnutrition. The health posts referred 212 cases between January and April.

In **Chad**, partners supported the Ministry of Health provided primary healthcare to refugees and host populations through a network of 20 health centres and 10 health posts. MSF constructed two secondary hospitals in Aboutegue and Metché refugee sites. A total of 384,050 medical consultations, including 54,314 (14 per cent) from host communities, were held. Acute respiratory infections, watery diarrhoea, and malaria remain the three most frequent pathologies. Some 2,620 new mental health cases were registered, bringing the total number of mental health clients under follow-up care to 14,921. A total of 5,912 new births were registered, and 96 per cent were assisted by skilled health workers. Community management of acute malnutrition programs were implemented in all the refugee sites; 111,754 children were screened for malnutrition and 20,706 moderate acute malnutrition and 7,164 severe acute malnutrition cases were enrolled in nutrition programs. Some 33,244 pregnant and lactating women were screened for malnutrition, and 3,086 were treated for acute malnutrition. The nutrition SENS survey, conducted in January confirmed a global acute malnutrition rate of 10.4 per cent and a severe acute malnutrition rate of 0.8 per cent. On 2 March, the Ministry of Health declared a hepatitis E outbreak, and by the end of April, 2,092 cases were registered, with seven deaths (fatality rate 0.3 per cent).

In **Egypt** partners provided 9,729 primary health care consultations, 1,187 secondary health care interventions and 2,896 vaccinations were given to Sudanese refugees and asylum seekers. They also donated four million pairs of medical gloves to the Ministry of Health and Population (MOHP) in Aswan for infection prevention and control measures purposes. In Aswan, partners trained 18 staff on the provision of healthcare for women subjected to violence and made available medication used in clinical management for rape. Partners also explored with the health insurance authorities' modalities for refugees to access to health care through the Universal Health Insurance Scheme, which helps refugees to have access to quality health services without financial hardship.

Resource mobilization efforts were initiated to resume some of the suspended medical activities in Aswan governorate, a major point of entry for Sudanese in Egypt. Despite this, access to health services became more difficult for Sudanese newcomers as many health partners reduced or suspended their activities due to lack of funds and competing priorities. Although screening and vaccination were still carried out by the Ministry of Health and Population the shortages of some essential medications were noted.

Nutrition partners counselled 1,486 primary caregivers on infant and young child feeding. With technical and financial support from nutrition sub-sector members, the MOHP screened 2,505 children under-5 and 401 pregnant and lactating women at primary health care units in areas with high refugee concentrations. 375 children were identified with acute malnutrition and were referred for further management. The sector is supporting MOHP to expand services through the District Health Information Software (DHIS2), a platform for the collection, reporting, analysis, and dissemination of aggregate and individual-level data. Partners also supported MOHP to develop acute malnutrition management

guidelines, for health care workers training to detect and manage acute malnutrition services for refugees at different levels of care.

The Government of Egypt has recently introduced user fees for primary health care services for Egyptians and non-Egyptians, as well as limiting the number of drugs which can be prescribed. This is expected to adversely affect refugee access to antenatal care and growth monitoring nutrition services.

In **Ethiopia**, primary and secondary health care services were provided to both newly arriving Sudanese in Metema and Kurmuk as well to the pre-existing Sudanese population hosted in Benishangul-Gumuz camps. For the newly arrived refugees, medical services were provided through mobile medical health and nutrition teams. 31,554 consultations were conducted, and 762 deliveries attended. Noting resource limitations, only emergency cases were referred to the secondary and tertiary health facilities run by the government for further medical care. To prevent disease outbreaks active community surveillance through the community outreach workforce was prioritized.

RRP partners provided mental health and psychosocial support to individuals. In Benishangul-Gumuz region, UNHCR enrolled 15 individuals, including 4 children, in therapy, some of whom presented anxiety, depression, generalized stress, trauma, and some were survivors of GBV. To address the lack of partners providing these services, four community-based therapy groups were formed to offer counseling and therapy. Despite the ongoing need for MHPSS, budget constraints have led to the suspension of MHPSS activities in Benishangul-Gumuz region.

RRS and RRP nutrition partners prioritized nutrition specific services to newly arrived refugees at entry points, transit centres and settlements. 16,470 children under five were screened for malnutrition, including 989 newly arrived children. Among them, 6.4 per cent were identified to be acutely malnourished, 279 children with severe acute malnutrition (SAM) and 774 with moderate acute malnutrition (MAM) were identified and enrolled in the Outpatient Therapeutic Program (OTP) and Targeted Supplementary Feeding Program (TSFP) respectively. The nutrient dense CSB super cereal for children, pregnant and lactating women is insufficient to meet existing needs. The funding constrains impact the provision of quality health, nutrition, and food services to refugees with expected high risks in disease outbreaks and malnutrition.

In **South Sudan**, medical and nutrition teams screened 26,167 children under five and pregnant and lactating women at the transit centres, reaching over 20,214 individuals with interventions to prevent malnutrition, including vitamin supplementation. Vaccination efforts targeted over 118,537 children under 15 for polio, measles, and other vaccine-preventable diseases, including COVID-19, at the transit centres in Renk and other locations.

A primary healthcare centre was established in Renk Transit Centre, where three healthcare partners provided 24/7 curative and preventive healthcare for all new arrivals. New arrivals were screened for medical conditions before being relocated to their final destinations. Preliminary data indicated high malnutrition rates (GAM beyond the 15 per cent emergency threshold). Preventive and curative interventions were provided on-site or at nearby centres, including supplementary feeding programs and community-based treatment for acute malnutrition using plumpy nuts and other special nutrition products. 244,099 medical consultations for returnees and refugees were conducted. Safe motherhood programs were also provided at the primary healthcare centres, with 1,130 skilled deliveries recorded, achieving a skilled birth rate of 91 per cent. 113 community births were managed despite stretched staffing capacity. 848 individuals received HIV treatment services and opportunistic infection management.



