



Home Office

Country Policy and Information Note

Sudan: Humanitarian situation

Version 3.0

September 2026

Executive summary

Since conflict broke out in April 2023 between the Sudanese Armed Forces (SAF) and Rapid Support Forces (RSF), Sudan has experienced a severe humanitarian crisis, marked by attacks on civilian infrastructure, restricted humanitarian access, and reduced availability of essential services.

The humanitarian situation varies from state to state. Conditions in areas directly affected by active hostilities, particularly the Darfur and Kordofan regions, and Blue Nile, are likely to be so severe that there are substantial grounds for believing that there is a general risk of serious harm under paragraphs 339C and 339CA(iii) of the Immigration Rules.

Conditions are generally less severe in some parts of Sudan, including Kassala, Red Sea, Northern, Gedaref, River Nile, White Nile and Sennar, where direct fighting has been lower and some services continue to operate. Al Jazirah, Sennar and Khartoum have seen a reduction in fighting since mid-2025, leading to high levels of return of internally displaced persons which placed pressure on services there. The situation remains volatile and localised conditions may, depending on individual circumstances, give rise to a real risk of serious harm. Each case must be considered on its individual facts, with the onus on the person to demonstrate that they face a real risk of serious harm.

The UN Sudan Humanitarian Needs and Response Plan 2026 (SHNRP) estimated that 33.7 million people (around 65% of the population) required humanitarian assistance, of whom 20.4 million were targeted for assistance and 14 million were identified as urgent priorities. As of June 2026, an estimated 10.6 million people had been reached, representing 51.9% of those targeted and 31.5% of those in need. The conflict further weakened already fragile economic conditions. The IMF estimated unemployment at 61.3% and inflation at 75% in 2026. By 2025, around 90% of the population were estimated to be living in poverty.

Access to services, particularly in conflict affected areas, is limited. UN estimates indicate 21 million (41% of the population) require healthcare assistance, 27.1 million (52% of the population) water, sanitation, and hygiene assistance and 28.9 million (56% of the population) food assistance. As of May 2026, 14 areas across North Darfur, South Darfur and South Kordofan were at risk of famine. As of June 2026, approximately 8.7 million people were displaced internally and a cumulative 4.6 million had been displaced externally since the war broke out.

Internal relocation may be possible to areas not directly affected by active hostilities, but the situation remains fluid. At the time of writing, fighting is concentrated in Darfur, Kordofan and Blue Nile. Relocation from or through conflict-affected areas is unlikely to be reasonable due to movement restrictions.

Where a claim is refused, it is unlikely to be certifiable as clearly unfounded under section 94 of the Nationality, Immigration and Asylum Act 2002.

All cases must be considered on their individual facts, with the onus on the person to demonstrate that they face a real risk of serious harm.

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Assessment

Section updated: 24 August 2026

About the assessment

This section considers relevant evidence – including [country information](#), refugee and human rights law and policy, and case law – to assess **whether, in general**:

- the humanitarian situation is so severe that there are substantial grounds for believing that there is a real risk of serious harm because conditions amount to inhuman or degrading treatment as within [paragraphs 339C and 339CA\(iii\) of the Immigration Rules](#)/Article 3 of the [European Convention on Human Rights \(ECHR\)](#).
- internal relocation is possible to avoid persecution/serious harm.
- if refused, a claim is likely or not to be certified as ‘clearly unfounded’ under [section 94 of the Nationality, Immigration and Asylum Act 2002](#).

Each case must be considered on its individual facts.

For details on how CPIT makes its assessments, and information on disclaimers (including the use of Artificial Intelligence (AI) in developing CPINs), see [About country policy and information notes](#).

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1. Material facts, credibility and other checks

1.1.1 Decision makers must:

- assess credibility, see the instruction on [Assessing Credibility and Refugee Status](#).
- check if there has been a previous application for a UK visa or another form of leave. Asylum applications matched to visas should be investigated prior to the asylum interview (see the Asylum Instruction on [Visa Matches, Asylum Claims from UK Visa Applicants](#)).
- consider making an international biometric data-sharing check, when one has not already been undertaken (see [Biometric data-sharing process \(Migration 5 biometric data-sharing process\)](#)).
- consider language analysis testing, where available, in cases where there are doubts surrounding a person’s claimed place of origin (see the Asylum Instruction on [Language Analysis](#)).

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2. Exclusion

- 2.1.1 The two main conflict parties, the Sudanese Armed Forces (SAF) and Rapid Support Forces (RSF), and their allies, have been responsible for serious human rights abuses (see [Country Policy and Information Note, Sudan: Security situation](#)).
- 2.1.2 Decision makers must consider whether there are serious reasons to apply one (or more) of the exclusion clauses. Each case must be considered on its individual facts.
- 2.1.3 If the person is excluded from the Refugee Convention, they will also be excluded from a grant of humanitarian protection, which has a wider range of exclusions than refugee status.
- 2.1.4 For guidance on exclusion and restricted leave, see the Asylum Instruction on [Exclusion under Articles 1F and 33\(2\) of the Refugee Convention](#), [Humanitarian Protection](#) and the instruction on [Restricted Leave](#).

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3. Convention reason(s)

- 3.1.1 A severe humanitarian situation does not of itself give rise to a well-founded fear of persecution for a Refugee Convention reason.
- 3.1.2 In the absence of a link to one of the 5 Refugee Convention grounds necessary to be recognised as a refugee, the question to address is whether the person will face a real risk of serious harm in order to qualify for Humanitarian Protection (HP).
- 3.1.3 However, before considering whether a person requires protection because of the general humanitarian situation, decision makers must consider if the person faces persecution for a Refugee Convention reason. Where the person qualifies for protection under the Refugee Convention, decision makers do not need to consider if there are substantial grounds for believing the person faces a real risk of serious harm meriting a grant of HP.
- 3.1.4 For further guidance on the 5 Refugee Convention grounds, see the Asylum Instruction, [Assessing Credibility and Refugee Status](#).

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4. Risk

- 4.1.1 The humanitarian situation in Sudan varies from state to state. Conditions in areas directly affected by active hostilities, particularly the Darfur and Kordofan regions, and Blue Nile, are likely to be so severe that there are substantial grounds for believing that there is a general risk of serious harm as set out in paragraphs 339C and 339CA(iii) of the Immigration Rules.

- 4.1.2 Conditions are generally less severe farther from areas of active hostilities. In general, conditions are unlikely to breach Article 3 in parts of eastern, northern and some riverine Sudan, including Kassala, Red Sea, Northern, Gedaref, River Nile, Sennar and White Nile, where levels of direct fighting have been lower and some services continue to operate. However, the situation remains volatile and areas experiencing large-scale returns are vulnerable. For example, Al Jazirah and Khartoum have seen reduced fighting since mid-2025, resulting in high levels of IDP returns, which increased humanitarian needs and additional pressure on already limited services. Localised conditions may therefore, depending on individual circumstances, give rise to a real risk of serious harm. Each case must be considered on its individual facts, with the onus on the person to demonstrate that they face a real risk of serious harm.
- 4.1.3 Insecurity remains a key driver of humanitarian need in Sudan. Fighting between the SAF, RSF and allied forces has damaged, destroyed, occupied or disrupted civilian infrastructure and essential services, including healthcare, water, electricity, education, markets, food supply chains and humanitarian facilities. The increasing use of drones has expanded the geographic reach of hostilities and disrupted infrastructure and service delivery beyond areas of active ground combat. Insecurity, checkpoints, road closures, attacks on aid workers and aid assets, and shifting front lines continue to restrict humanitarian access, particularly in Darfur, Kordofan and Blue Nile. The impact varies across the country, but where insecurity coincides with damaged infrastructure, limited services and restricted humanitarian access, humanitarian conditions may be sufficiently severe to create a real risk of serious harm, depending on the individual's circumstances. For more detail about the location of the conflict and an assessment of risk as a result of indiscriminate violence, see the [Country Policy and Information Note, Sudan: Security situation](#).
- 4.1.4 The conflict has further worsened Sudan's already fragile economic conditions, disrupting trade, agriculture and industry, and partially or completely destroying many economic institutions. International Monetary Fund data reported unemployment at 61.3%, inflation at 75.1% and real GDP growth at 0.7% in 2026. In addition, cash shortages have limited access to basic services and disrupted both commercial activities and humanitarian aid delivery. The World Bank estimated that approximately 71% of the population was living in extreme poverty in 2024, defined as surviving on less than US\$2.15 per day. BTI reported that by early 2025 about 90% of the population had fallen into poverty with extreme poverty expected to remain widespread due to the ongoing conflict, macroeconomic instability and uncertainty. These conditions, when combined with conflict, displacement and restricted access to essential services, are likely to increase vulnerability and reduce a person's ability to meet their basic needs (see [Economy](#), [Employment](#) and [Poverty](#)).
- 4.1.5 Access to welfare and social support in Sudan is extremely limited and, in many areas, effectively non-existent. Even before the conflict, social protection provision was minimal, with only 1% of households reported to have received social assistance. International organisations and non-governmental organisations (NGOs) were the primary providers of support, with programmes largely dependent on external funding. Following the

outbreak of conflict, many social protection programmes were suspended or discontinued, significantly reducing the availability of assistance. As a result, social support, which was already limited, has become even less accessible across much of the country. While some informal community-based support networks and humanitarian organisations continue to provide food and cash assistance to vulnerable and conflict-affected populations in certain areas, coverage remains limited relative to need. Since 2025, the World Bank-funded Sudan Emergency Crisis Response Safety Net Project, has provided emergency assistance to vulnerable and food-insecure populations in selected areas of Sudan. Despite the continuation of these humanitarian interventions, available assistance reaches only a proportion of those in need and does not amount to a comprehensive state welfare system (see [Welfare programmes and support](#)).

- 4.1.6 Sudan remains the world's largest displacement crisis, with conflict continuing to drive large-scale internal and cross-border population movements. According to the International Organisation for Migration's Displacement Tracking Matrix, approximately 8.7 million people were internally displaced as of June 2026, while a further 4.6 million people had crossed into neighbouring countries since the conflict began in April 2023. Displacement remains concentrated in Darfur, Khartoum and Kordofan, with many displaced people residing in urban areas, host communities, informal settlements and other temporary accommodation. At the same time, returns have increased in some areas, particularly Khartoum and Al Jazirah, with IOM recording approximately 4.6 million returnees by June 2026. Most returns were reportedly linked to improved security conditions. Returns should not be taken to indicate an absence of risk or a general improvement in humanitarian conditions. Many returnees face significant challenges, including lack of shelter, limited access to food and health care, and continued insecurity (see [Population displacement and returns](#)).
- 4.1.7 Food security in Sudan remains critically poor and is among the most severe humanitarian concerns arising from the conflict. Fighting has disrupted agricultural production, displaced farmers, damaged food supply systems and contributed to high food prices and shortages. According to the latest IPC analysis (May 2026), approximately 19.5 million people (41% of the population) were experiencing acute food insecurity at IPC Phase 3 (Crisis) or above, including over 5 million in IPC Phase 4 (Emergency) and 135,000 in IPC Phase 5 (Catastrophe). The risk of famine persists in 14 areas across North Darfur, South Darfur and South Kordofan. Food insecurity is widespread across the country, with all localities classified at Severity Level 3 or above and severe acute malnutrition affecting an increasing number of children. While humanitarian assistance is available in some areas, needs substantially exceed available support, leaving large numbers of people unable to reliably meet their basic food requirements (see [Food security](#)).
- 4.1.8 Healthcare provision in Sudan remains severely degraded because of the ongoing conflict. The health system has been significantly weakened by damage to infrastructure, shortages of medicines and healthcare personnel, insecurity and repeated attacks on healthcare facilities and workers. According to OCHA, an estimated 21 million people required health assistance in 2026, while access to essential healthcare remains limited, particularly in conflict-affected areas. WHO and HeRAMS data indicate that

although some health facilities continue to operate, a substantial proportion are non-functional, damaged or only partially operational, and more than 30% of households are unable to access needed medical care due to cost, lack of services or medicine shortages. The deterioration of healthcare services has contributed to recurrent disease outbreaks, including cholera, malaria, measles, dengue and hepatitis E, while millions remain at risk of preventable illness. Humanitarian organisations continue to provide healthcare assistance across Sudan, but funding shortfalls, insecurity, access constraints and the scale of need mean that available support is insufficient to meet demand. Consequently, access to adequate healthcare remains highly constrained for large sections of the population, particularly in conflict-affected and hard-to-reach areas (see [Health](#), [Disease outbreak](#), [People in Need \(PiN\)](#), [Humanitarian access](#)).

- 4.1.9 Educational opportunities remain available in some parts of Sudan, but access is highly uneven and significantly constrained by the ongoing conflict. According to OCHA, 10.5 million children required education support in 2026, while nearly 60% of school-aged children were not attending formal education. UNICEF reported 13,220 operational schools out of 19,390 schools nationwide (68%) whereas the Education Cluster dashboard reported 12,243 operational schools out of 19,883 schools (65%). The total number of schools differs by 493 schools, suggesting that each source may have used a different school registry, validation process, or reference period. However, access remains particularly limited in conflict-affected areas where schools have been damaged, destroyed, occupied by armed groups or used as shelters for internally displaced persons. Teacher shortages, unpaid salaries, insecurity, high education costs and a lack of learning materials continue to impede access to education. The impact is most severe in Darfur and Kordofan, where school closures remain widespread and many children have experienced prolonged disruptions to their education. Humanitarian organisations continue to support formal and alternative learning opportunities through school rehabilitation, safe learning spaces and the provision of educational materials. However, funding remains significantly below requirements, and assistance reaches only a small proportion of those in need. By June 2026, approximately 378,000 children, representing 17.2% of those targeted and 3.6% of those in need, had received educational assistance from 35 partner organisations (see [Education](#)).
- 4.1.10 Access to water, sanitation and hygiene (WASH) services in Sudan remains constrained and has deteriorated since the onset of the conflict. OCHA estimated that 27.1 million people, approximately 52% of the population, required WASH assistance. UNICEF reported in September 2025 that around one-third of the population lacked access to safe water. The collapse and destruction of water infrastructure have been most severe in conflict-affected areas, return areas and urban centres, while female-headed households are reported to face higher levels of water deprivation. In 2026, 16 million people were targeted for WASH assistance and, between January and June 2026, approximately 6.4 million people were reached, representing 40% of those targeted and 24% of those in need (see [WASH](#), [Disease outbreak](#), [People in Need \(PiN\)](#)).
- 4.1.11 Electricity supply has been significantly disrupted. Sources estimate that, prior to the conflict, around 56-70% of the population had access to

electricity. Conflict-related damage, sabotage, fuel shortages, and infrastructure degradation have resulted in the loss of around 40% of Sudan's generation capacity, and a 2024 survey estimated that 12% of urban households had lost access to electricity. While some areas, particularly parts of eastern and northern Sudan, retain partial electricity supply, services are unreliable and subject to frequent and prolonged interruption (see [Electricity](#)).

- 4.1.12 Access to adequate shelter remains severely constrained in Sudan. OCHA estimated that 15.4 million people required shelter and non-food item assistance in 2026. Many IDPs live in overcrowded, inadequate or unsafe accommodation, including informal settlements, gathering sites, schools and public buildings, with ongoing risks of eviction and secondary displacement. Conditions are particularly poor in parts of Darfur, where large numbers of displaced people remain in informal sites and open areas. Humanitarian organisations continue to provide shelter and non-food item assistance, but funding and coverage remain insufficient to meet needs. An estimated 1.8 million were targeted for assistance in 2026. As of June 2026, approximately 0.6 million people had received support, representing 31% of those targeted and 3.7% of those in need. Therefore, many displaced and conflict-affected households continue to face significant challenges in accessing safe and adequate shelter (see [Shelter and Non-Food Items \(Shelter & NFI\)](#)).
- 4.1.13 Humanitarian assistance remains available across much of Sudan, but the scale of need continues to exceed available resources. OCHA reported that humanitarian partners sought US\$2.87 billion (£2.2 billion) to assist 20.4 million people out of the estimated 33.7 million people in need of humanitarian assistance in 2026. As of June 2026, approximately US\$1.18 billion (£0.86 billion) had been received – 41.1% of the funding requirement. By June 2026, humanitarian partners had reached an estimated 11 million people, representing 51.9% of those targeted and 31.5% of those in need. However, only around 1.7 million people received multi-sector assistance, highlighting the scale of unmet needs. Funding shortfalls have led to the reduction or suspension of some programmes, limiting the ability of humanitarian actors to respond to growing needs (see [Number of people in need of humanitarian assistance and reached](#) and [Funding](#)).
- 4.1.14 The OCHA Sudan Humanitarian Operational Presence Dashboard indicated that, as of 30 June 2026, 182 organisations of which 50% were national non-governmental organisations (NGOs), 45% international NGOs, 3% United Nations (UN) agencies, 1% Red Cross and 1% other organisations operated across 12 clusters in 188 localities in 18 states (see [Humanitarian actors](#)).
- 4.1.15 Humanitarian access in Sudan remains severely constrained by insecurity, bureaucratic restrictions and logistical challenges. Ongoing conflict, attacks on aid workers and humanitarian assets, shifting front lines and restrictions imposed by conflict parties continue to impede the delivery of assistance, particularly in Darfur and Kordofan. Humanitarian organisations have also reported administrative obstacles, including permit requirements and coordination restrictions, which delay operations and limit access to affected populations. Seasonal factors, including flooding and poor road conditions, further restrict aid delivery in some areas. Although humanitarian actors have continued to reach previously inaccessible locations through periodic aid convoys, access remains inconsistent and many areas with acute

humanitarian needs remain difficult to reach (see [Humanitarian access](#)).

