



IOM staff conducting DTM activities in Al Fasher, Sudan. © IOM Muse Mohammed 2022.

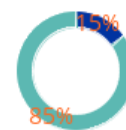
IOM VISION

UPDATED: 19 SEP 2023

IOM Sudan plans to adopt an integrated approach to Sudan's migration and crisis response challenges and support the people and Government of Sudan in managing the mobility dimensions of crises. IOM Sudan works across the humanitarian-development-peace nexus to provide integrated, lifesaving, and multisector humanitarian assistance to the most vulnerable people in emergencies, including disaster risk reduction, emergency preparedness, early action approaches; provision of basic services to tackle critical gaps in underserved communities and evidence-based interventions to address pre-existing and current drivers of forced displacement and fragility to achieve community stabilisation and durable solutions. IOM Sudan's Crisis Response Plan aligns with the United Nations Common Approach to guide planning and prioritization in 2023.

\$521,000,000

Funding Required



■ F. Confirmed: 77.89 M
■ F. Gap: 443.11 M

5,498,468

People Targeted

150

Entities Targeted

IOM PROPOSED RESPONSE

CONTACT INFORMATION

Address: International Organization for Migration, Transit Area, Port Sudan, Red Sea state, Sudan

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PRIMARY TARGET GROUPS

OBJECTIVE	FUNDING REQUIRED	FUNDING CONFIRMED
Save lives and respond to needs through humanitarian assistance and protection	268,000,000	61,492,627
Address the drivers and longer-term impacts of crises and displacement, supporting durable solutions and investing in crisis prevention	178,500,000	8,145,896
Strengthen preparedness and reduce disaster risk	58,000,000	1,104,586
Contribute to an evidence-based and efficient crisis response system	16,500,000	7,147,335

1. Internal migrant
2. Internally displaced person
3. International migrant
4. Local population / community
5. Refugee
6. Former combatant / fighter

BREAKDOWN OF FUNDING REQUIREMENTS (USD) 2023

OBJECTIVES AND ACTIVITY AREAS	2023
Save lives and respond to needs through humanitarian assistance and protection	
Basic needs, including food and multi-purpose cash assistance	7,500,000
Camp coordination and camp management	2,000,000
Humanitarian border management and services for citizens abroad	4,000,000
Shelter and settlements	95,000,000
Provision of water, sanitation and hygiene in emergencies	90,000,000
Direct health support	25,000,000
Mental health and psychosocial support in humanitarian response	1,500,000
Protection	15,000,000
Movement assistance	28,000,000
Address the drivers and longer-term impacts of crises and displacement, supporting durable solutions and investing in crisis prevention	
Provision of water, sanitation and hygiene in transitional and post-crisis situations	55,000,000
Community stabilization	45,000,000
Durable Solutions	40,000,000
Peacebuilding and peace preservation	25,000,000
Health system strengthening	11,500,000
Mental health and psychosocial support in transition and recovery	2,000,000
Strengthen preparedness and reduce disaster risk	
Disaster Prevention	10,000,000
Emergency preparedness	47,000,000
Health components of preparedness and risk reduction	1,000,000
Contribute to an evidence-based and efficient crisis response system	
Displacement tracking	6,500,000
Support services for response actors	10,000,000
TOTAL FUNDING REQUIRED	521,000,000