Livelihoods & Economic Inclusion (LEI)

In the **Central African Republic**, at the Korsi settlement partners planned the farming initiative's launch. The initiative includes cooperatives from both the refugee community and host community, including Central African returnees and internally displaced people. Local authorities allocated 10 hectares of land for the collaborative farming initiative.

In **Chad**, livelihood and cash-based (CBI) teams carried out market assessments in the new refugee sites, including those assessed in 2023. The assessment results were not conclusive regarding the capacity of various operations; results will be shared by the end of May.

Financial support with CBI was provided to 6,145 beneficiaries (including 30 per cent of the host population) to develop various economic integration activities in the sectors of rainfed agriculture, market gardening, livestock breeding, and small business activities.

UNHCR and GIZ signed an MOU for technical support for the surface water mobilization project in the Ouaddaï Province that strengthens the resilience, economic inclusion, and sustainable livelihoods for new refugees and host communities. Construction for three spreading weirs began in March, with excavations completed on the three sites. NGOs responsible for developing conflict-sensitive community agreements to secure land and maintain infrastructure were established in the three sites in the presence of local administrative and community authorities.

The development of climate-resilient agricultural value chains in refugee-hosting areas to enable a diversified agricultural production base and economic opportunities for young people and women were expanded; beneficiary targeting committees were established to support identification, and targeting of beneficiaries is underway in the East. The outreach to financial service providers for their training on refugee needs and livelihood opportunities is ongoing.

In **Egypt**, despite the efforts of the Livelihoods and Economic Inclusion working group, the effects of inflation, unemployment, and economic disparities weighed heavily on host communities and refugees. The group implemented initiatives to promote sustainable livelihoods, such as enhancing vocational training, fostering entrepreneurship, and supporting micro and small enterprises. Efforts were constrained by limited resources, structural barriers, and legislative and policy challenges. Some 238 Sudanese received livelihoods services such as capacity development and training for livelihood purposes, business development services, including grants, in-kind support, and access to finance.

In **Ethiopia**, livelihood interventions were limited, given the priority for lifesaving activities and a lack of resources. Some 1,459 people received livelihood support, including 34 refugees and 110 individuals from the host communities who benefited from the construction of shops in Benishangul-Gumuz region along with a start-up capital. Also, near Kurmuk transit centre, 400 refugees and 400 individuals from the host communities were organized in a cooperative to cultivate 80 hectares of land. Beneficiaries were trained and received tools to farm (tractors, grinding mill machine).

In **South Sudan**, new arrivals from Sudan are prioritized for life-saving assistance in transit; therefore, little livelihoods and economic inclusion programming took place in transit and reception centres. RRP partners are committed to the financial inclusion of refugees, which also aids the local community. During the reporting period, RRP partners provided livelihood support to 3,215 individuals.

In Maban and Jamjang, RRP partners promoted the economic and financial empowerment of more than 40 village savings and loan groups comprising over 800 refugee women. Each group was trained and will benefit from a ceiling of USD 2,600 in grants to invest in growing individual or group enterprises.

In Central Equatoria, assistance was provided to over 35 refugees to open bank accounts with Equity Bank and enroll in a credit scheme for business capital. Efforts were underway to set up and upgrade digital centers, providing computer education and over 60 laptops, printers, and projectors in Maban and Jamjang camps. Partners promoted agricultural development by fostering diverse livelihoods through insect and poultry farming in Yei, Maban, and Jamjang, and promoted vegetable and crop farming in Yambio refugee camps, benefiting over 1,200 refugee households with infrastructure, tools, farm inputs, land tillage, poultry equipment and inputs, and livestock vaccination campaigns.

Of note, the profile of new arrivals from Sudan is characterized by high skills, particularly in areas such as education and health, as well as engineering and technical sciences. Planning was underway to profile the skills of new arrivals and link them with potential jobs, thus building their resilience from the onset.



Logistics, Supply & Telecommunications

In the **Central African Republic**, over four tons of relief items and goods were delivered to Birao, including dignity kits, plastic sheeting, blankets, buckets, kitchen sets, sleeping mats, clothing, solar lamps, and other essential items. A 25,000-litre tank was installed to alleviate fuel shortages during the rainy season and a 1,200-litre mobile station was used for fuel supply in Birao. Vehicle and generator maintenance and repair services were provided by the logistics partner.

In Eastern **Chad**, 5,105 refugees were relocated from the border area of Andre to the Farchana refugee site extension; 223 cargo trucks were hired to transport refugees, their luggage and animals in five convoys. In Wadi-Fira province, four UNHCR trucks were used to relocate 700 refugees from the Tine spontaneous site to the Touloum refugee site and 135 refugees from the Grena border entry point to the Mile refugee site. 18 containers of core relief items (CRIs) were imported for in-kind assistance to refugees.

In **Ethiopia**, UNHCR installed three satellite communication systems in Tsore (Benishangul-Gumuz region), Gondar, and Gendewuha (Amhara region) to enable the Refugee Emergency Telecommunications Sector (RETS) to provide internet connectivity services to the wider humanitarian community, facilitating coordinated and timely assistance and protection for those forced to flee. 1,623 devices from humanitarian partners were connected in April 2024.

In **South Sudan**, since the start of the year, 3,394 individuals from Renk were relocated to Bunj-Maban, and 1,698 individuals to Jamjang/Ajuong Thok. From the Abyei Transit Centre, 261 individuals were relocated to Wedwil Refugee Settlement. This marked the first relocation since late last year, which had been delayed due to security concerns.