- 4.1.16 For further guidance on assessing risk, see the Asylum Instruction on [Assessing Credibility and Refugee Status](#).

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5. Protection

- 5.1.1 The state is not able to provide protection against a breach of Article 3 because of general humanitarian conditions if this occurs in individual cases.
- 5.1.2 For further guidance on assessing state protection, see the Asylum Instruction on [Assessing Credibility and Refugee Status](#).

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6. Internal relocation

- 6.1.1 Internal relocation may be possible to areas not directly affected by active hostilities, particularly parts of eastern, northern and riverine states such as Kassala, Red Sea, Northern, Gedaref, River Nile and White Nile. These areas have generally experienced lower levels of conflict and retain comparatively greater access to services and humanitarian assistance than areas directly affected by fighting. However, humanitarian conditions remain difficult across Sudan and can change rapidly. Even in areas where violence has reduced, large-scale population movements have placed additional pressure on infrastructure, basic services and humanitarian resources. For example, the reduction in hostilities in Al Jazirah, Khartoum and Sennar has contributed to significant return movements, increasing demand on already limited services. At the time of writing, active fighting remains concentrated in parts of Darfur, Kordofan and Blue Nile. Each case must be assessed on its individual facts and with reference to the most current country information.
- 6.1.2 A person would need to return to an area or city not affected by the conflict, such as Port Sudan, then, if not remaining in the city, relocate from there. Movement within Sudan has been significantly constrained since the outbreak of conflict due to insecurity along major transport routes, road closures, fuel shortages, banditry, criminality, and the presence of illegal checkpoints. The feasibility of travelling from conflict-affected areas to relatively less affected states may therefore be limited in practice, particularly for a person without resources or support networks (see [Security](#) and [Freedom of movement](#)).
- 6.1.3 For further guidance on internal relocation and factors to consider, see the Asylum Instruction on [Assessing Credibility and Refugee Status](#).

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7. Certification

- 7.1.1 Where a claim is refused, it is unlikely to be certifiable as 'clearly unfounded' under section 94 of the Nationality, Immigration and Asylum Act 2002.
- 7.1.2 For further guidance on certification, see [Certification of Protection and Human Rights claims under section 94 of the Nationality, Immigration and Asylum Act 2002 \(clearly unfounded claims\)](#).

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Country information

About the country information

The COI provides the basis for the assessment and the executive summary. Decision makers must use relevant COI as the evidential basis for decisions.

The cut-off date for COI included in this note is **24 August 2026**.

For details on how CPIT gathers and presents country information, its research methodology and disclaimers and explainers on coverage, source selection, maps, translations and the use of Artificial Intelligence (AI) in developing CPIT products, see [About country policy and information notes](#)

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8. Geography

8.1 Location and administrative divisions

8.1.1 For map of Sudan see [OCHA Sudan: Administrative map \(June 2021\)](#), 9 June 2021.

8.1.2 For further information on Sudan's location, size and administrative divisions, see the archived Country Policy and Information Note [Sudan: Security situation, January 2025](#).

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8.2 Population and demography

8.2.1 The below table, compiled by CPIT, provides information on the population and demography of Sudan:

Population size	51.7 million (2025 est) ¹
Population distribution	65% rural, 35% urban (2025 est) ²
Age structure	0-14 years (40.4%), 10 to 24 years (32%), 15 to 64 years (56.6%), 65+ years (3%) (2025 est) ³
Life expectancy at birth	64 years (male), 70 years (female) (2025 estimate) ⁴
Under 5 mortality rate (per 1,000 births)	61.6 (2024 est) ⁵
Mortality rate (per 1,000 adults)	Female 155 (2024 est), Male 244 ⁶

8.2.2 Regarding religion, Minority Rights Group, a 'human rights organization working with ethnic, religious and linguistic minorities, and indigenous peoples worldwide'⁷, stated in December 2025: 'Main religions: Predominantly Sunni Islam (including a number of orders, many of them

¹ UNPFA, [Sudan Population 2025](#), no date

² World Bank, [Sudan](#) (infrastructure), no date

³ UNPFA, [Sudan Population 2025](#), no date

⁴ UNPFA, [Sudan Population 2025](#), no date

⁵ World Bank, [Sudan](#) (mortality rate, under 5), no date

⁶ World Bank, [Sudan](#) (mortality rate) no date

⁷ Minority Rights Group, [About us](#), no date

Sufi), Christianity (mainly in Khartoum and South Kordofan and the Blue Nile states), animism.’⁸

8.2.3 Regarding ethnicity, the same source stated:

‘Approximately 70 per cent of Sudan’s people are characterized as Sudanese Arabs, with significant African minorities at 30 per cent, including Fur, Beja, Nuba, Zaghawas, Masalit and Fallata, amongst others. More than 500 ethnic groups speaking more than 400 languages live within the borders of Sudan. While intermarriage and the coexistence of Arab and African peoples in Sudan over centuries has blurred ethnic boundaries to the point where distinctions are often considered impossible, ethnic boundaries have reemerged in response to decades of conflict fuelled by political manipulation of identity and discrimination, mainly targeting minorities.’⁹

8.2.4 For information on the total population per state of Sudan, see [Country Policy and Information Note, Sudan: Security situation](#).

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9. Economic situation

9.1 Economic overview

9.1.1 The Fund for Peace (FFP), an independent non-governmental organisation (NGO) that conducts research on conflict, state fragility, and security issues, produces the Fragile States Index (FSI), an annual assessment that measures social, economic, political, and security pressures affecting countries worldwide using a range of qualitative and quantitative indicators¹⁰. Countries are scored on 12 indicators covering political, social, economic and security dimensions, each scored from 0 (least fragile) to 10 (most fragile). The aggregate score therefore ranges from 0 to 120, with higher scores indicating greater fragility and instability¹¹. The 2024 FSI (latest iteration available) scored Sudan 109.3 out of a possible 120 and ranked it 2nd of 179 countries, thus placing it among countries assessed as facing high levels of fragility¹². The FFP further scored Sudan 9.4 on economic decline and poverty, 8.8 on uneven economic development and 8 on human flight and brain drain¹³.

9.1.2 The Bertelsmann Stiftung Transformation Index (BTI) evaluates progress toward democracy and market economy, based on analysis by country experts¹⁴. Its 2026 iteration (BTI 2026), covering 1 February 2023 to 31 January 2025, noted regarding Sudan:

‘The war has paralyzed numerous economic sectors, including trade, agriculture and industry. Government revenues have fallen sharply, rendering it unable to pay salaries in many sectors, including for teachers and service-sector employees. Most economic institutions, including factories and markets, have been partially or completely destroyed.

‘The closures of Khartoum International Airport and various ports and border

⁸ Minority Rights Group, [Sudan](#), updated December 2025

⁹ Minority Rights Group, [Sudan](#), updated December 2025

¹⁰ FFP, [What we do](#), no date

¹¹ The Fund for Peace, [Fragile States Index](#) (Indicators), no date

¹² The Fund for Peace, [Fragile States Index](#) (Country Dashboard Sudan), 2024

¹³ The Fund for Peace, [Fragile States Index](#) (Country Dashboard Sudan), 2024

¹⁴ BTI, [Methodology](#), no date

trade points have led to a decline in exports ...¹⁵

- 9.1.3 In May 2025, the World Bank published a report which examined the economic and social consequences of the conflict (WB May 2025 report). The report observed:

‘The economy has plunged into a crisis due to the conflict. Economic activity contracted by an estimated 29.4 percent in 2023 and is estimated to have declined by another 13.5 percent in 2024, after an estimated 1 percent decline in 2022. Extensive damage to the services sector – including healthcare, education, telecommunications, and trade – caused a significant supply shock, since services activities are concentrated in Khartoum, the area most affected by conflict.

‘... Furthermore, a significant reduction in private and government consumption and investment due to the ongoing conflict has depressed economic activity.’¹⁶

- 9.1.4 In November 2025, The Citizen (Sudan), a local online news outlet¹⁷, reported:

‘According to Minister of Industry Mahasin Ali Yaqub, 1,877 factories were destroyed in Khartoum alone, including 553 that were completely destroyed and 1,267 partially damaged. This resulted in an almost total shutdown of industry in Khartoum, Gezira, and Sennar, forcing the country to import basic goods and increasing the financial burdens on the state. Despite this, the minister announced her ministry’s readiness to proceed with a comprehensive reconstruction plan, already beginning to operate several factories in safer states to produce essential goods tied to citizens’ daily needs.’¹⁸

- 9.1.5 Regarding exchange rates, the WB May 2025 report noted:

‘The exchange rate remained relatively stable until early 2023, supported by reforms that unified the official and parallel market rates. However, since the onset of the latest conflict, a gap between the official exchange rate and the parallel market rate has emerged. As of December 2024, the official exchange rate depreciated by 233 percent compared to April 2023, reaching SDG 1,994/USD while the parallel [black market] exchange rate depreciated by 355 percent over the same period, reaching SDG 2,550/USD. As of March 2025, the official exchange rate stabilized around SDG 2,019/USD, compared to a parallel market rate of around SDG 2,679/USD following the reopening of key trade routes, which facilitated the flow of goods and services to local markets.’¹⁹

- 9.1.6 According to IMF data, real GDP growth in Sudan decreased from 3.2% in 2025 to 0.7% in 2026, GDP per capita (current US\$) increased from US\$787.78 to US\$863.89, and GDP per capita based on purchasing power parity (international \$) increased from 2,430 to 2,450²⁰.

- 9.1.7 The World Bank defines Purchasing Power Parity (PPP) as a method of

¹⁵ BTI, [Sudan Country Report 2026](#) (Economic performance), 9 April 2026

¹⁶ WB, [Sudan Economic Update](#) (page 15, 16), May 2025

¹⁷ The Citizen, [Homepage](#), no date

¹⁸ The Citizen, [Face of Truth: Electricity and the Prospects of Returning to ...](#), 26 November 2025

¹⁹ WB, [Sudan Economic Update](#) (page 9), May 2025

²⁰ IMF, [Sudan Datasets](#), April 2026

adjusting for differences in price levels between economies to allow comparisons of purchasing power²¹. The same source noted that the International Dollar (Int\$), used in PPP calculations, is a hypothetical currency that has the same purchasing power in a given country as one US dollar has in the United States²².

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9.2 Inflation

- 9.2.1 The WB May 2025 report observed: 'Inflation soared to 170 percent (year-on-year) in 2024 from 66 percent in 2023, primarily driven by the rising costs of housing, transportation, and food and beverages according to the Central Bureau of Statistics ...'²³
- 9.2.2 The IMF reported that inflation rate (average consumer price) declined from 100.2% in 2025 to 75.1% in 2026²⁴.
- 9.2.3 In July 2026, The Sudan Tribune, a Paris-based online news portal that reports on Sudan and neighbouring countries²⁵, reported: 'Sudan's annual inflation rate rose to 51.28% in June 2026 from 44.50% in May, driven by surging consumer goods prices and the continued depreciation of the Sudanese pound against foreign currencies. Markets witnessed broad price increases last month as the U.S. dollar exchange rate on the parallel market neared 6,000 pounds, directly impacting the cost of living.'²⁶

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9.3 Banking

- 9.3.1 The BTI 2026 report noted:

'Sudan's banks have lost half their capital in the ongoing war that began in April 2023. Many have been looted and destroyed, and the Sudanese pound has lost value. Consequently, many banks have stopped operating, and up to 70% of branches have closed. Many have laid off staff, and the entire banking system is on the brink of collapse, as many cannot repay loans after losing their investments. In general, the banking system suffers from structural issues related to long-term policies, but the war has further worsened the situation.

'Even before the war, only 15% of Sudan's population had access to a bank account, and large parts of the country ... lacked any bank branches. In these areas, traditional Hawala networks [an informal money transfer system that allows people to send or receive money through a network of trusted brokers (hawaladars) without physically transferring funds through banks²⁷] have provided basic financial services and have continued to do so since 2023, according to a 2024 report by the World Bank-affiliated Consultative Group to Assist the Poorest (CGAP).'²⁸

²¹ WB, [A comparison of different sources of purchasing power parity \(PPPs\) ...](#), September 2023

²² World Bank, [What is an "International dollar"?](#), no date

²³ WB, [Sudan Economic Update](#) (page 23), May 2025

²⁴ IMF, [Sudan Datasets](#), April 2026

²⁵ Sudan Tribune, [About us](#), no date

²⁶ The Sudan Tribune, [Sudan inflation jumps to 51.28% in June as currency plunges](#), 19 July 2026

²⁷ ACAPS, [Sudan Implications of financial blockages in Sudan](#), 11 August 2023

²⁸ BTI, [Sudan Country Report 2026](#) (Market and competition, monetary and fiscal...), 9 April 2026

9.3.2 In February 2025, the UN Office for the Coordination of Humanitarian Affairs (OCHA) reported:

‘Sudan is experiencing limited cash availability after the Central Bank of Sudan introduced new banknotes in December 2024.

The move aimed at curbing the circulation of counterfeit and looted currency is disrupting humanitarian operations, especially cash and voucher-based activities (CVA).

‘The World Food Programme (WFP) reported on 30 January that widespread cash shortages had delayed its cash and in-kind food distributions for more than 4 million people for over one month due to a lack of sufficient banknotes to pay porters to load trucks.

‘In addition, other aid agencies providing cash and voucher assistance across Sudan estimated that the implementation of \$11.5 million worth of assistance for about 500,000 people in government-controlled areas had been delayed by the liquidity crisis, according to the Cash Working Group.

‘The distribution of physical cash for humanitarian purposes is constrained as the supply of new banknotes is strictly limited. Authorized banks can distribute up to 200,000 Sudanese pounds (about \$80) per customer, subject to availability, WFP said in a December 2024 report.

‘Meanwhile, many vulnerable people who need assistance don’t have bank accounts and hence have no access to digital transfer or payment tools, making it difficult to implement CVA through formal banking channels.

‘Dual pricing, with higher prices for goods and services paid for electronically and lower for cash payments, is also affecting people who rely on CVA, as the value of assistance varies depending on the payment method. Exorbitant fees by some financial service providers have further reduced the amounts beneficiaries received.’²⁹

9.3.3 The WB May 2025 report noted:

‘... [T]he Central Bank ... capped daily cash withdrawals from commercial banks to SDG 3 million (SDG 3 million is equivalent to USD\$1,480 [£1,115³⁰], calculated using an exchange rate of 2027.57 SDG per USD as of March 2025³¹) while increasing daily transfer limits through mobile banking applications to SDG 15 million (SDG 15 million is equivalent to US\$7,398 [£5,573³²], calculated using an exchange rate of SDG 2027.57 per US\$ as per March 2025³³) after restoring electronic systems to alleviate pressure on cash transactions in May 2024 ...

‘In November 2024, the Central Bank announced a comprehensive banknote replacement initiative that involves introducing new 500 and 1,000 Sudanese pound denominations into circulation ... The governor of the Central Bank stated that this process aims to address the adverse impacts of theft and looting that have affected the banking sector since the onset of the conflict, which has led to the circulation of large amounts of counterfeit currency.

²⁹ OCHA, [Sudan Humanitarian Update \(1 - 31 January 2025\)](#) (page 1) 5 February 2025

³⁰ Xe, [Currency converter](#), 22 July 2026

³¹ WB, [Sudan economic update](#) (page 24 foot not 20), May 2025

³² Xe, [Currency converter](#), 22 July 2026

³³ WB, [Sudan economic update](#) page 24 footnote 21), May 2025

'The daily limits on cash withdrawals, imposed alongside the replacement operation, have restricted the amount of physical currency available to individuals and businesses ... As a result, these limits have caused cash shortages, affecting access to basic services, and forced some individuals and businesses to exchange money in bank accounts for cash at high commission rates. The cash shortage has also put pressure on households, businesses, and humanitarian agencies, disrupting daily operations and aid delivery ...'³⁴

9.3.4 On 3 June 2026, Sudan Tribune reported:

'The RSF-controlled "Tasis" government has appointed former Sudan Central Bank governor Hussein Yahya Jangoul as governor of its parallel central bank in Nyala

'Tasis Prime Minister Mohamed Hassan al-Taayishi issued a decree on 11 May 2026 establishing a "Transitional Currency Council" tasked with monetary stabilisation and banking regulation, with Jangoul formally appointed on 21 May. The council is charged with overseeing currency circulation, implementing a currency exchange programme, and issuing banking licences in coordination with the central bank governor.

'Reports published on Tuesday said Jangoul used information from his previous tenure to print quantities of banknotes bearing his own signature — in the 500 and 1,000 pound denominations — backdated to May 2022, which have since been distributed in RSF-controlled areas across most of Darfur's five states and parts of Kordofan. Traders and residents in Nyala and other Darfur areas confirmed the appearance of a new cash injection bearing Jangoul's signature, reportedly channelled through a company called "Al-Mustaqbal" banking services. RSF members were said to have received their salaries in Sudanese pounds rather than dollars for the first time.