2023 - Sudan Crisis Response Plan 2023

CONTEXT ANALYSIS

The armed conflict between the Sudanese Armed Forces (SAF) and the Rapid Support Forces (RSF) that erupted on 15 April 2023 in Khartoum, Darfur and other states of Sudan affected millions of people across the country. To date, over 1,100 people have been killed, 12,100 injured, and about 4.6 million people have been displaced inside and outside the country due to the ongoing conflict. More than 3.6 million people have been displaced internally as of 22 August, according to the [Displacement Tracking Matrix](#). Prior to the unfolding crisis, there were already 3.8 million internally displaced persons (IDPs), 1.1 million refugees, 900,000 returnees, and an estimated 1.3 million international migrants in Sudan. Approximately one-third of the population in Sudan was already in need or receiving humanitarian assistance. According to the most recent IOM Displacement Tracking Matrix (DTM) reports, people are fleeing hostilities in Khartoum, North, South, West, and Central Darfur, South and North Kordofan, and Al Jazirah states. Currently, the most affected areas are the capital city of Khartoum and the state capital of West Darfur, Ag Geneina town where the fighting has been more intense. Conflict between the SAF and the Sudan People's Liberation Movement-North (SPLM-N) has been reported in several locations across South Kordofan and Blue Nile states, [resulting in further civilian displacement](#). Field teams have also reported increased incidents of inter-communal conflicts, with tribal leaders now choosing sides between SAF and RSF, which continues to present a risk of spreading or further escalating the conflict in several states across the country – particularly in West Darfur, Blue Nile, Al Jazirah and the Kordofan region. This current conflict has also resulted in a devastating humanitarian situation in the countries bordering Sudan including Egypt, Chad, South Sudan, Ethiopia, Central African Republic, and Libya, creating additional needs for a region that was already in crisis. In addition to the internal displacement, the conflict in Sudan caused the mixed cross-border movements of approximately 1,040,883 individuals into neighbouring countries – 68 per cent of arrivals tracked in those countries were Sudanese nationals and 32 per cent were foreign nationals and returnees. The majority of arrivals were [reported](#) in Chad (41%), Egypt (27.4%), and South Sudan (22.2%).

According to the [Revised Humanitarian Response Plan](#) (HRP 2023), 24.7 million people are in need of assistance a 57 per cent increase from the 15.8 million people expected to need humanitarian assistance in Sudan before April 2023. The ongoing violence has caused extensive damage to infrastructure, leading to water shortages, lack of access to healthcare facilities, blackouts, communication and supply chain disruptions, and widespread incidents of looting. The health system is on the verge of collapse with more than 80 per cent of the hospitals no longer functional due to disruption of supply chains for medicines and medical supplies, attacks on and looting of health facilities including the national laboratory and cold chain facilities; and poor accessibility to functional health facilities due to safety concerns and distance of travel for both health-care professionals and patients. More than 11 million people need health assistance due to a lack of equitable access to health services as well as annual outbreaks of diseases endemic in Sudan such as viral haemorrhagic fevers that occur in yearly cycles, cholera, Hepatitis A and E, COVID-19, and mpox. At least 14.9 million people do not have access to water, basic sanitation, or handwashing facilities with soap and water, which are critical to address food insecurity, malnutrition, and health-related crises.

The [war in Ukraine combined with global price hikes in commodities](#) such as fuel and wheat, of which Russia and Ukraine supplied 73-80 per cent of Sudan's imports from 2018-2020, has exacerbated Sudan's economic and food crises and further reduced the population's purchasing power, leaving many people unable to cover their basic food needs and resorting to negative coping strategies such as eating fewer meals a day. Agricultural production has also been significantly impacted by ongoing military conflict and the economic crisis that had already been experienced in Sudan before the war, and severe floods that displaced over 200,000 people between 2021-2022, leading to an estimated 20.3 million 14.1 million people facing IPC Phase 3 'Crisis' and 6.2 million people Phase 4 'Emergency' level of [food insecurity](#). Approximately 23 million people need better access to protection services with between 40 – 80 per cent of affected people lacking access to civil documentation, physical security, lack of information and awareness on rights and responsibilities, limited services, protection concerns are among the major challenges, as the displaced and vulnerable are at high risk of exploitation by migrant smugglers and human traffickers during the conflict and face harsh treatment by authorities including arrest, detention, and deportation.

According to the [2023 INFORM Risk Index](#) Sudan is ranked 10th globally as natural hazards and the effects of environmental degradation continue to drive humanitarian needs and increase conflict over limited resources, disproportionately affecting displaced populations and vulnerable communities, creating new or secondary displacements, and making sustainable returns and community stabilization challenging, especially with the ongoing conflict.