Despite these successful relocations, impassable road infrastructure posed significant challenges during transport, with transporters often reluctant to commit sufficient assets. This reluctance led to longer relocation durations. Additionally, these logistical difficulties resulted in high costs, especially for flights, further exacerbated by the economic downturn in South Sudan.

Crucial internet connectivity and security communication services were provided to over 500 humanitarian workers and some refugees with connectivity established in the Renk transit centre, UNHCR Renk field unit, Wedwil refugee settlement, and Gorom refugee settlement.



Settlement & Shelter/Housing

In the **Central African Republic**, at the Korsi settlement partners rehabilitated six communal transit hangars and constructed 465 new emergency shelters to accommodate new arrivals. Additional emergency and semi-durable shelters for the most vulnerable are planned for the second trimester of the year.

RRP partners in **Chad** made significant efforts to meet the needs of Sudanese refugees in the new Alacha refugee site and in the five extensions of the old refugee sites (Farchana, Kerfi, Milé, Irdimi, and Touloum), located in the three provinces of Ouaddai, Wadi Fira, and Sila in Eastern Chad which hosts the new Sudanese caseload. In total, 8,765 emergency family shelters were provided through the shelter sector working group, which includes Croix Rouge du Tchad (CRT) Agence De Développement Économique Et Social (ADES), INTERSOS, and UNHCR. Approximately 35,060 refugees benefited from this vital assistance, providing protection and security in a context of displacement and vulnerability.

In **Ethiopia**, in Awlala and Kumer settlements (Amhara region) 560 emergency shelters (family tents) were installed for 2,770 refugees. Also, public facilities were constructed including two watch towers to enhance access and security in the settlements and three communal multipurpose spaces to be used as offices or community centres for example.

In Benishangul-Gumuz region, the Government of Ethiopia allocated 350 hectares of land to relocate refugees from the Kurmuk transit centre to Ura, a new settlement. RRP partners started 2.2km road earthworks from the tarmac road to the site location and 5.7km of internal roads within the settlement were being cleared to construct emergency shelters. The construction of 1,000 emergency shelters at the Ura settlement was in progress at different stages.

In **South Sudan**, RRP partners constructed and developed a new extension site at Renk, which opened in early January with a capacity of 2,200 individuals and currently accommodates 8,065 refugees and returnees. With the support of NRC, 200 streetlights were installed at the extension site of Renk Transit Centre. NRC and UNHCR solarized 49 communal shelters in Renk.

The Wedwil refugee settlement site plan was updated to include an extension of 32 hectares, increasing the capacity by 384 plots. Construction of eight emergency communal shelters at Gendrassa reception center (Bunj/Maban) was at 90 per cent completion. Additionally, 1,144 shelter plots were re-demarcated from January to April in Pamir and Ajuong Thok camps at Jamjang. In both Gendrassa and Doro reception centres in Maban, UNHCR completed electrification within the temporary and permanent structures.

27,185 individuals were provided with various shelter solutions, including emergency shelters, family tents, and shelter kits/tools at various locations (Renk, Bunj, and Jamjang). Additionally, 65 existing transitional shelters were assigned to refugees in Jamjang.



Sudanese refugee child Maha 10 looks through a curtain at her shelter in the Kurmuk transit centre in the Benishangul-Gumuz region of northwestern Ethiopia. Her mother, Hawa, 40, fled the violence in Sudan with her ten children and 80-year-old mother in June last year. © UNHCR/Tiksa Negeri

For flood and rainy season preparedness in Maban County, 1.6 kilometres of dikes were constructed along the seasonal river to mitigate the potential impact of floods and safeguard the surrounding community from water damage. Major road rehabilitation was undertaken, with 3.4 kilometres of major roads and 27 kilometres of minor roads rehabilitated. Similarly, RRP partners devised collaborative rain preparedness initiatives for Renk Transit Centre and the extension site, including the repair of existing emergency communal shelters, improving drainage systems in both transit centres, and raising the grounds between shelters to prevent waterlogging during heavy rains and ensure uninterrupted services. With limited resources available for non-food items 20,283 vulnerable individuals received NFIs in Renk, Jamjang, Maban, and Abyei.



Water, Sanitation & Hygiene (WASH)

In the **Central African Republic**, in Korsi partners reinforced the two existing boreholes in the settlement with an upgraded generator, solar panels, and additional bladders, which more than doubled the amount of water provided each day from just 60m³ provided per day in January to 130m³ of water pumped daily by the end of April. Partners also constructed additional fountains and an extension system to create a third water distribution point to decongest the existing locations. A new borehole equipped with a water tower was inaugurated at the end of April. However, as the population quadrupled, the ratio of water available remained below the minimum standards, improving from 10.8 litres per person per day in January to 17 litres per person per day at the end of April. Financial constraints limited partners to constructing 24 durable latrines, 30 emergency latrines, and 30 emergency showers in the year's first four months; the ratio was 77 people per latrine in the settlement by the end of April.

In **Chad**, safe drinking water was provided at the refugee spontaneous site of Adré, the five new refugee sites and the eight extensions of old refugee sites through emergency water systems (water trucking) and borehole construction, with efforts underway to consolidate water systems in the old refugee sites. An average of 11 litres of water person/day was distributed to refugees in the new refugee sites and extensions of old sites. The average indicates that much support is needed to meet the Sphere standards of 15 litres of water per person per day and the standard of 20 litres. Low per capita water consumption in Adré and Zabout, and high per capita water consumption was seen in the Metché site.

17 boreholes were constructed, and 14,369 linear meters were installed to reinforce the various water distribution networks and 37 water distribution points. Partners advocated for additional boreholes to support the growing refugee population in the refugee-hosting areas.