'However, banking analyst Walid Dalil told Sudan Tribune that the notes in circulation are not newly printed currency, but old banknotes bearing Jangoul's signature from his previous time in office — likely seized from central bank vaults or currency printing houses at the outbreak of the war. He said the developments have created a de facto monetary split between areas of control, with the injection of large quantities of cash without productive backing driving down purchasing power and pushing up inflation.'³⁵

9.3.5 Reuters reported on 25 June 2026 that newly issued Sudanese pound notes had begun circulating in areas controlled by the RSF, raising concerns about the source of the currency and the potential for further economic and political fragmentation. The report noted that the RSF had established a parallel administration in areas under its control and had progressively assumed governmental functions, including the payment of civil servant salaries. Reuters further reported that control of the currency had been disputed since 2024, when the army-led government invalidated old Sudanese pound notes and introduced new 500 and 1,000-pound denominations. According to Reuters, the RSF rejected the new currency, contributing to cash shortages in areas under its control. However, residents reported that the shortage appeared to ease from May 2026, when civil servants and RSF fighters

³⁴ WB, [Sudan economic update](#) (page 25), May 2025

³⁵ Sudan Tribune, [RSF appoints former Sudan central bank governor in Nyala ...](#), 3 June 2026

began receiving payments in newly issued Sudanese pounds dated May 2022³⁶.

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9.4 Employment

9.4.1 The BTI 2026 report noted that ‘The unemployment rate has skyrocketed from an estimated 11.4% before the war³⁷, but did not provide the current estimated unemployment rate.

9.4.2 The WB May 2025 report observed:

‘The conflict has profoundly impacted the labor market, further exacerbating the persistently high unemployment rate. The unemployment rate surged dramatically, rising from 32 percent in 2022 to 46 percent in 2023 and 47 percent in 2024. The most significant labor market shift has been the collapse of full-time wage employment, which has plummeted from 33 percent before the conflict to just 16 percent, reflecting widespread business closures, economic uncertainty, and a sharp decline in stable job opportunities. The destruction of infrastructure, supply chain disruptions, and capital flight have further constrained employment prospects, pushing many into informal or precarious work, deepening economic hardship for millions across the country.

‘Based on the Sudan Economic Sentiment Survey conducted in September 2024 across three northern and eastern states, employment conditions have deteriorated significantly since the onset of the conflict. Nearly 68 percent of the respondents reported worsening job conditions compared to the pre-war period ... Additionally, almost 80 percent of the respondents described the current economic situation as worse than before the war, citing rising prices and declining incomes.’³⁸ No further detail about the Sudan Economic Sentiment Survey, or the profile of respondents, was provided.

9.4.3 The same source further noted that ‘The conflict afflicted agriculture, the country’s key employer and engine of growth...’³⁹

9.4.4 According to the IMF as of 2026, the unemployment rate in Sudan slightly rose from 60.6% in 2025 to 61.3%⁴⁰.

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9.5 Poverty

9.5.1 The BTI 2026 report observed: ‘Most civilians have lost their sources of income, and up to 90% of the population has fallen into poverty.’⁴¹

9.5.2 The WB May 2025 report noted: ‘Extreme poverty – the share of the population living on less than US\$2.15 [£1.61⁴²] per day – is estimated to have nearly doubled from 33 percent in 2022 to 71 percent in 2024.’⁴³

9.5.3 The October 2025 World Bank Sudan poverty and equity brief (WB October

³⁶ Reuters, [New Sudanese notes circulate in RSF areas, deepening de facto split](#), 25 June 2026

³⁷ BTI, [Sudan Country Report 2026](#) (Economic performance), 9 April 2026

³⁸ WB, [Sudan Economic Update](#) (page 16), May 2025

³⁹ WB, [Sudan Economic Update](#) (page 16), May 2025

⁴⁰ IMF, [Sudan Datasets](#), April 2026

⁴¹ BTI, [Sudan Country Report 2026](#) (Economic performance), 9 April 2026

⁴² Xe, [Currency converter](#), 28 July 2026

⁴³ WB, [Sudan Economic Update](#) (page 28), May 2025

2025 brief) noted:

‘There is currently no recent and credible poverty estimate for Sudan. The most recent official poverty estimates are based on the 2014-15 National Household Budget and Poverty Survey. At the time, 61.1 percent of Sudan's population had per capita expenditure below the national poverty line. However, with projections based on GDP per capita growth, the percentage of the population living on less than USD\$3 [£2.25⁴⁴] per day (2021 PPP) is estimated to have more than doubled since the war started, rising from 23.3 percent in 2022 to 57.0 percent in 2025. Extreme poverty is expected to remain high amidst conflict, macroeconomic instability, and uncertainty.’⁴⁵

- 9.5.4 An April 2026 joint report by UNDP and the Institute for Security Studies, using the international extreme poverty line of US\$2.15 per day (2017 PPP), observed:

‘Like many low-income countries in Africa, poverty in Sudan is widespread. In 1990, 8.4 million Sudanese, representing 38.1% of the population, lived below the poverty line of US\$2.15 ... In the past two decades that followed, the country’s efforts at poverty eradication have yielded results, as the poverty rate declined to 15.6% in 2011, far below the average of 50% for low-income countries in Africa. However, since then, Sudan has backslidden with poverty levels rising substantially over the last decade to reach 45% of the population, which corresponds to 22.8 million Sudanese living below the poverty line of US\$2.15 in 2023. This takes the country back to extreme poverty levels higher than those it recorded in the 1980s.

‘To appreciate the full extent of poverty, one must look beyond monetary poverty, as it tells only part of the story. The Human Development Index (HDI), which measures the average achievement of countries in three main areas: health, knowledge and standard of living, is one such measure. Sudan’s HDI score of 0.511 in 2023 ranks 170 out of 193 countries globally. The Global Multidimensional Poverty Index (MPI) also measures acute multidimensional poverty by assessing each person’s overlapping deprivations across 10 indicators in three equally weighted dimensions: health, education and standard of living. The MPI complements the international US\$2.15-a-day poverty rate by identifying who is multidimensionally poor and by showing the composition of multidimensional poverty. The headcount or incidence of multidimensional poverty is often several percentage points higher than that of monetary poverty. This implies that individuals living above the monetary poverty line may still suffer deprivations in health, education and/or standard of living.

‘According to the 2023 UNDP Multidimensional Poverty Index, about 52.3% of Sudanese were considered multidimensionally poor with an intensity of deprivation estimated at 53.4%. An extra 17.7% of the population was considered vulnerable to multidimensional poverty.’⁴⁶

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9.6 Welfare programmes and support

- 9.6.1 According to a June 2025 conference paper by Lena Mahgoub, Omer Egemi

⁴⁴ Xe Currency converter 28 July 2026

⁴⁵ WB, [Poverty & Equity Brief, Sudan](#), October 2025

⁴⁶ UNDP/ISS, [Beyond the Conflict: Charting a Path to Sustainable...](#) (pages 24 to 25), 14 April 2026

and Calum McLean, published through the Social Protection Technical Assistance, Advice and Resources (STAAR) programme, an initiative funded by the UK Foreign, Commonwealth and Development Office (FCDO) that provides technical assistance and evidence on social protection in crisis settings⁴⁷ (Mahgoub et al 2025), the Ministry of Labour and Social Development (MoLSD), established under Prime Ministerial Decree No. 70 of 2019, was the principal government body responsible for social protection policy in Sudan. The MoLSD oversaw several social protection institutions, including the Commission for Social Safety and Poverty Reduction (CSSPR), the National Health Insurance Fund, the Zakat Fund, the National Pension and Social Insurance Fund (NPSIF), and the Humanitarian Aid Commission. The ministry also supervised policy implementation in associated financial and social welfare institutions⁴⁸.

9.6.2 The same source observed:

'The development of the first National Social Protection Strategy NSPS (2022–2023) marked a pivotal shift in social protection approach, moving from fragmented, needs-based assistance to a rights-based, universal framework ... However, the implementation of the strategy was halted by the governance vacuum since the military takeover in October 2021 and which led many donors to suspend support to the Government ... The eruption of the conflict has further led to the paralysis of state institutions with social protection mandate ... This is in addition to the huge social costs of the conflict and the resultant huge demands for social protection under conditions of intensified national economic crisis and institutional disruption.

'The conflict has led to the collapse or discontinuation of many humanitarian, development and social protection programs. These include the National Social Protection Strategy (NSPS), including the World Bank-funded Sudan Social Safety Net Project (SSNP) and Sudan Family Support Program (SFSP) that provided cash transfers to vulnerable families. With the economy in tatters and a loss of employment, many families have been dependent on cash transfers from abroad. However, as the majority of those who fled abroad have lost their assets, their ability to continue this form of support is diminishing ...'⁴⁹

9.6.3 A February 2024 working paper by Izzy Birch, Becky Carter and Hassan-Alattar Satti (Birch et al 2024) published by the Institute of Development Studies (IDS), a UK-based research institute specialising in international development⁵⁰, noted that conflict has significantly disrupted Sudan's formal social protection system. The paper reported that most relief assistance was being provided through community-based groups, supported by local fundraising efforts, the Sudanese diaspora, and, to a lesser extent, national and international humanitarian organisations. It noted that government-led social protection remained largely suspended, apart from limited support provided by the Zakat Chamber. Humanitarian assistance delivered through UN agencies and NGOs were identified as the main form of social assistance, while UNICEF's Mother and Child Cash Transfer Plus programme which was previously led by the government remained

⁴⁷ STAAR, [Who We Are](#), no date

⁴⁸ Mahgoub et al, [Charting a course for social protection in Sudan ...](#) (page 2), June 2025

⁴⁹ Mahgoub et al, [Charting a course for social protection in Sudan ...](#) (pages 2, 3), June 2025

⁵⁰ IDS, [About](#), no date

operational through the state primary healthcare structures in parts of Kassala and Red Sea states⁵¹.

- 9.6.4 A December 2024 article by Dr Ihsan Babaker of the University of Khartoum⁵², published by the Arab NGO Network for Development (ANND), an independent civil network that works to strengthen and empower civil society and promote democracy, human rights and sustainable development in Arab countries⁵³, stated that Sudan's social protection system faced longstanding challenges prior to the outbreak of conflict, including limited financial resources, weak infrastructure and dependence on external support. According to the source, the conflict further undermined the system through the disruption of state institutions responsible for social protection, widespread displacement, economic deterioration characterised by inflation and currency depreciation and reduced humanitarian access resulting from insecurity. As state capacity declined, humanitarian organisations and civil society groups increasingly provided assistance to affected populations, including cash transfers, food assistance and health services⁵⁴.
- 9.6.5 The WB May 2025 report noted that prior to the conflict: 'Only 1 percent of households reported receiving social assistance, with international organizations and Non-Governmental Organizations (NGOs) serving as the primary providers for support. These programs were largely funded by external resources, which were later suspended, significantly reducing their reach. As a result, social assistance – already limited before the conflict – has become even scarcer, if not non-existent, with major programs halted.'⁵⁵
- 9.6.6 The BTI 2026 report observed:
- 'As a result of the April 2023 war, many Sudanese citizens have come face-to-face with the absence of social safety nets in the country. When the war broke out, most people who thought they had stable jobs suddenly lost their livelihoods and income, and found themselves unemployed and facing poverty. Despite this desperate situation, neither the government nor the private sector has provided citizens with any form of compensation such as cash transfers, subsidies or food programs. The few state-funded welfare structures and social safety nets that operated before the war, such as the retirement fund and the Zakat Chamber, have stopped functioning since the war erupted. However, local grassroots self-help groups ... have stepped in to bridge this gap, providing support and shelter to people facing dire situations.'⁵⁶
- 9.6.7 In December 2024, the World Bank approved the Sudan Emergency Crisis Response Safety Net Project, commonly referred to as SANAD-MCCT⁵⁷. A March 2025 WFP report of the programme noted:
- 'The SANAD project aims to provide Emergency Safety Nets support to vulnerable and food insecure populations in selected areas of the Republic of Sudan. It has a total funding of US\$85m [about £63.6m⁵⁸], which will

⁵¹ Birch et al, IDS, [Effective social protection in conflict ...](#) (page 18), February 2024

⁵² ANND, [Authors](#), no date

⁵³ ANND, [About us](#), no date

⁵⁴ Babaker, I, [Social protection in the shadow of war in Sudan: Challenges and ...](#), 16 December 2024

⁵⁵ World Bank, [Sudan economic update](#) (page 28), May 2025

⁵⁶ BTI, [Sudan Country Report 2026](#) (Welfare regime), 9 April 2026

⁵⁷ WB, [Sudan - Sanad: Emergency Crisis Response Safety Net Project](#), 29 November 2024

⁵⁸ Xe, [Currency converter](#), 23 July 2026

provide unconditional cash support to 552,500 individuals for 12 months each. The project has a two-year lifecycle. The project has two components:

‘Component 1: Unconditional Cash Transfers (US\$66.3m) [about £49.6m⁵⁹] is implemented by WFP in areas classified as IPC4 and IPC3 to help cope with multiple shocks protecting human capital in the short term. It will be implemented in 16 food insecure localities across Blue Nile, Gedaref, Kassala, Northern, River Nile, White Nile, West Darfur, North Kordofan, Khartoum and Red Sea States. It will be targeted towards high-risk areas that are exposed to natural / climate disaster, and within areas that have a minimum level of accessibility to enable community-based targeting.

‘It will provide cash transfers of US\$10 [about £7.5⁶⁰] equivalent in SDG per beneficiary per month, for 12 months per person. There is no household size cap. The cash transfers will use a range of delivery mechanisms – direct cash (approx. 65%), e-vouchers (approx. 25%), and mobile money, bank account transfers (approx. 10%) ...

‘Community-based targeting will apply targeting criteria to support female / child headed households, households with children under 5, households with disabled person(s) ...

‘Component 2: Human capital sensitive cash transfers (US\$11.7m) [about £8.8m⁶¹] is implemented by UNICEF providing cash transfers to vulnerable and food insecure pregnant and lactating women (PLW) linked with health and nutrition services. It will provide cash transfers to pregnant and lactating women of \$30 [£22.4⁶²] per month for 1 year, in Red Sea, River Nile and Kassala States.’⁶³

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10. Security

- 10.1.1 A 3 February 2026 Al Jazeera investigative report stated that drones had become an increasingly significant feature of the conflict between the Sudanese Armed Forces (SAF) and the Rapid Support Forces (RSF) since the outbreak of war in April 2023. The report noted that both parties had used a range of unmanned aerial vehicles (UAVs), from short-range systems to long-range drones capable of striking targets across Sudan. According to Al Jazeera's analysis of data from the Armed Conflict Location and Event Data Project (ACLED), there had been at least 1,003 recorded drone strikes between 15 April 2023 and 23 January 2026. The highest number of strikes were recorded in Khartoum (440), North Kordofan (122), North Darfur (118), West Kordofan (90), South Kordofan (65) and South Darfur (52). The report further stated that drone attacks had caused significant civilian casualties and damage to infrastructure, with ACLED data indicating the highest numbers of drone-related fatalities in North Darfur (577), West Kordofan (567), North Kordofan (548), Khartoum (403) and South Kordofan (396) (Al Jazeera, 3 February 2026). The report stated that drone attacks had contributed to civilian casualties, damage to essential infrastructure and disruption to basic services across multiple parts of Sudan. According to the

⁵⁹ Xe, [Currency converter](#), 23 July 2026

⁶⁰ Xe, [Currency converter](#), 23 July 2026

⁶¹ Xe, [Currency converter](#), 23 July 2026

⁶² Xe, [Currency converter](#), 23 July 2026

⁶³ WFP, [Social assessment and social development plan](#) (pages 5, 6), March 2025

source, the geographical reach of long-range drones enabled both conflict parties to strike targets throughout the country, increasing the exposure of civilians to conflict-related harm⁶⁴.