COORDINATION

IOM coordinates and collaborates technically with the Government of Sudan at the federal and state level and with various line ministries on strategic planning and programming on humanitarian, transition, and migration-related work. IOM is part of the UN Country Team (UNCT) and participates in the Humanitarian Country Team (HCT), Programme Management Team (PMT), Operations Management Team (OMT) and Crisis Management Team (CMT). IOM is also a member of the Inter Cluster Coordination Group (ICCG) and participates in the active Cluster meetings, and across the national Inter-Agency Standing Committee (IASC) thematic working groups. Most notably, IOM and the United Nations High Commissioner for Refugees co-leads the Counter Trafficking and Mixed Migration Working Group and IOM is a key member of the Information Management Working Group (IMWG), the Assessment working Group (AWG) and the Site Management Working group which is being reactivated at a national level as a result of the crisis context in Sudan. IOM also works closely with several UN agencies, non-governmental organizations, and community partners on project implementation to support coordination and localization of interventions. IOM is guided by the [Migration Crisis Operational Framework](#) in planning of initiatives before, during, and after emergencies that provide comprehensive humanitarian and recovery assistance. IOM's initiatives in the country are designed to support the yearly Humanitarian Response Plan (HRP) and Refugee Response Plan (RRP). IOM's programming reflects IOM's humanitarian-development-peace nexus (HDPN) approach, aligning with the Sustainable Development Goals (SDGs), Migration Governance Framework (MiGoF), and Global Compact on Migration (GCM). The UN Network for Migration was formed in Sudan in early 2022 and is co-chaired by UN Deputy Special Representative of the Secretary-General and IOM Chief of Mission to operationalize the GCM. Due to the ongoing conflict IOM Sudan is also responding to the cross-border needs in coordination with other IOM country offices in neighbouring Egypt, Chad, South Sudan, Ethiopia, Libya, and the Central African Republic where the displaced are facing harsh conditions, enduring extended waiting periods due to border crossing complications, with scant or non-existent infrastructure and services. A [response plan and appeal](#) has been created to address the regional crisis and needs.

IOM CAPACITY

Sudan became an IOM Member State in 1998 and IOM opened its main office in Khartoum in 2000. Since then, IOM had established several sub-offices across the country including North Darfur (El Fasher); South Darfur (Nyala); West Darfur (El Geneina); Central Darfur (Zalingei); East Darfur (Ed Daein); West Kordofan (El Fula); South Kordofan (Kadugli); Kassala (Kassala), Gedaref (Gedaref), and Diffra (Abyei). Additionally, IOM has a Migrant Resource and Response Centre (MRRC) in Khartoum and Migrant Response Centres (MRC) in Gedaref and Kassala. Due to the ongoing military conflict the functionality of several of IOM's offices and warehouses has been compromised due to damage and looting. Since the start of the clashes in April 2023, the offices and MRRC in Khartoum have not been accessible. Therefore, IOM has established an office in Port Sudan, Red Sea state as the main office with a core Crisis Response team of 46 staff focused on providing lifesaving assistance in areas that are secure and operational. IOM is currently operating in 12 out of 18 states, 9 of which IOM had already established presence before 15th April; Port Sudan (Red Sea), Kassala (Kassala), Gedaref (Gedaref), Ed Damazine (Blue Nile), Kadugli (South Kordofan), North Darfur, South Darfur, Khartoum, and Diffra (Abyei North), and 3 new states - Wadi Halfa (Northern), Wad Madani (Aj Jazirah), Kosti (White Nile), with the MRCs in Kassala and Gedaref still fully operational. IOM also has five functional warehouses across Sudan with total storage capacity of 8,756m2 and is currently evaluating options to expand warehouse capacity in and outside of Sudan as well as replenishing emergency items and stocks to meet the growing humanitarian needs. Sudan is a source, transit, and destination country for migration dealing with multiple dimensions of crisis including natural hazards, conflict, and fragility and the resulting aspects of human mobility such as displacement, cross border movements, and returns. Even with the current conflict, IOM has remained part of the core humanitarian team established in Port Sudan, and the Crisis Response Team and support staff are providing functions for programme criticality and emergency response. IOM Sudan has a wide variety of projects and programming in several thematic areas that cover the spectrum of assistance to address these multiple dimensions of crisis and manage human mobility challenges. These include:

1. **Humanitarian Response:** shelter and non-food items, water sanitation and hygiene, health, nutrition, and emergency preparedness, Rapid Response Fund.
2. **Transition, Recovery, Reintegration, and Resilience:** livelihoods and income generation, community stabilization, durable solutions, social cohesion, peacebuilding, and disaster risk reduction.
3. **Migration Management and Development:** direct assistance and protection of migrants, counter human trafficking and counter smuggling of migrants, labour migration, diaspora engagement, immigration and border governance, Displacement Tracking Matrix and data management, assisted voluntary return and reintegration, humanitarian evacuation, resettlement, and migrant health services IOM Sudan also mainstreams cross cutting issues including gender, right-based approaches, resilience, environment, conflict sensitivity, accountability to affected populations, and protection to promote meaningful access, safety, and dignity throughout interventions. Thereby ensuring accountability to, and the participation and empowerment of people who receive services, including operating a complaint and feedback mechanism (CFM), conducting camp safety audits, putting in place strong measures to protect vulnerable and crisis-affected populations from sexual exploitation and abuse (SEA) including training staff members and partners on safe referral of protection cases and support for affected populations before, during, and after implementation of interventions.