To ensure the supply of drinking water to the sites, fourteen bowers were contracted in Ouaddaï province. To guarantee the water pumping system in refugee sites, 460 KVA generators were used in two sites.

2,425 emergency latrines and showers were built, but challenges remain in meeting the minimum standards due to insufficient resources for WASH, non-food items (NFIs), and menstrual hygiene management kits. With significant gaps in WASH, the risk of waterborne disease outbreaks is high.

WASH sector partners in **Egypt** provided regular maintenance, cleaning services and waste management for the WASH facilities at both the Qustul and Arqeen land ports, and the Karkar bus stop by coordinating with border authorities and the Egyptian Red Crescent. Partners also provided students and teachers with hygiene supplies in refugee community schools, as well as family clubs and learning centres. Some 350,000 Sudanese individuals and affected host communities accessed clean water for drinking and domestic use, which helped maintained decent hygiene standards and prevent waterborne diseases. UNICEF and the Egyptian Red Crescent trained 50 community health workers for hygiene promotion activities and so far, they have reached 50,000 people with handwashing behaviour-change programs in areas with high population movement and displacement since the conflict began.

In **Ethiopia**, in transit centres and newly established settlements, 25,147 refugees received an average of 8.8 litres of water available per person per day well below the 15 litres per person recommended in emergency situations. Water was supplied through water trucking from Gendawuha and Kokit town over 35 km away and through a piped system; three water tanks/distribution points with 10,000 litres capacity in Awlala and two in Kumer have been installed.

In Kurmuk transit centre (Benishangul-Gumuz region) water was supplied through a permanent water supply system. In the Ura new settlement water system establishment is ongoing. In the Benishangul-Gumuz camps where the pre-existing Sudanese population is settled, the average litres per person per day of potable water collected at the household level for the 79,231 refugees was 16.67, slightly below the post-emergency standard of at least 20 litres. Overall, for the Sudan response, RRP partners were able to provide an average of 14.7 litres of potable water per person per day.

Regarding sanitation facilities, 22 blocks (116 seats) of semi-permanent latrines and 12 bathing shelters with 5 doors have been constructed and filled-up latrines were decommissioned in the transit centres and settlements. Access to communal latrines for newly arrived Sudanese is measured at 94 users per stance. For the Sudanese refugees in the Benishangul-Gumuz camps, household latrines have been built for 40 per cent of households.

In addition, during the reporting period, seven WASH committees were established and trained to support in the monitoring of infrastructures' maintenance and the use of water and to conduct awareness activities.

In **South Sudan**, safe drinking water was provided in all transit and reception sites through emergency water treatment systems, water trucking, and borehole rehabilitation, with efforts underway to repair water systems in Renk town. All new arrivals were provided clean water supply 19 litres per person per day, which is still in the emergency threshold and needs more resources to increase the water supply system and water treatment to ensure quality. Emergency sanitation facilities were installed, but there were still challenges in meeting minimum standards. The current latrine coverage stands at 24 per cent, with serious gaps in funding for construction, operations, maintenance, and desludging. RRP partners have successfully advocated for borehole drilling and solarization, reducing water trucking costs, but additional boreholes were needed to support the growing refugee population in the refugee-hosting areas. Insufficient resources for WASH, NFIs, and menstrual hygiene management kits in transit centres increase the risk of waterborne disease outbreaks.

Regional Cross-Cutting Response



Accountability to Affected People (AAP)

In the **Central African Republic**, partners managed an Information and Feedback Centre at the Korsi settlement. This multisectoral centre had bilingual community relays that answered questions and disseminated information about the services available on the site and the host community. Refugees received information on different activities and support and anonymously shared suggestions, feedback or complaints to any humanitarian actor intervening on the site or in the host community. 35 meetings and awareness-raising sessions were organized by protection partners to explain the functioning of the Information and Feedback Centre. Some 494 information requests, feedback, or complaints were collected at the Information and Feedback Centre and issues raised were resolved through information sharing, referrals, or partner-beneficiary meetings.

To support community engagement in all settlements in **Chad**, a booklet on terms of reference for community structures was finalized. The AAP sub-working group promoted the inter-organization mechanism (Information and Feedback Centre) in Eastern Chad. An AAP action plan and the SOPs for the Information and Feedback Centre were developed.

To build capacity, 86 RRP partners were trained on accountability, data collection, complaint processing tools, and feedback management. Complaint and feedback mechanisms were instituted and were operational in 18 refugee sites in eastern Chad. Three meetings were held with more than 10 stakeholders in Abeche.

In April, 1,164 complaints were received, including from 525 men, 569 women, 30 boys, and 40 girls. 942 were requests for assistance, 1,187 requests for information, and 41 minor dissatisfaction reports. Case management covered 90 complaints and was processed, 904 were pending, and 160 feedbacks were given to the beneficiaries; 1,040 people were made aware of the humanitarian services available and accountability with 305 men, 439 women, 86 boys, and 210 girls.

In **Egypt**, regular dialogues with communities were held through community meetings and targeted information sessions for new arrivals. Some 2,182 Sudanese individuals were briefed on available services. Also, social media platforms were utilised to facilitate two-way communication through trusted and preferred channels by the community. Moreover, feedback and response mechanisms were established ensuring access to diverse groups through multi-channels including the newly created 'Queries Desks' that provided in-person information on services and assistance across all multi-purpose community centres. About 675 feedbacks were received from Sudanese refugees.