- 10.1.2 In a 24 March 2026 press briefing, OHCHR reported a sharp increase in the use of drones to conduct airstrikes in Sudan. According to information received by OHCHR, more than 500 civilians were killed in drone strikes between 1 January and 15 March 2026, with most fatalities occurring in the Kordofan region. OHCHR noted that civilian casualties continued to be reported later in March, including an air and drone strike on El Daein Teaching Hospital in East Darfur on 20 March which reportedly killed at least 64 people, including women and children, injured at least 89 others, and rendered key hospital services inoperable. The briefing also referred to drone attacks on civilian infrastructure in Ad Dabbah, Northern State, which reportedly caused civilian deaths and widespread power outages. OHCHR stated that a further drone strike on a commercial transport convoy in El Daein on 21 March reportedly killed 23 people, including women and children⁶⁵.
- 10.1.3 According to an Associated Press report published on 15 June 2026, the use of drones by parties to the conflict continued to escalate, increasing the risks to civilians across Sudan. The report cited the UN High Commissioner for Human Rights, Volker Türk, who stated that OHCHR had documented more than 1,000 civilian deaths resulting from drone strikes between January and May 2026. The report further noted that drone warfare had become a significant feature of the conflict and referred to ACLED data showing that at least 2,670 people, including both civilians and combatants, were killed in drone-related incidents during 2025. According to the same data, drone-related deaths increased by 600% and drone attacks by 81% compared with 2024⁶⁶.
- 10.1.4 In a June 2026 analysis, the Armed Conflict Location and Event Data Project (ACLED) stated that Sudan's conflict had increasingly become characterised by the widespread use of drones by both the Sudanese Armed Forces (SAF) and the Rapid Support Forces (RSF). According to ACLED, both parties were adapting their tactics to expand the use of drone strikes across different areas of the country. The source noted that the SAF continued to conduct regular air and drone strikes against RSF positions and supply routes, while the RSF increasingly used drones to target military installations and economically significant infrastructure in areas under SAF control. ACLED described the conflict as continuing to evolve as both parties adjusted their methods of warfare, contributing to the further spread of insecurity and violence across Sudan⁶⁷.
- 10.1.5 The chart below, based on ACLED chart, shows air and drone strike events as percentage of all violence from April 2023 to May 2026⁶⁸:

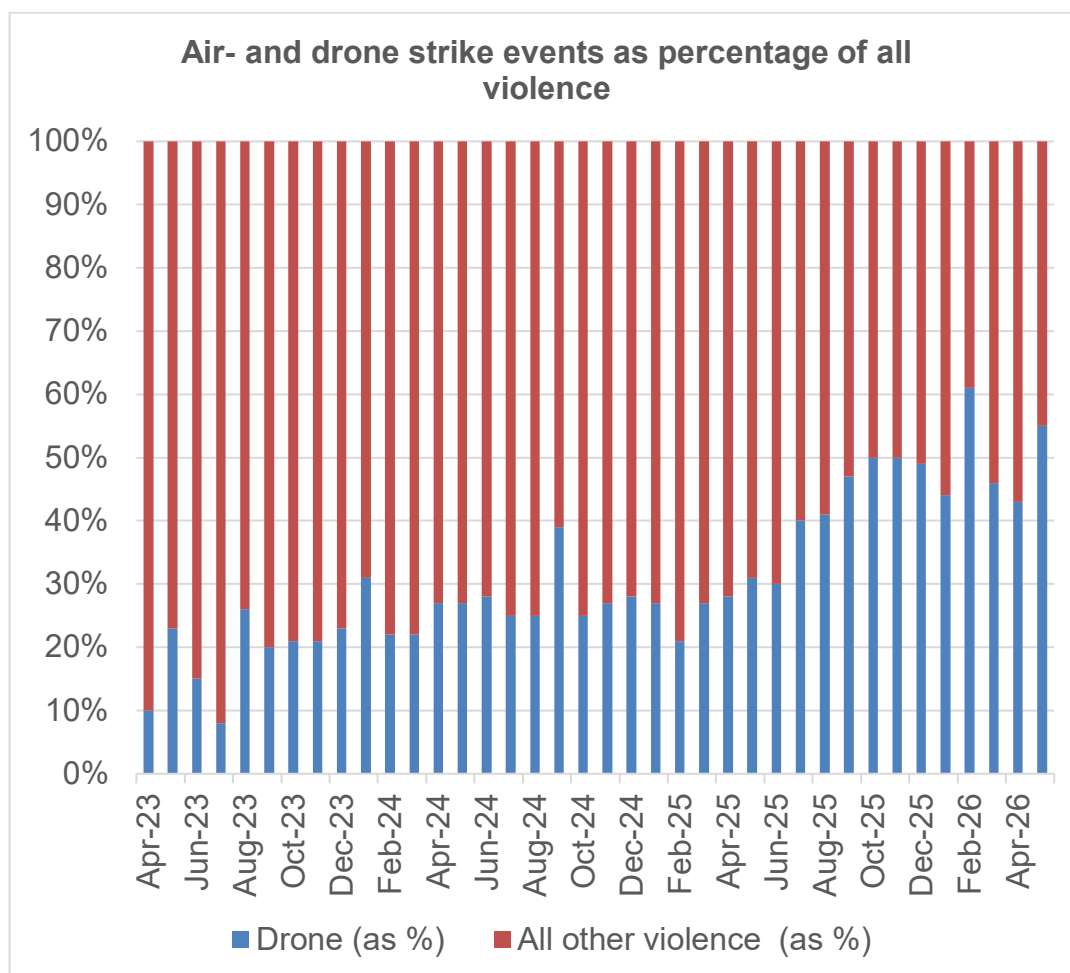
⁶⁴ Al Jazeera, [The drones being used in Sudan: 1,000 attacks since April 2023](#), 3 February 2026

⁶⁵ OHCHR, [Sudan: Sharp increase in civilian deaths as a result of growing drone...](#), 24 March 2026

⁶⁶ AP, [Drone strikes kill over 1,000 civilians in Sudan in the first 5 months of 2026...](#), 15 June 2026

⁶⁷ ACLED, [How has Sudan's drone war adapted to shifting supply lines?](#), 4 June 2026

⁶⁸ ACLED, [How has Sudan's drone war adapted to shifting supply lines?](#), 4 June 2026



10.1.6 For detailed information on the security situation in Sudan, including levels and geographic spread of violence and attacks on civilians and civilian infrastructure, see [Country Policy and Information Note, Sudan: security situation](#).

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11. Humanitarian situation overview

- 11.1.1 On 15 April 2025, The Guardian reported that non-governmental organisations (NGOs) and the United Nations (UN) had described Sudan as the world's largest humanitarian crisis. Oxfam referred to it as the largest humanitarian, displacement, and hunger crisis globally, while the International Committee of the Red Cross (ICRC) highlighted 'massive scale' violations of international humanitarian law and stated that civilians throughout Sudan were bearing the brunt of the conflict⁶⁹.
- 11.1.2 The International Rescue Committee (IRC) 2026 Emergency Watchlist report, published in December 2025, which assesses which twenty countries are most at risk of a humanitarian emergency, stated: 'Sudan tops the Emergency Watchlist for the third year in a row as its catastrophic civil war moves towards its fourth year.'⁷⁰

⁶⁹ Guardian (UK), [Sudan in 'world's largest humanitarian crisis' after two years of ...](#), 15 April 2025

⁷⁰ IRC, [2026 Emergency Watchlist](#) (page 36), 16 December 2025

- 11.1.3 A 9 January 2026 World Health Organisation (WHO) report stated: ‘Nearly three years of continuous violence, severe access constraints, and reduced funding have turned Sudan into the worst humanitarian crisis globally.’⁷¹
- 11.1.4 An April 2026 UNICEF report based on a reporting period of 1 to 28 February 2026 noted: ‘The humanitarian situation in Sudan remained highly complex, with escalating conflict in Kordofan, North Darfur, and Blue Nile states driving continued displacement, violence, and disruptions in access to essential services. These hotspots witnessed a rapid and further deterioration in conditions for already vulnerable populations.’⁷²
- 11.1.5 UNICEF reported in August 2026, based on a reporting period of 1 January to 30 June 2026:
- ‘As Sudan's conflict entered its fourth year, humanitarian needs remained immense, with 33.7 million people requiring assistance amid displacement, disease outbreaks, food insecurity and disrupted services... Despite some progress in the first half of the year, including reduced overall displacement and modest gains in food security indicators, Sudan's humanitarian situation remains extremely severe. Intensifying conflict, rising protection risks, weakened infrastructure, disease outbreaks, and disrupted essential services continue to endanger millions of children and families.’⁷³
- 11.1.6 The June 2026 National Health Cluster Bulletin noted: ‘Insecurity, active conflict, movement restrictions, and attacks affecting civilian infrastructure continued to impact humanitarian operations and health service delivery during June. These challenges disrupted humanitarian access, medical supply movements, referral pathways, supervision activities, and the continuity of essential health services in several areas.’⁷⁴

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12. People in Need (PiN)

12.1 Number of people in need of humanitarian assistance and reached

- 12.1.1 According to the United Nations Office for the Coordination of Humanitarian Affairs (UN OCHA) people in need include those whose physical security, rights, dignity, living conditions, or livelihoods are threatened or disrupted, and those whose access to basic services, goods, and social protection is insufficient to enable them to restore normal living conditions without additional assistance⁷⁵.
- 12.1.2 The OCHA Sudan Humanitarian Needs Response Plan 2025, issued in January 2025, stated that more than half of Sudan's population - approximately 30.4 million people - were requiring humanitarian assistance in 2025, including 16 million children.⁷⁶ The plan stated: ‘The 2025 Humanitarian Needs Response Plan aims to support nearly 20.9 million of the most vulnerable individuals’.⁷⁷ In January 2026, OCHA reported that, as of December 2025, an estimated 17.1 million (81.8% of those targeted)

⁷¹ WHO, [Sudan: 1000 days of war deepen the world's worst health and ...](#), 9 January 2026

⁷² UNICEF, [UNICEF Sudan Humanitarian Situation Report No. 40, 28 February 2026](#), 9 April 2026

⁷³ UNICEF, [UNICEF Sudan Humanitarian Situation Report No. 44](#) (pages 1 and 3), 7 August 2026

⁷⁴ Health Cluster Sudan, [National Health Cluster Bulletin](#) (page 1), 3 August 2026

⁷⁵ OCHA Knowledge base, [People in Need \(PIN\) Process](#), no date

⁷⁶ OCHA, [Sudan: Humanitarian Needs and Response Plan 2025 - Overview](#), 23 January 2025

⁷⁷ OCHA, [Sudan: Humanitarian Needs and Response Plan 2025 - Overview](#), 23 January 2025

received at least one form of humanitarian assistance and 5.5 million (32.2%) benefited from multiple types of aid⁷⁸. The number of people reached however equated to 56.25% of those in need.

- 12.1.3 The IRC reported in December 2025 that the 33.7 million people in need of humanitarian assistance included 15 million children⁷⁹.
- 12.1.4 The OCHA Sudan Humanitarian Needs Response Plan 2026 published in April 2026 (OCHA SHNRP 2026) noted: ‘In 2026, 33.7 million people—more than two-thirds of the country’s population and more than any other crisis in the world—need humanitarian assistance.’⁸⁰ The same source further noted that of the 33.7 million in need of humanitarian assistance 20.4 million were targeted and 14.0 million prioritised for assistance⁸¹.
- 12.1.5 The same source added:

‘This increase has been driven largely by the unabated continuation of violence and conflict, with needs rising in almost every state in the Darfur and Kordofan regions, as well as in Aj Jazirah and Khartoum due to large-scale returns. Meanwhile, other areas of the country—including River Nile, Red Sea, Northern and Gedaref states—saw decreases in the number of people in need as the situation improved and some internally displaced people returned to their areas of origin, although displacements from the Darfur and Kordofan regions continued to many of these areas in late 2025.’⁸²
- 12.1.6 Humanitarian Action (HA), an OCHA-managed digital platform that provides a comprehensive, authoritative overview of the global humanitarian landscape⁸³ noted that as of June 2026, an estimated 10.6 million (51.9%) out of 20.4 million targeted for assistance across all sectors had been reached⁸⁴. The proportion of those reached represents 31.5% of total people in need (33.7 million).

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12.2 People in need and reached by sector

- 12.2.1 The OCHA humanitarian response dashboard June 2026 noted: ‘... despite significant operational challenges – including restricted access, insecurity and severe funding shortfalls- humanitarian organisations reached 11 million people by June 2026. However, only 16 percent, or approximately 1.7 million people, received multi-cluster assistance, highlighting the scale of unmet needs.’⁸⁵
- 12.2.2 The table below, based on OCHA data⁸⁶ shows the number of people in need and reached against those targeted for assistance in selected sectors as of June 2026:

⁷⁸ OCHA, [Sudan key facts and figures as of 31 December 2025](#), 27 January 2026

⁷⁹ IRC, [2026 Emergency Watchlist](#) (page 36), 16 December 2025

⁸⁰ OCHA, [Sudan Humanitarian Needs and Response Plan 2026](#) (page 3), April 2026

⁸¹ OCHA, [Sudan Humanitarian Needs and Response Plan 2026](#) (page 3), April 2026

⁸² OCHA, [Sudan Humanitarian Needs and Response Plan 2026](#) (page 9), April 2026

⁸³ HA, [About Humanitarian Action](#), no date

⁸⁴ HA, [Sudan Plan Overview](#) July 2026

⁸⁵ OCHA, [Sudan Humanitarian Response Dashboard June 2026](#) (page 2), July 2026

⁸⁶ OCHA, [Sudan Humanitarian Response Dashboard June 2026](#) (page 5), July 2026

Cluster	People in Need	Targeted	Reached	Gap against target (%)
Education	10.5 million	2.2 million	0.4 million	83%
S&NFI	15.4 million	1.8 million	0.6 million	69%
FSL	28.9 million	11.4 million	11.7 million	Over by 2%
Health	21 million	6.6 million	2.3 million	65%
WASH	27.1 million	16.0 million	6.4 million	60%

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13. Population displacement and returns

13.1 Internal displacement

13.1.1 In July 2026, the International Organisation for Migration (IOM)'s Displacement Tracking Matrix (IOM DTM), which gathers data on displacement 'to inform humanitarian interventions'⁸⁷, published a snapshot on displacement and return in Sudan based on data collected between 2 June and 2 July 2026 (IOM July 2026 report)⁸⁸. It observed:

'By the end of June, DTM recorded an estimated 8,685,273 internally displaced persons (IDPs) ... IDPs were originally displaced from all 18 states in Sudan to locations in 185 localities, across 18 states. The total IDP population has decreased by 25 per cent compared to the highest population of 11,585,384 IDPs [recorded in January 2025]. Compared to the previous month, the number of IDPs decreased across 12 states and increased across the other six states.

'In particular, the number of IDPs in Khartoum increased by three per cent from 387,088 IDPs to 399,631 IDPs ... The number of IDPs also increased across Aj Jazirah (3% increase), South Darfur (<1% increase), Central Darfur (<1% increase), East Darfur (<1% increase) and West Darfur (<1% increase) during June 2026.

'By late June 2026, an estimated total of 219,319 individuals had been displaced from locations across the Kordofan region following the escalation in conflict that began on 25 October 2025. The number of individuals newly displaced from the Kordofan region increased by 65 per cent (86,626 IDPs) compared to early February 2026. However, during June 2026, overall displacement across the Kordofan region remained relatively consistent due to a combination of both displacement and return movements.'⁸⁹

13.1.2 The same source further observed that:

'In June 2026, the top states of origin among IDPs were: North Darfur (24%), South Darfur (23%), and Khartoum (20%) ... The majority of IDPs were hosted across the Darfur region, including South Darfur with 1,764,980 IDPs (20%), North Darfur with 1,684,727 IDPs (19%), and Central Darfur with 992,987 IDPs (11%) ... IDPs from Khartoum were recorded primarily in locations across East Darfur (20%), Northern (17%), River Nile (15%), Khartoum state itself (9%), White Nile (9%), as well as Gedaref (6%).

In contrast, IDPs displaced from locations across the Darfur region were primarily displaced to other locations within the same state or within the

⁸⁷ IOM, [About DTM](#), 31 January 2023

⁸⁸ IOM, [DTM Sudan Displacement and return snapshot 7](#) (page 2), 23 July 2026

⁸⁹ IOM, [DTM Sudan Displacement and return snapshot 7](#) (page 2), 23 July 2026

broader Darfur region.⁹⁰

- 13.1.3 The table below, based on IOM DTM data⁹¹, shows number of IDPs per state at the end of June 2026:

State	IDPs
Al Jazirah	44,790
Blue Nile	364,828
Central Darfur	992,987
East Darfur	810,109
Gedaref	169,109
Kassala	42,061
Khartoum	399,631
North Darfur	1,684,727
North Kordofan	226,443
Northern	396,438
Red Sea	91,492
River Nile	298,529
Sennar	25,578
South Darfur	1,764,980
South Kordofan	334,032
West Darfur	374,532
West Kordofan	421,828
White Nile	243,159
Total	8,685,273

- 13.1.4 The same source further observed:

‘Of the total 8,685,273 IDPs, approximately 59 per cent were recorded in urban areas across Sudan, while 41 per cent were reportedly in rural areas. The total proportion of IDPs in rural versus urban locations varied across each state.

‘In some states, the majority of IDPs were recorded in rural areas: for example, an estimated 74 per cent of IDPs in Northern and 73 per cent of IDPs in both West Kordofan and North Darfur were displaced to rural locations.

‘In contrast, IDPs in other states were primarily concentrated in urban locations, including in Red Sea (97%), Khartoum (94%), and East Darfur (89%). IDPs in other states were more evenly split across both rural and urban locations, including Aj Jazirah, with a more balanced split: 43 per cent of IDPs were in rural locations and 57 per cent were in urban locations.’⁹²

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13.2 External displacement

- 13.2.1 According to the International Organization for Migration (IOM), as of 12 April 2026, an estimated 4,564,640 individuals had crossed from Sudan into neighbouring countries since the outbreak of conflict on 15 April 2023. The

⁹⁰ IOM, [DTM Sudan Displacement and return snapshot 7](#) (page 5), 23 July 2026

⁹¹ IOM, [DTM Sudan Displacement and return snapshot 7](#) (page 2), 23 July 2026

⁹² IOM, [DTM Sudan Displacement and return snapshot 7](#) (page 7), 23 July 2026

majority were reported to have crossed into Egypt (33%), South Sudan (30%), and Chad (29%). The source stated that 69% were Sudanese nationals and 31% were non-Sudanese nationals. It further noted that 99% of those who crossed into Egypt were Sudanese nationals, compared with 32% of those who crossed into South Sudan⁹³.