Funding Required

\$268,000,000

People Targeted Description

IOM foresees that life-saving humanitarian assistance will be needed for the following population groups:

1. Newly displaced IDPs, refugees, and populations affected by man-made or natural hazards.
2. IDPs, refugees, and returnees in protracted displacement situations who continue to suffer from poor living conditions, lack of support and limited access to essential services and livelihood opportunities.
3. Crisis-affected host communities in areas of displacement and return where services are unavailable or overstretched.
4. Internal and international migrants in need of direct assistance or movement assistance including humanitarian evacuation.
5. Stakeholders including government, international and national Non-governmental Organizations (NGOs), Civil Society Organizations (CSOs) and Community-Based Organizations (CBOs) in need of capacity building to better provide life-saving services and assist crisis-affected and vulnerable communities.

22%
Funding Confirmed



78%
Funding Gap



BASIC NEEDS, INCLUDING FOOD AND MULTI-PURPOSE CASH ASSISTANCE

People Targeted: 30,000 vulnerable migrants including IDPs, returnees and host communities. **Entities Targeted:** Cash working Group (CWG), banks, mobile companies, Civil Society Organizations (CSOs) and the private sector. IOM efforts to support crisis-affected communities with basic needs will include:

- Providing cash-based interventions (CBI) to complement in-kind assistance prioritizing newly displaced and vulnerable households focusing on people with special needs to address their basic emergency necessities and reduce use of negative coping mechanisms such as selling assets to buy food and medicines.
- Conducting comprehensive cash feasibility assessments, market assessments, additional needs assessments, and community consultations to confirm usage of CBI modality most applicable in the context including bank transfer or Mobile Money to facilitate safe access for beneficiaries.
- Enrolling beneficiaries in the CBI programme based on predetermined criteria and distributing unconditional multi-purpose cash assistance (MPCA) for beneficiaries to buy food and other items that address their immediate basic needs in coordination with the CWG and other multisector partners to maximize impact of the assistance (i.e., providing basic services such as health and distributing other non-food items along with the cash to ensure that beneficiaries have increased purchasing power).
- Conducting post-distribution monitoring of the assistance to determine lessons learnt and best practices for MPCA.

Funding Required
\$7,500,000

Funding Confirmed
\$2,252,251

30% 70%



CAMP COORDINATION AND CAMP MANAGEMENT

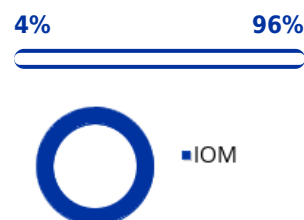
People Targeted: 150,000 IDPs. **Entities Targeted:** Humanitarian Aid Commission (HAC) and 38 organizations including UN agencies and IN/NGO partners including UNHCR, OCHA, UNICEF, WFP, NRC. To contribute to better access to basic services and protection for affected populations through improved humanitarian coordination and site management under the four pillars of the Global Camp Coordination and Camp

Funding Required
\$2,000,000

Funding Confirmed
\$99,859

Management (CCCM) framework 2021-2023 Cluster strategy by:

- Collecting disaggregated population statistics on IDPs residing in displacement sites, including camps and settlements to support the Site Management Working Group and inform community participation activities.
- Attending regular coordination and information management activities, with humanitarian actors and government officials to manage displacement sites.
- Supporting planning, development, maintenance, upgrades, or the re-planning and re-organizing of crowded IDP gathering sites to increase the privacy and dignity of displaced populations, including installation of communal facilities, fire safety, infection prevention and control (IPC), and other protection measures to improve the wellbeing of site residents and ensure equitable access to humanitarian assistance and participation mechanisms.
- Contributing to quarterly profiles that identify whether service provision at target sites meet the criteria for humanitarian standards including SPHERE.
- Promoting community participation and self-governance, including supporting displacement-affected communities' involvement in decision-making, and setting up a Complaints Feedback Mechanism (CFM) as an Accountability to Affected Populations (AAP) channel for displaced populations to provide feedback and complaints on services they receive as well as any Sexual Exploitation and Abuse (SEA) concerns.