In **Ethiopia**, UNHCR and WFP were collaborating on AAP to harmonize Feedback and Response Mechanism (FRM) tools and to ensure the interoperability of FRM's information. Various mechanisms were implemented to address the participation of refugees and asylum seekers, including community leadership structures in all refugee sites and for all sectors. A participatory assessment was carried out in February-March 2024, including in the Benishangul-Gumuz camps and partially in Metema transit centre.

In Kumer and Awlala settlements (Amhara region), RRP partners offered their office telephone lines to be used as hotlines to receive feedback and complaints. Additionally, regular meetings with Refugee Representatives Committees (RRCs) and the wider community were held and partners and outreach refugee volunteers were also engaged in the "communicating with communities" activities.

In Kurmuk transit centre (Benishangul-Gumuz), suggestion boxes, protection desks, and town halls meetings were utilized to receive and address complaints raised by refugees. RRP partners also operated hotlines for refugees to log their complaints. Additionally, a Kobo Community-Based Feedback Mechanism (CBFM) tool was introduced during food distribution to record any other complaints from the community.

In **South Sudan**, community engagement activities, including regular meetings and focus group discussions (FGDs), were conducted to foster dialogue and gather refugee feedback. Robust feedback mechanisms such as suggestion boxes and digital platforms were reinforced to facilitate the submission of complaints, suggestions, and inquiries. Information dissemination initiatives ensured that refugees, especially new arrivals, were well-informed about available services and entitlements.

RRP partners completed community consultations and Key Informant Interviews (KIIs) in Bunj-Maban, Jamjang, Yambio, and Juba refugee camps. Through these consultations, refugees provided feedback on the food targeting and prioritisation approach, which will help design eligibility criteria categories and identifying possible livelihood initiatives for scaling up.



Protection from Sexual Exploitation and Abuse (PSEA)

In the **Central African Republic**, all partners have identified PSEA focal points and different agencies organized PSEA training for humanitarian actors during the reporting period.

In Eastern **Chad**, Sexual Exploitation, Abuse, and Harassment (SEAH) risk mitigation was integrated in all coordination mechanisms and 148 individuals were trained on addressing.

PSEA SOPs and action plans were endorsed to strengthen accountability and safety frameworks, and its rollout was ongoing with a focus on risk mitigation and prevention, survivor-centred assistance, community engagement and coordination. PSEA complaint mechanisms were shared with communities and integrated in awareness-raising and community protection activities at the borders, sites, and host communities. A total of 347 informative posters were distributed.

In **Egypt**, the Sudan situation PSEA network, which comprises of UN agencies, NGOs, community-based organizations (CBOs) and community development associations (CDAs), met on a monthly basis. The network revisited the PSEA action plan in Cairo, Alexandria, and Aswan based on the results of the PSEA risk assessments that had been conducted.

In **Ethiopia**, PSEA activities were held, including awareness sessions and trainings. 19 women support groups in Metema and four partner staff in Kurmuk were trained while mass PSEA awareness sessions were conducted in all settlements and transit centres reaching 3,406 refugees. In Kurmuk transit centre, three hotlines were reactivated and access to a Kobo Community-Based Feedback Mechanism (CBFM) tool and a suggestion box were introduced during food distribution to ensure the accessibility of a safe complaint system. In Metema transit centre, PSEA discussions were initiated during the coordination meeting with 35 Refugee Central Committee members and block leaders, while in Kurmuk, Kumer & Awlala, 231 men were engaged in the PSEA awareness session under the Engaging Men and boys in Accountable Practices (EMAP)³ programs.

In addition, PSEA awareness sessions were conducted during general food distribution, dignity kits distribution and during International Women's Day celebration. PSEA informational and educational material were posted in visible areas encouraging refugees to report SEA.

Ethiopian refugee returnees from Sudan in Tigray region also benefited from PSEA awareness sessions. 2,200 individuals were reached through PSEA awareness sessions and 93 RRP partners staff were engaged in PSEA training.

In **South Sudan**, various community engagement initiatives were implemented, including regular awareness-raising campaigns that reached over 13,000 individuals. Key messages on GBV prevention, PSEA and response were disseminated through door-to-door visits and community sessions in transit centres. Capacity-building efforts were also a priority, with numerous training sessions conducted for partner staff. In total, 264 staff members participated in training sessions to enhance the capacity of partner staff and raise awareness about SEA reporting mechanisms and response strategies.

Safety audits were conducted to address the safety and security concerns of women and children in different sectors. These audits identified barriers to accessing services and informed programming on the risks faced by various groups in the transit centres.

³ <https://gbvresponders.org/prevention/emap/>



Cash-based interventions (CBI)

In the **Central African Republic**, in Korsi settlement, partners provided cash to 1,962 beneficiary households, including 1,534 refugee households and 428 host-community households. The cash assistance was part of a nutrition and food security assistance project to provide extra support to vulnerable households to purchase additional foodstuffs. RRP partners and the government organized cash distribution to benefit 249 newly arrived Central African returnees in Birao. In the spontaneous site in the Haut-Mbomou province, partners provided cash assistance to 258 refugee households, including 156 newly arrived Sudanese refugees, to support their self-empowerment.

In **Chad**, refugees receive cash from WFP to help them buy their own food. In April, 402, 326 individuals received this cash assistance. The cash distributions targeted mainly the Sudanese refugee old caseload. In addition, 86,647 unaccompanied and separate children received cash assistance in January. OXFAM introduced an approach where they gave XAF 75,000 (approximately 123 USD) to 40 GBV survivors.

In **Egypt**, UNHCR provided one-time Emergency Cash Assistance (ECA) to 1,288 individuals newly arrived Sudanese at the border in Aswan. UNHCR also provided Multi-Purpose Cash Assistance (MPCA) to 31,644 Sudanese. Save the Children provided cash for transportation to 124 individuals from Aswan to Cairo, and a three-month MPCA for settlement to 412 individuals in Cairo. Partners collaborated closely through the Cash Working Group, to avoid duplication of assistance.