- 13.2.2 By July 2026, the IOM reported that the number of individuals displaced abroad since 15 April 2023 had increased to 4,643,703 as of 30 June 2026. The IOM noted that these figures represent cumulative recorded movements from Sudan to selected neighbouring countries and do not account for return movements, meaning some individuals may subsequently have returned to Sudan or moved elsewhere⁹⁴.

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13.3 Returns

- 13.3.1 The IOM reported that, by the end of June 2026, an estimated 4.65 million returnees had been recorded across Sudan, in 76 localities across nine states. Most returnees (93%) returned to their habitual place of residence. The highest numbers were recorded in Khartoum (2.27 million) and Aj Jazirah (1.23 million). According to the IOM, 82% of returnees returned from internal displacement and 18% from abroad. The number of returns increased by 5% compared with the previous month⁹⁵. Of those returning from abroad, the largest proportion returned from Egypt (48%), followed by South Sudan (29%), Libya (11%) and Gulf countries (8%). Smaller proportions returned from Chad (2%), Uganda (1%) and other countries, including Ethiopia and the Central African Republic (1%)⁹⁶.
- 13.3.2 According to the same source: ‘Just over half of individuals who returned were recorded across urban locations (53%), while 47% were recorded in rural locations. The proportion of individuals who returned to rural versus urban locations varied by state. Nearly all households in River Nile (>99%), North Darfur (87%), and Aj Jazirah (86%) moved back to rural locations, compared to only eight per cent in South Darfur and 18 per cent in Khartoum.’⁹⁷
- 13.3.3 Regarding reasons for return the IOM July 2026 report stated:
- ‘The vast majority of households (87%) returned due to improved security at the return destination or place of origin. Others reportedly returned due to lack of resources in areas of displacement (7%), family reunification (4%), the availability of services in areas of origin (1%), the availability of humanitarian assistance (<1%), or other reasons (<1%).
- ‘The reason for return among households varied across each state: all recorded households in Aj Jazirah (100%), and the majority of households in Blue Nile (97%), White Nile (96%), River Nile (95%), Khartoum (89%), South Darfur (89%), and Sennar (89%) returned due to improved security conditions. However, all returnee households (100%) in North Darfur reportedly returned due to the depletion of resources in areas of

⁹³ IOM, [DTM Sudan Displacement and return snapshot 4](#) (page 2), 12 April 2026

⁹⁴ IOM, [DTM Sudan Displacement and return snapshot 7](#) (page 1), 23 July 2026

⁹⁵ IOM, [DTM Sudan Displacement and return snapshot 7](#) (page 2), 23 July 2026

⁹⁶ IOM, [DTM Sudan Displacement and return snapshot 7](#) (page 10), 23 July 2026

⁹⁷ IOM, [DTM Sudan Displacement and return snapshot 7](#) (page 11), 23 July 2026

displacement.⁹⁸

- 13.3.4 CPIT has produced the table below, based on DTM data⁹⁹, showing returnees by state at the end of June 2026:

Returns from internal displacement and abroad			
State	From IDPs	From abroad	Total
Al Jazirah	912,165 (74%)	319,045 (26%)	1,231,210
Blue Nile	55,278 (24%)	172,984 (76%)	228,262
Khartoum	2,023,891 (89%)	242,834 (11%)	2,266,725
North Darfur	266,771 (99%)	5 (<1%)	266,776
River Nile	45,573 (99%)	50 (<1%)	45,623
Sennar	257,181 (99%)	2,813 (1%)	259,994
South Darfur	102,693 (100%)	4	102,697
West Darfur	735 (4%)	18,160 (96%)	18,895
White Nile	163,316 (71%)	65,567 (29%)	228,883
Total	3,827,603 (82%)	821,462* (18%)	4,649,065

*The sum of all returns from abroad based on figures on page 10 does not add up to the cited 821,472 figure in paragraph 12.3.2. IOM does not explain the discrepancy.

- 13.3.5 UNICEF reported in August 2026, based on a reporting period of 1 January to 30 June 2026:

‘[O]ver 4.4 million people have returned, primarily to Khartoum and Aj Jazirah states, contributing to a 21 per cent reduction in overall displacement. March and May [2026] witnessed a significant increase in returnee arrivals compared to other months. However, returnees face significant barriers to sustainable reintegration, including limited access to health care, safe water, sanitation, education, and protection services. Areas experiencing large-scale returns remain highly vulnerable to disease outbreaks and lack the resources and infrastructure required to absorb returning populations.’¹⁰⁰

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14. Food security

14.1 Situation including people in need

14.1.1 The WB May 2025 report noted:

‘The conflict afflicted agriculture ... causing a sharp decline in production, soaring food prices, and deteriorating food security. As the conflict spreads, farmers were forced to abandon their lands, while widespread looting of food stocks and agricultural equipment in Al Jazirah and Kordofan has further crippled the sector. Although agriculture had shown greater resilience to the April 2023 conflict compared to other sectors, critical shortages of essential supplies like seeds, fertilizers, and fuel – coupled with disrupted trade routes – have made it increasingly difficult to produce and distribute food. Cereal production in 2023 is estimated to have been approximately 40 percent below the average of the previous five years, having declined by 46 percent compared to 2022.’¹⁰¹

⁹⁸ IOM, [DTM Sudan Displacement and return snapshot 7](#) (page 11), 23 July 2026

⁹⁹ IOM, [DTM Sudan Displacement and return snapshot 7](#) (pages 3,10), 23 July 2026

¹⁰⁰ UNICEF, [UNICEF Sudan Humanitarian Situation Report No. 44](#) (page 2), 7 August 2026

¹⁰¹ WB, [Sudan economic update](#) (page 16), May 2025

- 14.1.2 In April 2026, the Food and Agriculture Organization of the United Nations (FAO), reported: ‘a sharp decline in cereal production due to the ongoing conflict, rising agricultural input costs, and disruptions to livelihoods and markets... [The FAO] estimates Sudan’s 2025 cereal production at approximately 5.2 million tonnes, representing a 22 percent decline compared to last year and 19 percent below the five-year average.’¹⁰²
- 14.1.3 According to the OCHA SHNRP 2026, an estimated 28.9 million needed food assistance in 2026 of which 11.4 million were targeted¹⁰³.
- 14.1.4 The Sudan Food Security and Livelihoods Cluster (FSLC) based on figures updated for January to March 2026, reported that 61.7% of Sudan's population, equivalent to approximately 28.9 million people, were acutely food insecure and in need of urgent food and/or livelihood assistance. Of these, around 10.2 million people (21.8% of the population) faced severe or extreme food insecurity (Severity Levels 4 and 5), including approximately 817,000 people (1.7%) experiencing extreme food insecurity (Severity Level 5). The FSLC further noted that all localities in Sudan were classified as Severity Level 3 or above. The highest severity levels were concentrated in Darfur and South Kordofan, where 14 localities were classified as Severity Level 4 and 7 localities as the catastrophic Severity Level 5¹⁰⁴.
- 14.1.5 The Integrated Food Security Phase Classification (IPC) is a globally recognised analytical framework used to assess and classify levels of food insecurity and malnutrition. It provides evidence-based analysis to support humanitarian decision-making and response planning¹⁰⁵. The IPC Acute Food Insecurity (AFI) scale classifies food insecurity into five phases: Phase 1 (Minimal), where households can meet essential food and non-food needs; Phase 2 (Stressed), where households have minimally adequate food consumption but struggle to meet some essential non-food needs; Phase 3 (Crisis), where households face food consumption gaps or must use crisis coping strategies to meet food needs; Phase 4 (Emergency), where there are large food consumption gaps, very high acute malnutrition or excess mortality, or households can only meet food needs through emergency coping strategies; and Phase 5 (Catastrophe/Famine), where households experience an extreme lack of food and other basic needs, resulting in starvation, destitution and potentially death¹⁰⁶.
- 14.1.6 The May 2026 IPC analysis of the food insecurity situation in Sudan covering February to May 2026 (post-harvest season) noted:
- ‘Nearly 19.5 million people —approximately 41 percent of the country’s population—continue to face high levels of acute food insecurity (IPC Phase 3 or above) between February and May 2026. This includes nearly 135,000 people in IPC Phase 5 (Catastrophe), more than 5 million people in IPC Phase 4 (Emergency), and a further 14 million people in IPC Phase 3 (Crisis). Conditions are expected to deteriorate further in the upcoming June–September lean season.
- ‘A risk of Famine has been identified in 14 areas across North Darfur, South

¹⁰² FAO, [Sudan: New FAO assessment warns of escalating food and livelihood crisis](#), 26 April 2026

¹⁰³ OCHA, [Sudan Humanitarian Needs and Response Plan 2026](#) (page 29, April 2026)

¹⁰⁴ FSC, [Sudan Dashboard](#), March 2026

¹⁰⁵ IPC, [About IPC](#), no date

¹⁰⁶ IPC, [Understanding the IPC scales](#), (page 4), no date

Darfur, and South Kordofan under a reasonable worst-case scenario, characterised by intensified conflict and further restrictions on humanitarian access and the movement of goods and people.

‘Severe acute malnutrition (SAM) remains widespread in Sudan. An estimated 825,000 children under the age of five are expected to suffer from SAM in 2026—up 7 percent compared to 2025, and 25 percent above pre-conflict levels (2021-2023).’¹⁰⁷

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14.2 Food and livelihood assistance

- 14.2.1 The Sudan Food Security Cluster noted on its webpage that out of the 11.4 million people targeted for food assistance, an estimated 7.5 million (65.8%) had been reached between January and March 2026 by 70 implementing partners. The number of people reached, however, represents 26% of the 28.9 million people in need of food assistance. The source noted that 5.7 million received food assistance cash, 1.8 million food assistance in-kind assistance and 3.4 million each seed distribution and veterinary services¹⁰⁸. The OCHA humanitarian response dashboard indicated that an estimated 11.7 million had been reached with food and livelihood assistance as of June 2026¹⁰⁹.
- 14.2.2 Humanitarian Action reported that US\$644.9 million [£485.6 million] was requested to support food security and livelihoods in 2026 in Sudan, of which US\$262 million [£197.3 million], representing 40.6% of the requirements had been received as of April 2026¹¹⁰.
- 14.2.3 In January 2026, WFP reported that it had reached more than 10 million vulnerable people in Sudan with emergency food, cash and nutrition assistance since the resumption of conflict in April 2023 and continued to deliver life-saving food aid to an average of around four million people per month, including in previously hard-to-reach areas of Darfur and the Kordofan regions, as well as Khartoum and Al Jazira states. However, WFP warned that these gains were at risk due to severe funding constraints, having been forced to reduce rations to minimum survival levels, with food stocks projected to be depleted by the end of March 2026¹¹¹.
- 14.2.4 In April 2026, the Food and Agriculture Organization (FAO) reported that it had launched an Emergency and Resilience Plan for 2026 to 2028 aimed at meeting immediate humanitarian needs while supporting longer-term recovery and resilience. The plan sought US\$99 million (£74.5 million) in 2026 to assist 1.5 million households with livelihood support, including seeds, tools and fertilisers. FAO noted that, as of April 2026, Italy had contributed US\$5 million (£3.8 million), and no other funding had been received¹¹².
- 14.2.5 UNICEF reported in January 2026 that, together with its implementing partners, it supported the provision of integrated nutrition services through

¹⁰⁷ IPC, [Sudan: Acute Food Insecurity Situation for February–May 2026 and ...](#), 14 May 2026

¹⁰⁸ FSC, [Sudan Dashboard](#), 2026

¹⁰⁹ OCHA, [Sudan Humanitarian Response Dashboard June 2026](#) (page 5), July 2026

¹¹⁰ HA, [Sudan 2026](#) (financial), no date

¹¹¹ WFP, [Families in Sudan pushed to the brink amidst brutal conflict and famine ...](#), 15 January 2026

¹¹² FAO, [Five things you should know about Sudan's food crisis](#), 15 April 2026

more than 2,640 health facilities and 182 mobile teams. In 2025, it reached over 617,000 children with Severe Acute Malnutrition (SAM), which met its annual target, and it aimed to reach 85% of the estimated national SAM caseload (approximately 633,000 children) in 2026¹¹³.

- 14.2.6 In August 2026, UNICEF reported that: ‘Throughout the first half of the year... a total of 5.3 million children were screened for acute malnutrition (95 per cent of the annual target). UNICEF and partners admitted 174,737 children with severe acute malnutrition (SAM) for treatment (28 per cent of the annual target). Reported admissions declined compared to the same period in 2025, this is largely attributed to access constraints, reporting limitations, and service disruptions in conflict-affected areas, particularly in Darfur and South Kordofan.’¹¹⁴
- 14.2.7 The Sudan Food Security Cluster reported that, as of June 2026, 63 implementing partners were operating across Sudan. The Cluster indicated that assistance reached millions of people through various interventions in 2026, including 5.1 million people who received cash-based food assistance, 1.6 million who received in-kind food assistance, 2.1 million who received in-kind seed distributions, and 3.2 million who received veterinary services¹¹⁵.

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15. Healthcare

15.1 People in need of healthcare

- 15.1.1 According to the OCHA SHNRP 2026, an estimated 21 million people required health assistance of which 6.6 million were targeted for assistance¹¹⁶.

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15.2 Healthcare facilities

- 15.2.1 In September 2024 the World Health Organization (WHO) reported: ‘Prior to the current crisis, Sudan had an estimated 6,500 primary healthcare facilities and 300 public hospitals across the country. WHO estimates that 70 – 80% of health facilities in areas worst affected by conflict, such as Al Jazirah, Kordofan, Darfur and Khartoum, and about 45% in other parts of the country, are now barely operational or closed.’¹¹⁷
- 15.2.2 The Health Resources and Services Availability Monitoring System (HeRAMS), is a WHO initiative that collects, analyses and disseminates information on the availability of health facilities, services, infrastructure, equipment and health workforce¹¹⁸. HeRAMS has been deployed in Sudan since 2023¹¹⁹. A 2026 HeRAMS report that assessed health services across Sudan (HeRAMS June 2026), noted: ‘Rather than health facility, HeRAMS uses the term health service delivery unit (HSDU) to include any modality through which healthcare services may be provided such as health centres, clinics, hospitals, mobile clinics, temporary or emergency structures, and in

¹¹³ UNICEF, [Sudan Humanitarian Situation Report No. 39](#) (page 3 to 4), 31 January 2026

¹¹⁴ UNICEF, [UNICEF Sudan Humanitarian Situation Report No. 44](#) (page 4), 7 August 2026

¹¹⁵ FSC, [Sudan](#), up to June 2026

¹¹⁶ OCHA, [Sudan Humanitarian Needs and Response Plan 2026](#) (page 30), April 2026

¹¹⁷ WHO, [Sudan surpasses 100 attacks on healthcare since 2023 armed ...](#), 24 September 2024

¹¹⁸ WHO, [Health Resources and Services Availability Monitoring System](#) (HeRAMS), no date

¹¹⁹ WHO, [HeRAMS Baseline report 2025](#) (page 7), October 2025

some cases individual providers such as community health workers.¹²⁰

- 15.2.3 In October 2025, HeRAMS Sudan published a baseline report that assessed health service delivery units in Sudan (WHO October 2025 report). The report noted that 6,674 HSDUs were registered as of 1 July 2025¹²¹. However, the HeRAMS January 2026 report noted that HeRAMS maintained a master list of 6,089 health service delivery units (HSDUs) across Sudan¹²².

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15.3 Access to healthcare

- 15.3.1 The WB October 2025 brief stated that ‘access to medication and health services is highly constrained and unaffordable for those most in need. The conflict has deteriorated the mental health of the population, with widespread signs of depression and anxiety.’¹²³
- 15.3.2 According to a December 2025 UNICEF report: ‘The health system in the Sudan is at near total collapse, with 70 per cent of facilities non-functional.’¹²⁴
- 15.3.3 The OCHA SHNRP 2026 noted:
- ‘As health needs escalate, access to essential health services remains a major challenge. A large proportion of health care facilities in conflict-affected areas are closed or only partially functional, while more than 30 per cent of households are unable to obtain needed medical care, mainly due to cost barriers or the unavailability of services and medicines. These challenges were consistently echoed in community consultations, where the most commonly reported barriers to care included lack of access to medicines, limited availability of services and inability to afford consultations and treatment.’¹²⁵
- 15.3.4 A January 2026 World Health Organization (WHO) report stated that the health system had been affected by ongoing fighting, attacks on healthcare, displacement, shortages of essential medical supplies, and shortages of health personnel and funding. The report noted that 37% of health facilities were non-functional despite efforts by WHO and its partners to restore health services. According to the same source, since the conflict began in April 2023, WHO had verified 201 attacks on healthcare, which reportedly resulted in 1,858 deaths and 490 injuries. The report further stated that these attacks had affected access to healthcare and exposed healthcare workers, patients and caregivers to risk¹²⁶.
- 15.3.5 The HeRAMS October 2025 report explained: ‘HSDUs (Health Service Delivery Units) reported as destroyed, non-functioning, or inaccessible are deemed unable to provide any health services, hence categorized as non-operational.’¹²⁷ Based on this definition, 2,564 of the 4,363 assessed HSDUs (58.8%) were classified as at least partially operational. The report further

¹²⁰ WHO, [Health Services Across States- January 2026](#) (page 5 footnote 1), 4 June 2026

¹²¹ WHO, [HeRAMS Baseline report 2025](#) (page 7), October 2025

¹²² WHO, [Health Services Across States- January 2026](#) (page 7), 4 June 2026

¹²³ WB, [Poverty & Equity Brief, Sudan](#), October 2025

¹²⁴ UNICEF, [Sudan Appeal Humanitarian Action for Children](#) (page 2), December 2025

¹²⁵ OCHA, [Sudan Humanitarian Needs and Response Plan 2026](#) (page 11), April 2026

¹²⁶ WHO, [Sudan: 1000 days of war deepen the world's worst health and ...](#), 9 January 2026

¹²⁷ WHO, [HeRAMS Baseline report 2025](#) (page 8 footnote 6), October 2025

noted that, among the assessed HSDUs, 119 had fully damaged buildings, 234 had fully damaged equipment, 1,615 were non-functional, and 65 were fully inaccessible¹²⁸. These findings indicate significant disruption to the provision of healthcare services.

15.3.6 The HeRAMS June 2026 report, based on an assessment of 4,809 of the 6,089 registered Health Service Delivery Units (HSDUs), found that, as of January 2026, 3,051 facilities (63.4%) were at least partially operational. The remaining 36.6% were either non-functional, fully damaged, or inaccessible. Of the facilities assessed, 1,753 (36.5%) were reported as non-functional or fully damaged, while 5 facilities (0.1%) were inaccessible. The report further noted that 117 facilities had fully damaged buildings, 249 had fully damaged equipment, 1,636 were non-functional, and 5 were fully inaccessible, highlighting the significant disruption to healthcare service delivery¹²⁹.

15.3.7 The table below, based on HeRAMS data^{130 131}, compares operational status of HSDUs in October 2025 and January 2026:

Indicator	Oct-25	Jan-26	Change
Reporting HSDUs	4,363	4,809	446
At least partially operational	2,564	3,051	487
Fully damaged buildings	119	117	-2
Partially damaged buildings	1,140	1,253	113
Fully damaged equipment	234	249	15
Partially damaged equipment	885	977	92
Non-functioning HSDUs	1,615	1,636	21
Partially functioning HSDUs	527	563	36
Inaccessible HSDUs	65	5	-60
Partially accessible HSDUs	180	140	-40

15.3.8 The table below based on HeRAMS data¹³² shows operational status of HSDUs by state as of January 2026:

¹²⁸ WHO, [HeRAMS Baseline report 2025](#) (page 8), October 2025

¹²⁹ WHO, [Health Services Across States- January 2026](#) (page 7), 4 June 2026

¹³⁰ WHO, [HeRAMS Baseline report 2025](#) (page 7), October 2025

¹³¹ WHO, [Health Services Across States- January 2026](#) (page 7), 4 June 2026

¹³² HeRAMS Sudan, [Health Services Across States- January 2026](#) (page 7), 4 June 2026

HSDUs by State						
State	Registered HSDUs	Assessed HSDUs	At least partially operational HSDUs	Operational share of assessed HSDUs	Operational HSDUs per 100,000 population	
Abyei PCA		8	8	4	50%	14.2
Aj Jazirah		741	471	120	25%	2.2
Blue Nile		208	199	199	87%	18.7
Central Darfur		115	114	114	100%	9.3
East Darfur		42	42	42	100%	1.7
Gedaref		337	323	316	98%	10.5
Kassala		476	455	404	89%	14.9
Khartoum		801	790	161	20%	3
North Darfur		70	70	49	70%	1.5
North Kordofan		622	487	12	2%	0.3
Northern		256	249	249	100%	16.3
Red Sea		277	275	218	79%	11.4
River Nile		373	356	302	85%	11.7
Sennar		362	310	272	88%	14
South Darfur		435	94	94	100%	2.4
South Kordofan		128	123	122	99%	10.5
West Darfur		97	93	91	98%	24.4
West Kordofan		388	7	7	100%	0.3
White Nile		352	343	301	88%	8.7

15.3.9 The March 2026 Health Cluster Bulletin stated:

'A total of 13 attacks has been confirmed by the WHO Surveillance System for Attacks on Health Care (SSA) for Jan - March 2026, causing 184 deaths and 295 injuries. The attack on the Al Daein hospital in East Darfur was the deadliest strike with 70 confirmed deaths ,146 injured, and a large catchment population left without comparable alternative health facility in direct proximity. With the attacks in March the total number of confirmed deaths due to attacks on Health Care in Sudan since the beginning of the ongoing conflict has risen to above 2000. This represents more than half of all confirmed deaths due to attacks on health care reported in SSA globally for the time since April 2023.'¹³³

15.3.10 Insecurity Insight, a non-profit research organisation that monitors and analyses the impact of conflict and insecurity on civilians, humanitarian operations and essential services¹³⁴ reported in July 2026 that between 15 April 2023 and 9 June 2026, at least 768 incidents involving violence against healthcare or obstruction of access to healthcare were recorded across Sudan. Over two-thirds of these 768 attacks were attributed to the RSF¹³⁵.

15.3.11 According to WHO's Surveillance System for Attacks on Health Care (SSA) dashboard, a global and standardized monitoring system for the collection of primary data about attacks on health care, between 1 January 2026 and 12 August 2026 there were 22 reported and verified attacks on health care in Sudan, resulting in 195 deaths and 236 injuries.¹³⁶ WHO defines an attack on health care as any act of verbal or physical violence or obstruction or threat of violence that interferes with the availability, access and delivery of curative and/or preventive health services during emergencies.¹³⁷

¹³³ Health [Cluster Sudan, National Health Cluster Bulletin](#) (page 2), March 2026

¹³⁴ Insecurity Insight, [About us](#), no date

¹³⁵ Insecurity Insight, [Attacks on Health Care in Sudan 24 June-07 July 2026](#), July 2026

¹³⁶ WHO, [Surveillance System for Attacks on Health Care](#), undated

¹³⁷ WHO, [Surveillance System for Attacks on Health Care](#) (information note), undated

15.4 Disease outbreak

15.4.1 A UNICEF report published in December 2025 observed that the collapse of Sudan's health system had left an estimated 3.4 million children under the age of five at risk of life-threatening diseases. The report stated that cholera remained widespread, with over 113,000 cases and approximately 3,000 deaths reported since 2024. It further reported a surge in malaria, noting that Sudan accounted for around 41% of global malaria cases and 49% of malaria-related deaths, with an estimated average of 10,000 new infections and 21 deaths recorded each day as of November 2024¹³⁸.

15.4.2 The April 2026 Sudan Health Cluster reported:

'The Cholera outbreak has been declared contained at the beginning of March 2026, but the risk remains high, and preparedness measures are under way. Sudan is currently experiencing multiple disease outbreaks, including vector borne (Malaria and Dengue), water borne (especially Hepatitis E) and vaccine preventable diseases (mainly measles and diphtheria). A set of compounded factors – from conflict, over strongly weakened health systems to displacement - is exacerbating disease risk and hindering effective surveillance and control.'¹³⁹

15.4.3 The June 2026 National Health Cluster Bulletin stated: 'During June, cholera and acute watery diarrhea transmission continued in parts of Kordofan, while Hepatitis E remained a concern among displaced populations in Blue Nile. Measles outbreaks were reported in Darfur and White Nile, and dengue fever, malaria, diphtheria, and polio continued to pose risks in several states.'¹⁴⁰

15.4.4 UNICEF reported in August 2026, based on a reporting period of 1 January to 30 June 2026:

'Public health situation remains extremely fragile. Population displacement, inadequate water and sanitation services, and limited access to health care continue to fuel multiple disease outbreaks, including cholera, dengue fever, malaria, measles, and hepatitis E.

'While a previous cholera outbreak was declared contained in March 2026, a new outbreak has emerged in West Kordofan highlighting the country's ongoing vulnerability to epidemic disease. Hepatitis E cases, particularly among pregnant women, have been reported in the Blue Nile and Aj Jazirah states, while dengue transmission continues in the River Nile and Khartoum states. Malaria remains endemic across much of the country, and although vaccination campaigns have contributed to a reduction in measles cases, outbreaks persist in several hotspot areas, particularly in Darfur and Kordofan.

'The rainy season [May-October] is expected to further elevate the risk of outbreaks, especially of cholera and other waterborne diseases.'¹⁴¹

¹³⁸ UNICEF, [Sudan Appeal humanitarian action for children](#) (page 2), December 2025

¹³⁹ Sudan Health Cluster, [National Health Cluster Bulletin March 2026](#), 19 April 2026

¹⁴⁰ Health Cluster Sudan, [National Health Cluster Bulletin](#) (page 2), 3 August 2026

¹⁴¹ UNICEF, [UNICEF Sudan Humanitarian Situation Report No. 44](#) (page 3), 7 August 2026

15.5 Healthcare assistance

15.5.1 Humanitarian Action noted that US\$ 325.3 million (£243.9 million¹⁴²) was required to support healthcare assistance in 2026. As of June 2026, US\$ 117.3 million (£85.9 million¹⁴³), representing 36.1% of the funding requirement, had been received¹⁴⁴.

15.5.2 The WHO January 2026 report observed:

‘WHO works with Sudan’s Federal and State Ministries of Health and partners to improve access to critical health services across Sudan and rehabilitate the health system. Since the start of the conflict in April 2023, WHO has delivered 3378 metric tons of medicines and medical supplies worth about US\$ 40 million, including diagnostic supplies, treatments for malnutrition, and diseases such as cholera, malaria, dengue, and emergency surgery, to 48 health partners for lifesaving operations. About 24 million people have received cholera vaccinations, and WHO has supported the country to introduce and scale up malaria vaccines. Additionally, more than 3.3 million people have accessed health care at WHO-supported hospitals, primary health care facilities, and temporary mobile clinics. More than 112 400 children with severe acute malnutrition with medical complications have received treatment at functional stabilization centres, all of which receive lifesaving WHO nutrition supplies. State and National public health laboratories have been equipped and strengthened to confirm disease outbreaks and enable a rapid response.’¹⁴⁵

15.5.3 The Sudan Health Cluster June 2026 update reported that an estimated 2.6 million (38%) of the 6.6 million targeted for assistance had been reached¹⁴⁶. However, this represented 12% of the 21 million people in need of health assistance. The same source reported 58 partners operated in 160 localities in all the 18 states¹⁴⁷.

15.5.4 UNICEF reported in August 2026, based on a reporting period of 1 January to 30 June 2026, they had: ‘... supported over 1,400 health facilities across Sudan’s 18 states, enabling more than 1.3 million people to access primary health care services (37 per cent of the annual target). Further 454,900 people were reached through outbreak response services, reflecting the continued impact of disease outbreaks on the health system.’¹⁴⁸

15.5.5 For information on international assistance to the health service, see [Humanitarian assistance](#).

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16. Water, Sanitation and Hygiene (WASH)

16.1 People in need and access to WASH

16.1.1 The OCHA SHNRP 2026 report stated that, in 2026, an estimated 27.1 million people in Sudan needed WASH assistance, of whom 16 million would

¹⁴² Xe, [Currency Converter](#), 24 July 2026

¹⁴³ Xe, [Currency Converter](#), 21 August 2026

¹⁴⁴ Humanitarian Action, [Sudan](#) (Plan overview) 2026

¹⁴⁵ WHO, [Sudan: 1000 days of war deepen the world’s worst health and ...](#), 9 January 2026

¹⁴⁶ Health Cluster Sudan, [Humanitarian response performance monitoring 2026 – June ...](#), June 2026

¹⁴⁷ Health Cluster Sudan, [Humanitarian response performance monitoring 2026 – June ...](#), June 2026

¹⁴⁸ UNICEF, [UNICEF Sudan Humanitarian Situation Report No. 44](#) (page 3), 7 August 2026

be targeted for support¹⁴⁹. The Sudan WASH Cluster reported that 14 million people were targeted for water, 3.7 million for sanitation and 12.4 million for hygiene assistance¹⁵⁰.

16.1.2 The Sudan Humanitarian Needs and Response Plan 2025 noted in respect to WASH:

‘Before the conflict, around 11 million Sudanese people lacked access to basic water services, with 26 per cent of the water supply systems non-functional. The situation has since deteriorated significantly, leading many people to rely on unsafe and unprotected surface water. The sharp rise in fuel costs and unavailability of fuel supplies have rendered fuel-reliant community water yards non-functional and difficult to maintain. Some urban water schemes have either been destroyed by war or poorly maintained ...

‘Sudan had one of the worst sanitation conditions in the Middle East and North Africa (MENA) region even before the crisis, with about 27 million people (63.6 per cent) lacking access to basic sanitation services. Among these, 10.3 million people (23 per cent) defecate in the open, which poses significant health risks and exacerbates GBV [gender-based violence] concerns, particularly for women and girls as they become victims of GBV while going far trying to find privacy. The situation remains challenging as the emergency sanitation responses are temporary with the aim to mitigate the immediate public health risks.

‘The displaced population and other vulnerable groups rely on the humanitarian community for essential hygiene items, including soap and critical WASH supplies such as menstrual hygiene products for women of reproductive age. The increasing concentration of newly displaced people is straining already limited WASH resources, contributing to life-threatening cholera outbreaks and other diarrheal diseases, which exacerbate malnutrition rates.’¹⁵¹

16.1.3 The OCHA SHNRP 2026 report observed:

‘The collapse and destruction of water systems—especially in conflict areas, return areas and urban centers—has left communities exposed to unsafe water and heightened risk of outbreaks such as cholera, dengue and malaria. Existing services are under immense strain as water demand surges, particularly in areas hosting large numbers of internally displaced people. In parts of the Darfur and Kordofan regions, over 30 per cent of households report walking more than an hour to fetch water, while many rely on costly, untreated private vendors. Female-headed households are around 40 per cent more likely to face extreme water deprivation. Hygiene conditions are deteriorating sharply, with open defecation becoming a major concern as access to hygiene items is increasingly constrained by market shortages and affordability challenges. In the consultations, communities consistently cited lack of clean water and basic hygiene among their top challenges, compounded by collapsing infrastructure and soaring service costs.’¹⁵²

¹⁴⁹ OCHA, [Sudan Humanitarian Needs and Response Plan 2026](#) (page 35), April 2026

¹⁵⁰ Wash Cluster, [Sudan](#), no date

¹⁵¹ HA, [Sudan](#) (WASH), 2025

¹⁵² OCHA, [Sudan Humanitarian Needs and Response Plan 2026](#) (page 11), April 2026

- 16.1.4 A July 2025 OCHA report noted that damage to water treatment systems, power infrastructure, and health facilities has left millions without clean water, sanitation, or medical care¹⁵³.
- 16.1.5 UNICEF reported in September 2025: 'One in three persons lacks safe water, a WASH crisis that is affecting 28 million people and fueling outbreaks of cholera and diarrhoea.'¹⁵⁴
- 16.1.6 UNICEF reported in August 2026, based on a reporting period of 1 January to 30 June 2026 that: 'The continued deterioration of public infrastructure, attacks on water and electricity infrastructure, recurring electricity outages and rising fuel costs placed significant pressure on water supply systems nationwide...In many camps, the number of users per latrine still exceeds the emergency standard of 50 people, reaching up to 100 people per latrine in some locations.'¹⁵⁵

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16.2 WASH assistance

- 16.2.1 The Humanitarian Action Plan (HAP) overview for Sudan reported that, of the US\$375.9 million (£281.2 million) required for WASH assistance in 2026, US\$84.9 million (£62.2 million) had been received by June 2026, representing 22.6% of the funding requirement¹⁵⁶.
- 16.2.2 The January 2026 UNICEF humanitarian situation report covering 1 to 31 January 2026 noted:

'In January [2026], UNICEF sustained and strengthened its WASH response across conflict-affected and high-risk areas, maintaining critical support to communities facing severe disruptions to basic services ...

'In January [2026], over 973,000 people gained access to safe drinking water through a combination of emergency and medium-term measures ...

'A total of 62 improved water facilities were rehabilitated, including critical repairs, upgrades and operational support ... UNICEF also supplied water treatment chemicals to six water systems and 2,141 households, contributing to safe water quality across hard-to-reach locations.

'UNICEF also made steady progress in promoting sanitation and hygiene. In January [2026], over 13,300 people gained access to adequate sanitation services through the construction of emergency latrines and desludging of existing facilities in displacement sites and host communities. These efforts helped reduce open defecation and supported improved public health and dignity for affected populations, corresponding to 9 per cent of the annual sanitation target.'¹⁵⁷
- 16.2.3 The WASH Cluster reported that, between January and July 2026, an estimated 8.3 million people had been reached with WASH assistance, representing 52.1% of the 16 million people targeted and 30.6%% of the people in need of WASH assistance. According to the same source, 6.1 million people (43.7% of the 14.8 million targeted) received water assistance,

¹⁵³ OCHA, [Sudan: Cholera Operational Update](#), 3 July 2025

¹⁵⁴ UNICEF, [Sudan Appeal Humanitarian Action for Children](#) (page 2), December 2025

¹⁵⁵ UNICEF, [UNICEF Sudan Humanitarian Situation Report No. 44](#) (pages 4 and 5), 7 August 2026

¹⁵⁶ HA, [Sudan](#) (plan overview), April 2026

¹⁵⁷ UNICEF, [Sudan Humanitarian Situation Report No. 39](#) (page 4), 31 January 2026

456,000 people (31.9% of the 1.4 million targeted) received sanitation assistance, and 1.7 million people (13.9% of the 12.4 million targeted) received hygiene assistance. The cluster further reported that 60 partners were operating in the WASH sector, including 48 engaged in water activities, 40 in sanitation activities and 51 in hygiene activities¹⁵⁸.