In **Ethiopia**, multi-purpose cash was distributed to 3,007 individuals in Kumer settlement and Kurmuk transit centre, including refugees, returnees and members of the host community, following a nutrition and food security assessment. The MPCA supported persons with disability, unaccompanied and separated children, elders, GBV survivors, large families, families with malnourished children and pregnant women. Some challenges were faced in providing cash assistance, such as security concerns, cash shortages at financial service providers and lack of civil documentation for verification.

During the participatory assessment conducted in February-March 2024, across transit centres and settlements and camps in Ethiopia, refugees shared that they did not wish to receive assistance (food and NFIs) only in cash due to the high inflation rate in the country.

In **South Sudan**, the sub-national cash working group in Renk coordinated cash assistance for approximately 176,223 individuals. Partners supported the needs of displaced and stateless populations through various cash assistance programs. Cash for sanitary napkins was distributed to 5,921 females in the Maban camps, including 2,152 newly arrived refugees. Additionally, in Upper Nile State, 80 asylum seekers received multi-purpose cash assistance. Multi-purpose cash support was also provided to older women at risk and women with disabilities in Fashoda, Upper Nile. Technical support was extended to the national NGO SADOO, facilitating the delivery of cash assistance to 4,550 beneficiaries in the Wedwil Refugee Settlement.



Localization

Out of 82 partners in the RRP, one-third (27) were national organizations.

In the **Central African Republic**, national organizations were integral to the response, working with appealing partners to reinforce capacity and carry out joint evaluations and activities, particularly in protection, shelter, nutrition security, WASH, and education.

In **Chad**, a mapping of refugee-led associations was initiated to assess their capacities and areas of improvement so as to enhance localization.

In **Egypt**, RRP partners engaged with regional and local governments, through a whole-of society approach to include the refugee agenda in national systems. The Protection Sector Working Group (PSWG) updated its Terms of References (ToRs), to enhance the participation of local NGOs and refugees by setting up a reception and registration taskforce to improve joint coordinated efforts. RRP partners organized community activities to promote social cohesion and peaceful coexistence among refugees and host communities.

In **Ethiopia**, out of 25 partners in the RRP, four were national NGOs. Government agencies and local authorities are major partners contributing to service provision. Among the national partners, Action for Needy Ethiopia (ANE) assisted in the construction and maintenance of shelters and settlements, Rehabilitation and Development Organization (RaDO) provided protection services, the Ethiopian Orthodox Church Development and Inter-Church Aid Commission (EOC-DICAC) engaged on GBV prevention, mitigation and response activities, while the Association of Ethiopians Educated in Germany (AEEG) assisted in tertiary education. Refugees and host communities, including associations, refugee central committees, incentive workers and volunteers, were also instrumental in supporting the response.



Climate Action

In the **Central African Republic** Korsi settlement, solar installations were set up to power one of the two boreholes. Persons with specific needs including GBV survivors participated in the community garden, agricultural project and received education on climate change and environmental protection.

In **Chad**, the development of climate-resilient agricultural value chains in refugee-hosting areas will build a diversified agricultural production base and expand economic opportunities for young people and women in particular. Various agricultural livelihood projects will be implemented during the beginning of the rainy season, including reforestation, though on a limited scale due to funding shortfalls.

In **Ethiopia**, the pre-existing Sudanese refugees in the three Benishangul-Gumuz region camps are dependent on the natural forest for household energy and shelter construction, negatively affecting the environment via deforestation, soil degradation and loss of biodiversity. RRP partners in collaboration with the Regional Natural Resource Development and Environmental Protection Bureau (NRDEP), planted tree in and around the refugee camps and hosting community areas. Fast-growing tree seedlings including eucalyptus and bamboo tree species, were planted for shelter construction. In addition, 25,825kg of firewood was distributed to 633 families in the Bambasi and Sherkole refugee camps.

Sherkole camp was also connected with the national electricity grid and the three communal kitchens can provide clean cooking access for more than 400 refugee households. In addition, small-scale charcoaled briquette machines were installed in the refugee camps, creating access to alternative cooking fuels to vulnerable households. Installation of solar streetlights at protection-sensitive areas and provision of solar lamps for newly arrived Sudanese refugees was also part of the intervention for the Sudan response.

In **South Sudan**, RRP partners engaged refugee community groups in establishing tree nurseries in Maban, Jamjang, and Makpandu, with the capacity to produce over 100,000 seedlings. These efforts contributed to reforestation and biodiversity conservation in refugee-hosting areas. A mix of approaches was adopted, including agroforestry, woodlot plantations, and household and institutional tree planting, to promote the growth of both fruit and shade trees.

Six community disaster preparedness committees engaged community members in flood preparedness initiatives and early warning systems. RRP partners worked on rehabilitating flood protection infrastructure (dikes) and improving roads to enhance resilience against climate-induced disasters and protect lives and livelihoods.

In refugee-hosting areas, RRP partners advanced climate action by promoting sustainable and clean cooking solutions. This included the distribution of 50 ECOCA institutional solar electric cookers at four health facilities in Maban. The installation was underway, and commercial distribution campaigns were ongoing at the community level to market 50 subsidized solar e-cooking kits. These kits provide refugees with an eco-friendly alternative to traditional cooking methods, reducing deforestation and air pollution. Over 34 women, organized into two production groups, were supported to produce over 700 kg of carbonized briquettes for distribution to 600 households with heightened protection risks.