16.2.4 UNICEF reported in August 2026, based on a reporting period of 1 January to 30 June 2026:

‘Between January and June, UNICEF WASH provided access to safe water for 6.6 million people...

Progress in sanitation services continued despite significant operational challenges. Between January and June, approximately 52 per cent of the annual target was met...

‘Progress in hygiene promotion and distribution of WASH supplies remained significantly below target. By the end of June, 897,900 people had been reached with hygiene promotion activities, representing 20 per cent of the annual target, while 369,700 people received WASH supplies, achieving 23 per cent of the annual target. Performance was affected by limited dignity kits, funding shortages, procurement delays, supply chain challenges and access constraints in insecure and hard-to-reach areas.’¹⁵⁹

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17. Education

17.1 People in need and access to education

17.1.1 The OCHA SHNRP 2026 observed:

‘The crisis has pushed Sudan’s education system to the brink, resulting in prolonged interruptions in schooling for millions of children and threatening the future of education nationwide. While schools have been gradually reopening in some areas allowing some students to return, nearly 60 per cent of school aged children do not attend formal education. In total, 10.5 million people need education support in 2026. Access barriers are particularly severe in conflict-affected areas, where many schools have been damaged, destroyed or are being used for other purposes ... Key drivers of education disruption include conflict-related school closures, the use of schools as shelter, direct attacks on education infrastructure and challenges to the payment of teacher salaries. Community consultations underscored education as a significant priority for affected people, with poor quality education, high school fees, teacher and supply shortages, and limited access and coverage cited as the main challenges.’¹⁶⁰

17.1.2 The same source estimated that 10.5 million people were in need of education support. Of these, 2.2 million people were targeted for assistance through the Education Cluster, which required US\$64.3 million in funding to implement its planned response¹⁶¹.

17.1.3 Freedom House’s Freedom in the World 2026 report, covering events of

¹⁵⁸ WASH Cluster [WASH Sector Partners Response Dashboard- HNRP 2026](#), August 2026

¹⁵⁹ UNICEF, [UNICEF Sudan Humanitarian Situation Report No. 44](#) (pages 4 and 5), 7 August 2026

¹⁶⁰ OCHA, [Sudan Humanitarian Needs and Response Plan 2026](#) (pages 11 to 12), April 2026)

¹⁶¹ OCHA, [Sudan Humanitarian Needs and Response Plan 2026](#) (page 28), April 2026)

2025 (FH 2026 report), observed:

‘... Following the 2021 coup, authorities arrested deans and professors at Al-Gezira University who had criticized the military takeover. In addition, security forces attacked student protesters on university campuses. In November of that year, several universities closed their campuses and suspended classes, citing political instability.

‘Many more of the country’s schools and universities closed in April 2023 due to the civil conflict. The war has since disrupted learning across different levels of education, and some data suggest that over three-quarters of school-age children were out of school by the beginning of the 2025 academic year. With millions of people displaced from their homes by fighting, many educational facilities have been used as shelters or otherwise repurposed.’¹⁶²

17.1.4 On 22 January 2026, Save the Children reported:

‘Across Sudan more than 8 million children – nearly half of Sudan’s 17 million school-aged children – have spent about 484 days without entering a classroom ...

‘Sudan is now facing one of the worst education crises in the world with many schools closed while others have been damaged in the conflict or are being used as shelters for displaced families, leaving children without safe places to learn and millions of children increasingly unlikely to ever complete their studies.

‘North Darfur state, where conflict is ongoing, is the most affected region with only 3% of over 1,100 schools open. West Kordofan, South Darfur and West Darfur are next in terms of the least number of schools operating at 15%, 13% and 27% respectively, according to data from Sudan’s education cluster due to be released this week.

‘Additionally, many teachers have not received salaries for months, severely affecting morale and forcing some to abandon their jobs ...’¹⁶³.

17.1.5 UNICEF reported in January 2026:

‘The education crisis in Sudan remains severe, with learning disruption most acute in Darfur, the Kordofan states and areas hosting displaced populations, where insecurity continues to prevent children from accessing safe learning environments ...

‘A total of 13,220 schools are now operational out of 19,390 nationwide, representing approximately 68 per cent of all schools. To support and sustain these reopenings, 1,440 schools across Khartoum received school grants to complete school-improvement plans ... These grants enabled schools to address critical infrastructure needs and improve the learning environment, supporting the restoration of safe formal education for 528,970 children (52 per cent girls). Additionally, teaching and learning materials were distributed to 1,400 children (44 per cent girls) in 77 reopened schools in Kassala, enabling children to actively participate in learning and recreation.

¹⁶² FH, [Freedom in the World 2026 – Sudan](#) (section D3), 2026

¹⁶³ Save the Children, [Sudan: Children have lost about 500 days of learning due ...](#), 22 January 2026

'Barriers persist, with an estimated over 1,800 schools remaining in use as shelters for internally displaced persons or occupied by armed groups ...

'Safe Learning Spaces (SLSs) continued to provide essential access to structured learning and psychosocial support for out-of-school children and those in areas where schools remain closed, damaged or insecure ...'¹⁶⁴

- 17.1.6 According to an Education Cluster dashboard updated in January 2026, 12,243 (65%) of Sudan's 19,883 schools were operational. The dashboard also reported that 7.9 million (46%) of the country's 17 million school-age children were out of school¹⁶⁵.
- 17.1.7 UNICEF reported in August 2026, based on a reporting period of 1 January to 30 June 2026 noted: 'Learning disruption is most acute in Darfur and Kordofan ... In conflict settings marked by child recruitment and sexual violence, girls' primary enrolment is affected twice as severely as boys', with greater impacts on adolescent girls and secondary enrolment ... Schools themselves have also come under direct attack during 2026, further eroding safe access to learning.'¹⁶⁶

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17.2 Education assistance

- 17.2.1 The Sudan Education Sector reported that, as of June 2026, it had received US\$ 9.8 million (£7.3 million), representing 15% of the funding required for education assistance in 2026. The sector reported reaching 378,219 children, equivalent to 17.2% of people targeted for assistance and 3.6% of the people in need of assistance. It also noted that 35 partners were implementing education activities across the sector¹⁶⁷.
- 17.2.2 The UNICEF humanitarian situation reporting in April 2026 noted that the response focused on supporting access to education for crisis-affected children through formal schooling, temporary learning spaces, accelerated learning programmes, the provision of learning materials, support for examinations, and the rehabilitation and reopening of schools affected by the conflict¹⁶⁸.
- 17.2.3 UNICEF reported in August 2026, based on a reporting period of 1 January to 30 June 2026:
- 'As of June, 1.3 million children and adolescents (52 per cent girls) have accessed formal and non-formal education with UNICEF support since January, representing 84.7 per cent of the annual target of 1.6 million...Between January and June, 1.32 million children (51 per cent girls) accessed formal education in reopened schools supported by school grants in Aj Jazirah and Khartoum...
- 'Since the start of the year, 338 Safe Learning Spaces (SLSs) have been established across 14 states, comprising Accelerated Learning Programme (ALP) and e-learning centres. These spaces have reached a cumulative total of 41,500 children (57 per cent girls) with structured learning and

¹⁶⁴ UNICEF, [Sudan humanitarian situation report No. 39](#) (page 5), 31 January 2026

¹⁶⁵ Sudan Education Sector, [Education sector overview](#), January 2026

¹⁶⁶ UNICEF, [UNICEF Sudan Humanitarian Situation Report No. 44](#) (pages 4 and 5), 7 August 2026

¹⁶⁷ Sudan Education Sector, [Education Cluster Sudan Dashboard](#), June 2026

¹⁶⁸ UNICEF, [Humanitarian Situation Report No. 42](#) (pages 5 to 6) April 2026

psychosocial support since January...

'In the first six months of the year, 171,500 children (51 per cent girls) have been provided with learning materials, contributing toward 15 per cent of the annual target of 1.13 million supplies.'¹⁶⁹

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18. Shelter and Non-Food Items (S/NFI)

18.1 Situation including people in need

18.1.1 According to the OCHA SHNRP 2026 report an estimated 15.4 million need SNFI assistance in 2026 of which 1.8 million were targeted for support¹⁷⁰.

18.1.2 A survey of 4,504 Sudanese households conducted between November 2023 and January 2024 by the International Food Policy Research Institute (IFPRI) and the United Nations Development Programme (UNDP) published in November 2024 found that the conflict had exacerbated pre-existing housing vulnerabilities. According to the survey, most rural households lived in inadequate housing conditions and had unequal access to basic services, including water, electricity and sanitation¹⁷¹. The same source reported that 73% of rural households lived in housing classified as inadequate and that 79% of households owned their dwelling, although ownership rates varied by the characteristics of the household head and area of residence. The report also noted that women and younger people were less likely to own the dwelling in which they lived¹⁷².

18.1.3 A February 2024 white paper by the Norwegian Refugee Council (NRC) on housing, land, and property (HLP) in Sudan, based on a desk review of existing literature, noted:

'In the current conflict, most of the clashes between the SAF and RSF are in cities with populations exceeding 100,000 people. Bombardments and heavy artillery in densely populated urban areas destroyed critical infrastructure and hundreds of homes. The RSF has forcefully occupied civilian residences, and both sides have issued evacuation orders in several areas. The loss of their houses, land and property (HLP) and the ongoing fighting has displaced millions of people. For those who are unable to find safety with relatives, paying rent is often one of the most challenging HLP issues. This leaves them at risk of eviction and loss of safe and adequate housing. Humanitarian access to civilians in urban conflict zones is also extremely challenging, as ongoing clashes hinder access to the people and aid operators' ability to assist with HLP issues like forced evictions or housing solutions.'¹⁷³

18.1.4 The OCHA SHRP 2026 report observed:

'Sudan remains the world's largest displacement crisis, with many internally displaced people having lost shelter, security and essential household assets during often forced and multiple displacements ... In severely affected states like North and East Darfur, more than 10 per cent of internally

¹⁶⁹ UNICEF, [UNICEF Sudan Humanitarian Situation Report No. 44](#) (page 6), 7 August 2026

¹⁷⁰ OCHA, [Sudan Humanitarian Needs and Response Plan 2026](#) (page 33), April 2026

¹⁷¹ IFPRI/UNDP, [Livelihoods in Sudan Amid Armed Conflict](#) (page ii), November 2024

¹⁷² IFPRI/UNDP, [Livelihoods in Sudan Amid Armed Conflict](#) (pages 35, 36), November 2024

¹⁷³ NRC, [Integrating housing, land and property ... into rebuilding Sudan](#) (pages 3, 4), February 2024

displaced households live in totally collapsed or structurally unsafe shelters, while up to 42 per cent report overcrowding, inadequate privacy or poor ventilation, conditions that significantly increase health and protection risks, including GBV. Limited site planning, weak governance and lack of tenure security expose displaced families to eviction and secondary displacement; only 10 per cent of internally displaced households report having written agreements for their shelter arrangements. Community consultations consistently highlighted financial constraints, insecurity, unstable shelter conditions and fear of eviction as primary concerns.¹⁷⁴

- 18.1.5 UNICEF reported in November 2025 that in Tawila locality, North Darfur, and nearby reception sites, the rapid influx of newly displaced populations from Al Fasher had overwhelmed existing IDP settlements with large numbers of families reportedly living in the open¹⁷⁵.

- 18.1.6 The Global Shelter Cluster reported with regard to Sudan:

‘In 2026, 15.4 million people require Emergency Shelter and Non-Food Items assistance across Sudan. Inter-sectoral severity analysis and site-level assessments indicate that a significant proportion of displaced households fall within the highest severity categories due to structural shelter failure, overcrowding, and repeated asset loss. The most acute needs are concentrated in Darfur states, parts of Kordofan, and high-density displacement hubs affected by conflict and flooding.

‘More than one in ten displaced households live in collapsed or structurally unsafe shelters. Up to 40 per cent report overcrowding and lack of privacy. Recurrent flooding and fire incidents have destroyed shelters and essential household items multiple times in some locations, reinforcing cyclical emergency needs and increasing humanitarian replacement costs.

‘Shelter inadequacy directly increases protection risks, including gender-based violence, exploitation, eviction, and fire hazards. Female-headed households, older persons, and persons with disabilities face disproportionate exposure due to mobility limitations and lack of structural reinforcement.

‘Market functionality varies significantly across states. It does not automatically translate into affordability, as high inflation and liquidity shortages continue to constrain purchasing power. While some urban and peri-urban areas demonstrate partial market recovery, insecurity, supply chain disruption, and high inflation continue to limit access to affordable shelter materials in many high-severity locations. Access constraints and land tenure uncertainties further affect delivery and sustainability.¹⁷⁶

- 18.1.7 The October 2025 IOM report stated that Tawila, North Darfur, hosted approximately 652,000 IDPs, of which 74% resided in informal settlements or open gathering sites. According to the report over 40% of shelters were totally collapsed, severely damaged, or unsafe¹⁷⁷.

- 18.1.8 The IOM June 2026 Sudan displacement and return snapshot reported:

‘In terms of shelter, IDPs were recorded staying with host families (39%), at

¹⁷⁴ OCHA, [Sudan Humanitarian Needs and Response Plan 2026](#) (page 12), April 2026

¹⁷⁵ UNICEF, [North Darfur \(Al Fasher\) and Kordofan crisis ...](#) (pages 1 to 2), 6 November 2025

¹⁷⁶ Global Shelter Cluster, [Sudan 2026 Humanitarian Needs and Response ...](#), 19 February 2026

¹⁷⁷ IOM, [DTM Sudan Displacement and humanitarian snapshot: Tawila](#) (page 1), 29 October 2025

gathering sites (28%), in informal schools (20%), in schools or public buildings (6%), in forms of improvised shelter (4%), and in private rented accommodation (3%). However, the types of shelter used by IDPs varied widely between states: in many states, the majority of IDPs reportedly stayed with host families. Aj Jazirah (91%), Sennar (85%), Khartoum (83%), Northern (77%), Gedaref (76%). In other states, IDPs were recorded across a mix of different types of shelter: for example, over half of IDPs in North Darfur (54%) were staying at informal gathering sites, while others reportedly stayed with host families (25%), in camps (15%), in schools or public buildings (3%), in forms of improvised shelters (2%), or in rented accommodation (1%).¹⁷⁸

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18.2 S/NFI Assistance

- 18.2.1 Humanitarian Action reported that US\$179 million (£134.5 million¹⁷⁹) was required for emergency shelter and non-food items. As of July 2026, of US\$ 54.5 million (£40.9 million) representing 30.4% of the required funding had been provided¹⁸⁰. However, the Global Shelter Cluster dashboard indicated that, as of June 2026, US\$ 38.0 million (£28.5 million¹⁸¹), representing about 21% of the funding requirement, had been funded¹⁸².
- 18.2.2 The Global Shelter Cluster reported that as of July 2026 837,773 people (45%) of those targeted had been reached. These included 740,095 reached with NFI and 193,207 with shelter assistance. Beneficiaries included new 650,573 new IDPs, 112,676 protracted IDPs, 60,668 IDP returnees and 19,756 host community¹⁸³.

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19. Electricity

- 19.1.1 The United Nations Development Programme (UNDP) and the International Food Policy Research Institute (IFPRI) conducted a national urban household survey between May and July 2024, covering approximately 3,000 households across Sudan. The survey assessed the socioeconomic impact of the conflict on urban populations, including displacement, employment, income, food security, access to services, and household wellbeing¹⁸⁴. The survey found that 12% of urban households that had access to electricity prior to the conflict had subsequently lost such access¹⁸⁵.
- 19.1.2 A September 2024 World Bank report stated that prior to the conflict, Sudan had an installed electricity generation capacity of 3,700 MW but faced a 900 MW supply deficit and low access at 56%. Since the conflict began, fuel supply disruptions affected thermal generation and increased reliance on hydropower leading to irregular operations. Conflict-related damage to transmission and distribution infrastructure, combined with changes in

¹⁷⁸ IOM, DTM Sudan Displacement and Return Snapshot (7) (page 7), 23 July 2026

¹⁷⁹ Xe [Currency converter](#), 27 July 2026

¹⁸⁰ Humanitarian Action, [Sudan Plan overview](#), 26 February 2026

¹⁸¹ Xe [Currency converter](#), 28 July 2026

¹⁸² Global Shelter Cluster, [Sudan](#), June 2026

¹⁸³ Global Shelter Cluster, [Sudan Shelter and NFI cluster response dashboard](#) July 2026

¹⁸⁴ IFPRI/UNDP, [The socioeconomic impact of armed conflict on ...](#) (page 6), November 2024

¹⁸⁵ IFPRI/UNDP, [The socioeconomic impact of armed conflict on ...](#) (page 56), November 2024

electricity demand, led to increased rationing and a deterioration in supply quality¹⁸⁶.

- 19.1.3 A November 2025 article by the Middle East Council on Global Affairs (ME Council), an independent, non-profit policy research institution based in Doha¹⁸⁷, stated:

‘Even before the outbreak of nationwide conflict in April 2023, Sudan’s power infrastructure was threadbare and marked by deep regional disparities. Approximately 60–70% of the population—mainly those in rural and conflict-affected areas—lacked access to electricity, while Khartoum and a few central regions experienced frequent blackouts despite receiving most of the supply ...

‘The situation has since deteriorated, as fighting devastated critical infrastructure. Attacks by the Rapid Support Forces (RSF) have crippled power plants, transformers, transmission lines, and fuel depots. The war compounded these challenges by triggering mass displacement to remote cities and rural areas, where infrastructure is weaker and the primary energy source is biomass fuels. As of 2025, up to 40% of Sudan’s energy generation capacity had been lost due to the conflict, plunging millions into darkness and disrupting essential services ...

‘The country has an installed generation capacity of 4.5 gigawatts (GW), and on the eve of the ongoing war, only 62% of the population had access to electricity at all—primarily those living in urban areas—but even they face regular blackouts ...’¹⁸⁸

- 19.1.4 On 29 July 2025 South Africa Today reported:

‘Two years of intense fighting between the Sudanese Armed Forces and the paramilitary Rapid Support Forces (RSF) have devastated the country’s power infrastructure, leaving only two of Sudan’s 15 thermal power plants operational. The ongoing conflict has turned major cities into battlegrounds, crippling electricity generation and leaving residents in prolonged darkness ...

According to the Sudanese Electricity Company, nearly 40% of the country’s power capacity has been lost due to attacks on infrastructure. Of the 15 thermal plants, seven have been partially or completely destroyed, including a key facility in the capital, Khartoum.

“The war ... has caused massive damage to power generation, transmission, and distribution systems,” an official stated. The destruction has led to daily blackouts exceeding 10 hours in critical areas like Khartoum and Port Sudan, severely disrupting daily life.’¹⁸⁹

- 19.1.5 In November 2025, The Citizen (Sudan) reported:

‘...the state of Khartoum announced the arrival of 160 electrical transformers and their entry into service, with an additional 600 transformers expected in December [2025] ...

‘In the electricity sector, maintenance and operation works were completed

¹⁸⁶ WB, [Updates of electricity and petroleum report in Sudan](#) (pages 4 to 5), September 2024

¹⁸⁷ ME Council, [About us](#), no date

¹⁸⁸ ME Council, [Rebuilding Sudan’s energy sector: Pathways to equitable ...](#), November 2025

¹⁸⁹ South Africa Today, [Sudan’s Power Grid in Crisis as Conflict Destroys ...](#), 29 July 2025

at the Hilla Kuku and Soba stations.... During November [2025], 820 transformers were repaired and brought into service, alongside ongoing arrangements to receive new transformers in the coming days—promising citizens a gradual return to stable electricity. The power transmission sector also improved with the re-entry of the Garri station into service after completing maintenance of the line connecting Khartoum and the River Nile state, a step considered one of the most important factors for ensuring stable power supply ...

‘However, these positive indicators do not conceal the painful truth of the vast destruction inflicted on the infrastructure. Major stations such as Garri, Bahri, and Jebel Aulia were destroyed by 100% due to attacks by the Rapid Support Forces militia. Khartoum witnessed the looting of more than 15,000 transformers, the destruction of 150,000 kilometers of lines, the theft of thousands of tons of cables, and the seizure of tens of thousands of barrels of transformer oils—leading to the loss of more than 1,000 megawatts, representing 35% of total energy production.’¹⁹⁰

- 19.1.6 The Sudan Tribune reported on 8 April 2026 that dozens of residents staged protests in Abri, Northern State, in opposition to persistent electricity outages. According to a local emergency room member, residents objected to Abri’s inclusion in a new electricity rationing schedule, arguing that the Egyptian-supplied transmission line was sufficient to meet the town’s electricity needs without rationing. Egypt reportedly supplies power to several towns in northern Sudan under a longstanding arrangement, and these areas have historically not been subject to national grid rationing¹⁹¹.
- 19.1.7 On 21 July 2026, Sudan Tribune reported that Sudan’s Ministry of Energy and Oil attributed ongoing nationwide power cuts to multiple factors, including the suspension of electricity supplies through the Ethiopia-Sudan interconnection grid. According to the report, electricity shortages had worsened in Khartoum and several other states, with power outages often exceeding 18 hours per day. The ministry also cited extensive damage to generation facilities, transformer stations and transmission lines caused by vandalism, theft and attacks on infrastructure. The report noted that the authorities were implementing a rehabilitation programme to restore the electricity sector, including the restoration of more than 260 MW of generation capacity, the rehabilitation of over 20 substations, and the repair and recommissioning of more than 1,700 km of transmission lines¹⁹².

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20. Freedom of movement

- 20.1.1 For information on freedom of movement see [CPIN security situation, Sudan](#).

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21. Humanitarian assistance

21.1 Funding

- 21.1.1 Humanitarian Action reported in July 2026 that, of the US\$4.16 billion

¹⁹⁰ The Citizen, [Face of truth: Electricity and the prospects of returning to ...](#), 26 November 2025

¹⁹¹ Sudan Tribune, [Sudanese protesters block highway to Egypt over power cuts](#), 8 April 2026

¹⁹² Sudan Tribune, [Sudan blames power cuts on Ethiopian line halt, damage to grid](#), 21 July 2026

(approximately £3.05 billion¹⁹³) required to fund humanitarian activities in Sudan in 2025, US\$1.67 billion (approximately £1.22 billion¹⁹⁴) had been provided, representing 40.1% of the overall funding requirement¹⁹⁵. Freedom House's Freedom in the World 2026 report, covering events of 2025 (FH 2026 report), observed: '... aid efforts were undermined during 2025 by cuts in funding from the United States and some European governments. With many international organizations struggling to work in Sudan, millions of displaced people have had to rely on local community groups for health, food, and safety services.'¹⁹⁶

21.1.2 The OCHA June 2026 humanitarian response dashboard noted: 'humanitarian partners are appealing for US\$2.9 billion [£2.15 billion¹⁹⁷] to deliver lifesaving assistance to 20.4 million people accords the country.'¹⁹⁸

21.1.3 The OCHA March 2026 humanitarian update report further noted: 'Donor funding cuts since early 2025 have forced programmes to scale back, leaving millions without essential support.'¹⁹⁹ In April 2026, UN News reported that UN Spokesperson, Stéphane Dujarric, stated that the 2026 Humanitarian Response Plan remained critically underfunded at approximately 16%²⁰⁰.

21.1.4 The OCHA May-June 2026 humanitarian update stated: 'As humanitarian partners pre-position supplies in preparation for the rainy season and needs continue to rise, 2026 Humanitarian Needs and Response Plan remain critically underfunded, with only 31 per cent of the required \$2.9 billion received as of end of June 2026. Partners report that funding shortfalls are already affecting their ability to deliver essential assistance, including health services, pre-positioning of supplies, and protection interventions.'²⁰¹

21.1.5 However, the latest Humanitarian Action figures, of the US\$2.87 billion (approximately £2.1 billion²⁰²) required to fund humanitarian assistance in Sudan in 2026, US\$1.12 billion (approximately £0.82 billion²⁰³) had been provided, representing 41.2% of the overall funding requirement²⁰⁴.

21.1.6 The table below based on Humanitarian Action data shows funding requirements and disbursement for selected sectors as of June 2026²⁰⁵:

¹⁹³ Xe, [Currency converter](#), 24 August 2026

¹⁹⁴ Xe, [Currency converter](#), 24 August 2026

¹⁹⁵ HA, [Sudan Humanitarian Need Plan 2025](#) (financials), 2025

¹⁹⁶ FH, [Freedom in the World 2026 – Sudan](#) (section E2), 2026

¹⁹⁷ Xe, [Currency Converter](#), 28 July 2026

¹⁹⁸ OCHA, [Humanitarian Response Dashboard June 2026](#), July 2026

¹⁹⁹ OCHA, [Humanitarian update \(January - February 2026\)](#) (page 4), 13 March 2026

²⁰⁰ UN News, [World News in Brief: 'Skyrocketing' needs outpace Sudan funding, ...](#), 6 April 2026

²⁰¹ OCHA, [Humanitarian Update May-June 2026](#), 8 July 2026

²⁰² Xe, [Currency converter](#), 24 August 2026

²⁰³ Xe, [Currency converter](#), 24 August 2026

²⁰⁴ Xe, [Currency Converter](#), 28 July 2026

²⁰⁵ HA, [Sudan Plan overview](#) (financials), 2026

Cluster	Requirements (US\$)	Funding (US\$)	Funding as % of requirement
Education	64.3 million	12.1 million	18.8%
S&NFI	179.4 million	55.5 million	31.0%
FSL	644.9 million	262.6 million	40.7%
Health	325.3 million	117.3 million	36.1%
WASH	375.9 million	84.9 million	22.6%
Total	1.59 billion	532.4 million	33.3%

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- 21.1.7 OCHA reported in July 2026: ‘Despite significant operational challenges – including restricted access, insecurity and severe funding shortfalls – humanitarian organisations reached 11 million people by June 2026. However, only 16 %, or approximately 1.7 million received multi-cluster assistance, highlighting the scale of unmet needs.’²⁰⁷

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21.2 Humanitarian access

- 21.2.1 OCHA’s September 2025 humanitarian access snapshot, covering August 2025, noted:

‘Conflict-related violence and attacks on aid workers remain major constraints on humanitarian access in Sudan. In North Darfur, Al Fasher remains under siege by the ... RSF. Despite sustained high-level engagement, no agreement has been reached to allow humanitarian access, and no aid convoy has entered the city since the beginning of the year ...

‘Volunteers with mutual aid groups continue to face arbitrary arrest, detention and abuse. In August [2025] alone, incidents of violence against volunteer aid workers were reported in Khartoum, East Darfur and North Darfur.

‘Ongoing hostilities also complicate the movement of humanitarian convoys nationwide. Nevertheless, life-saving assistance recently reached Dilling and Kadugli in South Kordofan, the first significant convoy to access those town in over a year.

‘In Khartoum ... bureaucratic hurdles severely undermine humanitarian activities. Partners must obtain multiple travel, entry and exit permits at both federal and state levels, requiring stamps from several authorities. These procedures can take weeks, significantly delaying operations.

‘Another concern is the requirement for Humanitarian Aid Commission (HAC) state officials to accompany routine response activities ...

‘Seasonal conditions are adding to the challenges. Heavy rains have rendered the road between Nyala and East Darfur impassable, compounding access constraints in West Kordofan and other areas.’²⁰⁸

- 21.2.2 OCHA reported in a March 2026 update, covering January-February 2026:

²⁰⁶ HA, [Sudan- Plan overview](#) (financials), 2026

²⁰⁷ OCHA, [Sudan Humanitarian Operational Presence 1 January – 30 June 2026](#), July 2026

²⁰⁸ OCHA, [Sudan: Humanitarian access snapshot \(August 2025\)](#), 9 September 2025

'Drone strikes and escalating violence in Kordofan are increasing civilian casualties, damaging civilian infrastructure, deepening needs, hindering humanitarian access, driving displacement and overwhelming already fragile services... An inter-agency convoy of 26 trucks - led by WFP, UNICEF and UNDP - reached Dilling and Kadugli [in Kordofan] with essential medical, food, nutrition, health, sanitation, hygiene and education supplies for more than 130,000 people. This was the first large-scale delivery of assistance to the area in three months and a critical lifeline for affected people with severe needs.'²⁰⁹

- 21.2.3 A March 2026 briefing note by ACAPS, an independent, non-profit humanitarian analysis organisation that provides data, assessments, and analytical products to support evidence-based decision-making in humanitarian crises²¹⁰, citing multiple sources observed:

'Humanitarian access constraints have been a pervasive and persistent structural occurrence in Sudan's continuing crisis, even as the conflict enters its fourth year. A combination of shifting conflict lines, a deeply fragmented political landscape, physical and environmental challenges, and institutional barriers have resulted in constrained humanitarian access, with humanitarian organisations in the Darfur and Kordofan regions reporting significant bureaucratic and administrative impediments (BAIs) and insecurity constricting their operations.

'Escalating conflict and the intensive use of aerial drone warfare have created significant security challenges for humanitarian personnel and assets, as the indiscriminate drone targeting of civilians is increasing insecurity for humanitarian convoys, damaging infrastructure, and creating unpredictable front lines. While humanitarian needs in frontline areas of the Darfur and Kordofan regions remain persistently elevated, continued attacks on humanitarian operations have slowed efforts to scale up aid interventions in these areas, as operations are suspended and movements reduced.

'The ... SAF, ...RSF, and allied armed groups also continue to impose parallel directives, such as registration requirements and coordination restrictions, that complicate aid coordination policies through BAIs, constraining humanitarian assistance. This is alongside neighbouring countries' shifting policies around the cross-border delivery of aid into Sudan. Chad, for example, has ordered the closure of its shared border with Sudan ... creating an additional layer of bureaucracy, coordination, and logistical constraint on humanitarian and commercial supply chains at the border.'²¹¹

- 21.2.4 The OCHA May-June 2026 humanitarian update stated:

'Despite extreme insecurity and a highly restricted operating environment, humanitarian partners continue to deliver life-saving assistance in El Obeid [North Kordofan] ...

'However, escalating violence is significantly limiting these efforts. [El Obeid] is now largely encircled, with only one viable route remaining for humanitarian and commercial transport. Frequent armed clashes and

²⁰⁹ OCHA, [Humanitarian update \(January - February 2026\)](#) (page 1), 13 March 2026

²¹⁰ ACAPS, [About us](#), no date

²¹¹ ACAPS, [Analysis of humanitarian access in the Darfur and Kordofan ...](#) (page 1), 22 March 2026

intensified drone strikes are heightening fear, restricting civilian movement, and severely undermining humanitarian access. These constraints are particularly critical as partners attempt to pre-position supplies ahead of the rainy season, when access is expected to become even more challenging...

'...[A]ttacks on critical transport infrastructure are making it harder to preposition essential supplies including food and medicine especially across hard areas in Darfur and Kordofan... The impact of damaged infrastructure is compounded by insecurity along key transport routes. Across parts of Sudan, armed groups have reportedly attacked civilian vehicles, blocked roads, looted goods and targeted fuel infrastructure. Humanitarian and commercial traffic have both faced delays and disruptions...

'Explosive ordnance contamination is one of the most significant obstacles to safe returns, humanitarian access and recovery...

'Clearance of Khartoum Airport and the UN Humanitarian Air Service facilities enabled the resumption of humanitarian flights to the capital, improving access and accelerating delivery of assistance to vulnerable communities.'²¹²

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21.3 Humanitarian actors

- 21.3.1 OCHA's March 2026 humanitarian update report, covering January-February 2026, noted: 'More than 170 humanitarian organizations - over half of them national NGOs, women-led organizations and other frontline responders - will implement this year's plan, focused on delivering critical assistance to those facing the most severe needs.'²¹³
- 21.3.2 The OCHA Sudan Humanitarian Operational Presence Dashboard reported that, as of 30 June 2026, 182 organisations were operating across 12 clusters in 182 localities across 18 states in Sudan. These included 80 international non-governmental organisations (INGOs), 93 national non-governmental organisations (NNGOs), 10 UN agencies, six Red Cross organisations, and five other organisations. The source further reported that 89 organisations were operating in the Education Cluster, 67 in Food Security and Livelihoods, 69 in Health, 40 in Shelter and Non-Food Items (NFIs), and 45 in Water, Sanitation and Hygiene (WASH). Some organisations were active in more than one cluster.²¹⁴ Some organisations worked in more than one cluster.
- 21.3.3 The table below, based on data from the Humanitarian Data Exchange (HDX), an open data platform managed by the United Nations Office for the Coordination of Humanitarian Affairs, shows the number of organisations in Sudan by state and sector between January and June 2026:

²¹² OCHA, [Humanitarian Update May-June 2026](#), 8 July 2026

²¹³ OCHA, [Humanitarian update \(January - February 2026\)](#) (page 4), 13 March 2026

²¹⁴ OCHA, [Sudan Humanitarian Operational Presence 1January – 30 June 2026](#), July 2026

State	Education	FSL	Health	Shelter/NFI	WASH
Aj Jazirah	3	12	19	5	11
Blue Nile	9	11	15	4	6
Central Darfur	4	17	18	8	12
East Darfur	2	7	11	3	2
Gedaref	9	14	16	5	11
Kassala	7	11	13	3	3
Khartoum	7	15	24	4	9
North Darfur	7	30	25	19	13
North Kordofan	6	9	11	11	9
Northern	3	11	17	4	3
Red Sea	7	8	17	1	2
River Nile	3	14	11	2	6
Sennar	4	6	8	2	2
South Darfur	4	10	14	4	6
South Kordofan	6	13	13	2	5
West Darfur	3	13	20	1	2
West Kordofan	0	5	8	7	10
White Nile	7	15	11	6	10
Total	84	166	238	74	114

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²¹⁵ HDX, [Sudan operational presence](#), 25 June 2026

Terms of Reference

The 'Terms of Reference' are the main topics and issues relevant to the scope of this note and provides the framework for the country information. In this note, they were:

- Geography and demography
- Economic situation
 - Inflation
 - Poverty
 - Income
- Security
- People in need
- Water and sanitation (WASH)
- Welfare
- Food security
- Shelter
- Education
- Humanitarian assistance
 - Access
 - Providers
 - Funding
- Freedom of movement

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Version control and feedback

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- version **3.0**
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Changes from last version of this note

Update on Sudanese States that generally meet or do not meet Article 3 of the ECHR and paragraphs 339C and 339CA (iii)

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