Partnership & Coordination

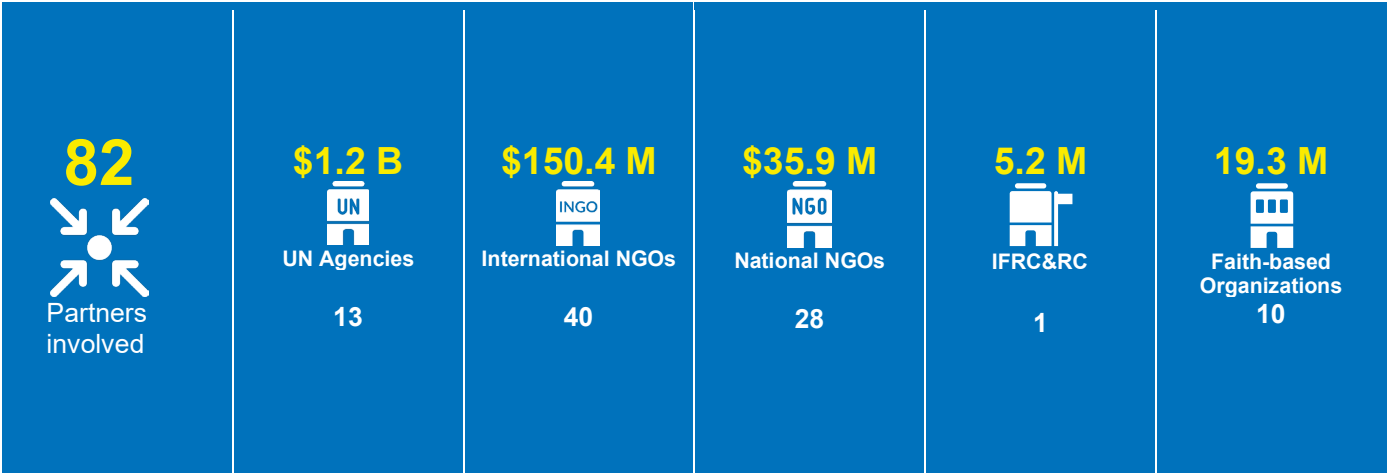
In line with the Global Compact on Refugees, the RRP supported host countries in the region to lead and coordinate the response to those fleeing the conflict in Sudan. Following the Refugee Coordination Model (RCM), coordination of the plan was developed and implemented in close collaboration with 82 inter-agency partners and other stakeholders, including UN agencies, national societies of the Red Cross and Red Crescent, national and international non-governmental organizations, faith-based organizations and other civil society actors.

As the UN agency mandated by the General Assembly to lead refugee responses, UNHCR was the reference point on refugee and refugee returnee data, facilitating and coordinating the provision of necessary data and information to support RRP partners’ response planning. Close collaboration was maintained with IOM who coordinate the response to the needs of migrant returnees and third country nationals.

As outlined in the RCM, for the response to the Sudan emergency, together with government counterparts, UNHCR leads or co-leads refugee coordination structures that include high-level refugee coordination fora and sectoral as well as cross-sectoral working groups at the country level in the Central African Republic, Chad, Egypt, Ethiopia and South Sudan on protection (with Sub-sectors for child protection and GBV), WASH, public health and nutrition, shelter, settlements and housing, food security, livelihoods and economic inclusion, humanitarian transportation, PSEA and others depending on the country context. Throughout the response, UNHCR ensured that joint assessments, monitoring and reporting on progress, communication and information-sharing tools were put in place in coordination with governments and RRP partners.

Harmonizing and coordinating different interventions by all stakeholders was essential to maximize benefits for the people assisted through this plan.

Humanitarian, development and peacebuilding actors worked together to strengthen to secure predictable, multi-year development financing in support of the regional Sudan crisis. For example, in Chad and South Sudan, the African Development Bank has activated its crisis financing windows to scale up engagement more rapidly. Also, in Chad, progress was made to engage the World Bank to support the government on its prevention and resilience agenda for the new crisis in Eastern Chad, in a number of strategic areas. EU-INTPA has also provided early development support to Chad, Ethiopia and South Sudan to support solutions from the onset of the emergency, with a focus on investing in integrated settlements, extending and expanding service delivery and creating economic opportunities in areas impacted by the crisis.








Notes: This list only includes appealing organizations under the RRP, many of which collaborate with implementing partners to carry out RRP activities.

Funding

The 2024 Sudan RRP was 7 per cent funded as of end April. Underfunding led to critical gaps in many operations and across several sectors, including in protection, food and shelter. In Egypt, the GBV sub working group held a roundtable for donors February to advocate the urgent need for GBV support.












Further information on funding levels of the response is available on the [Refugee Funding Tracker](#) which tracks interagency funding levels of the response.

	Country	Requirements	Funding	Gap	Targeted Population	# of partners	Funded	Gap
	South Sudan	\$372,952,554	\$42,494,298	\$330,458,256	537,000	42	11%	89%
	Chad	\$630,286,512	\$36,420,742	\$593,865,770	1,407,305	23	6%	94%
	Ethiopia	\$175,759,980	\$19,668,356	\$156,091,624	224,064	25	11%	89%
	Egypt	\$175,121,594	\$12,506,085	\$162,615,509	445,118	27	7%	93%
	Central African Republic	\$46,173,991	\$3,731,735	\$42,442,256	71,176	10	8%	92%

Please note: Data is as of 15 May 2024. Source: Refugee Funding Tracker




RRP partners gratefully acknowledge government donors, private donors, charities, and other organizations for their contributions to RRP 2024 and urge all partners to increase funding levels. RRP partners also acknowledge the generosity of the host countries to Sudanese refugees.

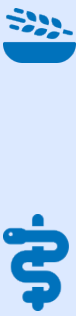
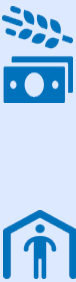


Funding Details by Sector

Sector	Icon	Requirements	Funding	Gap	Funded
Basic Needs		\$93,526,567	\$64,146	\$93,462,421	0%
Child Protection		\$35,779,066	\$3,848,660	\$31,930,406	11%
Education		\$102,548,178	\$14,291,173	\$88,257,005	14%
Food Security		\$371,104,058	\$10,532,709	\$360,571,349	3%
GBV		\$36,921,532	\$4,586,259	\$32,335,273	12%
Health & Nutrition		\$223,038,980	\$9,042,749	\$213,996,231	4%
Livelihoods, Resilience & Economic Inclusion		\$116,123,210	\$1,490,000	\$114,633,210	1%
Multi-Sectors			\$75,882,890	\$0	Funding for any sector
Operational Support & Logistics		\$49,282,332		\$49,282,332	0%
Protection		\$104,491,814	\$6,106,945	\$98,384,869	6%
Settlement, Shelter & Housing		\$158,841,989	\$7,866,020	\$150,975,969	5%
Wash		\$108,636,905	\$11,825,868	\$96,811,037	11%

Please note: Data is as of 15 May 2024. Source: Refugee Funding Tracker

2024 RRP Monitoring framework (JANUARY – APRIL RESPONSE)

	Sector	Indicator	Central African Republic	Chad	Egypt	Ethiopia	South Sudan	Total
	Protection	# of people registered on an individual basis	8,313	124,439	117,002	11,008	73,129	333,891
		# of people who received protection services	466	23,926	6,692	13,209	53,235	89,140
		# of people transported from border crossings to final destinations	NA	33,657	NA	1,550	36,108	71,315
		Proportion of people who have access to safe feedback and response mechanisms	NA	1%	NA	NA	NA	1%
	Sub-sector: Child Protection	# of children who received child protection services	14	22,245	12,932	3,171	7,444	45,806
		# of unaccompanied and separated children	50	3,518	2,483	513	3,187	9,467
	Sub-sector: GBV	# of identified GBV survivors and persons at risk assisted with appropriate support (including dignity kits, life-saving services, psychosocial support, case management, referral)	342	2,371	9,675	586	16,936	29,910
		# of people reached through GBV prevention activities	2,012	11,562	7,967	41,454	73,377	136,372
		# of people benefitting from the multipurpose cash assistance (CBI)	1,786		31,644	3,007	272	36,709
		# of people supported with emergency transportation cash allowance	NA	NA	124	NA	NA	124
	Education	Proportion of children enrolled in primary education	3.42%	77%	NA	68.4%	34%	45.7%%
		Proportion of children enrolled in secondary education		4%	NA	23%	9%	12%
		Proportion of children and youth engaged in formal and informal educational activities	3.42%	36%	10%	62%	40%	28.4%

	Food security	# of people receiving food assistance (in-kind/CBI/hybrid)	9,712	402,326	79,485	98,115	310,400	900,038
	Public Health & Nutrition	# of individuals received primary health care consultations	2,336	117,550	5,265	15,084	66,862	207,097
		# of births attended by skilled health workers	27	5,912	NA	762	1,130	7,831
		# of children below 5 years of age screened for malnutrition	197	61,529	2,505	16,470	71,557	153,414
	Livelihoods & Economic Inclusion	# of people who received livelihood support (productive assets, training and/or business support in cash or in kind)	NA	6,145	238	1,459	3,215	11,057
	Settlement & Shelter/Housing	# of emergency shelter provided/maintained	465	8,765	NA	560	13,492	23,282
		# of people who received non-food items	5,673	71,250	NA	1000	20,283	98,206
	WASH	# of people per communal toilet/latrine	77	38	NA	94	12	55
		Average # of litres of potable water available per person per day	17	11	NA	14.7	19	15
	Partnership	# of RRP partners able to deliver in the response	10	23	27	25	42	82*

NA denotes the indicator is not applicable to the response in that country.

* UN agencies and some international NGOs are operational in more than one country but are counted only once as a partner in the RRP although their interventions may vary by country.

2024 Regional RRP Donors⁴

Australia (Gov)	Ireland (Gov)	Switzerland (Gov)
African Development Fund	Japan (Gov)	The Global Fund (Gov)
CERF	Jersey	United Arab Emirates (Gov)
Country-based Pooled Funds	Philippines (Gov)	United Kingdom (Gov)
Denmark (Gov)	Private donors	United States of America (Gov)
European Union	Saudi Arabia (Gov)	Allocations from flexible funding
France (Gov)	Spain (Gov)	
Germany (Gov)	Sweden (Gov)	

Allocations from flexible funding*

Algeria	Japan for UNHCR	Peru
Angola	Joint United Nations Programme on HIV/ AIDS	Poland
Australia for UNHCR	Luxembourg	Private donors in the Republic of Korea
Belgium	Malta	Republic of Korea
Canada	Mexico	Russian Federation
China	Monaco	Saudi Arabia
Conflict-Related Sexual Violence MPTF	Montenegro	Serbia
Costa Rica	Netherlands	Singapore
España con ACNUR	New Zealand	Switzerland for UNHCR
Estonia	Northern Ireland (Great Britain)	Thailand
Finland	Norway	Türkiye
Italy	Private donors	UNO-Flüchtlingshilfe

**In addition, these donors also provide unearmarked or softly earmarked funds for the Sudan situation: Australia, Denmark, Sweden, France, Germany, Ireland, Japan, Philippines, Spain, Switzerland, United Kingdom and the United States of America.*

⁴ The list of donors is mostly drawn from the [Refugee Funding Tracker](#)