HUMANITARIAN BORDER MANAGEMENT AND SERVICES FOR CITIZENS ABROAD

People Targeted: 1,340,000 IDPs, refugees, returnees, and crisis-affected communities. **Entities Targeted:** Humanitarian Aid Commission (HAC), local administrative authority. Shelter and non-food items interventions will improve living conditions for vulnerable populations, targeting camps and communities with high rates of displacement or contribute to the safe return or relocation of vulnerable groups by:

Funding Required
\$4,000,000



- Using information provided through the Displacement Tracking Matrix (DTM) and conducting specific shelter and non-food item surveys and needs assessments to identify and prioritize the most vulnerable households and individuals including people with specific needs (PWSN) e.g., women, children, the elderly, and disabled people to provide assistance in line with their needs.
- Procuring, prepositioning, and distributing: (i) non-food items (NFI) kits; (ii) emergency shelters (ES) kits in line with sector standards with locally acceptable and environmentally friendly materials; (iii) shelter repair tools and kits; (iv) tents; (v) communal shelters; (vi) locally sourced and environmentally friendly materials for the construction of durable shelters, which are culturally acceptable and appropriate for the climate. The kit contents will be coordinated with the emergency shelter and non-food items (ES/NFI) sector and adapted to the needs identified and context for each region. ES/NFIs assistance can be provided using either in-kind, voucher, or cash modalities including cash or vouchers for rent.
- Providing training on assembly and maintenance techniques for emergency shelters for beneficiary households and local partners to ensure that structures are properly assembled.
- Contracting service providers and providing cash or incentives for skilled laborers to construct durable shelters.
- Distributing information, education, and communication (IEC) materials as needed, and conducting information sessions for vulnerable households to promote proper use, handling, and storage of NFIs to ensure longevity of the items and secure shelters especially against flood and fire hazards.
- Establish AAP systems, including feedback and complaint mechanisms, to ensure safe access to services and post distribution monitoring missions to determine beneficiaries satisfaction with assistance provided.



SHELTER AND SETTLEMENTS

People Targeted: 250,000 IDPs, refugees, returnees, and crisis-affected communities.

Funding Required
\$95,000,000

Entities Targeted: Humanitarian Aid Commission (HAC), local administrative authority. Shelter and non-food items interventions will improve living conditions for vulnerable populations, targeting camps and communities with high rates of displacement or contribute to the safe return or relocation of vulnerable groups by:

- Using information provided through the Displacement Tracking Matrix (DTM) and conducting specific shelter and non-food item surveys and needs assessments to identify and prioritize the most vulnerable households and individuals including people with specific needs (PWSN) e.g., women, children, the elderly, and disabled people to provide assistance in line with their needs.
- Procuring, prepositioning, and distributing: (i) non-food items (NFI) kits; (ii) emergency shelters (ES) kits in line with sector standards with locally acceptable and environmentally friendly materials; (iii) shelter repair tools and kits; (iv) locally sourced and environmentally friendly materials for the construction of durable shelters, which are culturally acceptable and appropriate for the climate. The kit contents will be coordinated with the emergency shelter and non-food items (ES/NFI) sector and adapted to the needs identified and context for each region. ES/NFI assistance can be provided using either in-kind, voucher, or cash modalities.
- Providing training on assembly and maintenance techniques for emergency shelters for beneficiary households and local partners to ensure that structures are properly assembled.
- Contracting service providers and providing cash or incentives for skilled laborers to construct durable shelters.
- Distributing information, education, and communication (IEC) materials as needed, and conducting information sessions for vulnerable households to promote proper use, handling, and storage of NFIs to ensure longevity of the items and secure shelters especially against flood and fire hazards.

Funding Confirmed

\$28,218,802

29%

71%



PROVISION OF WATER, SANITATION AND HYGIENE IN EMERGENCIES

People Targeted: 1,220,000 IDPs, refugees, returnees, and crisis-affected communities. **Entities Targeted:** Ministry of Irrigation and Water Resources, Water and Environmental Sanitation (WES). Life-saving assistance will be provided to people newly displaced by conflict and natural hazards using early recovery approaches to improve access to water, sanitation, and hygiene (WASH) services including:

- Conducting WASH assessments such as knowledge, attitude, and practice (KAP) surveys to identify accessibility to potable water points and understand sanitation and hygiene practices, risks, and safety concerns to inform WASH programming. KAP surveys will ensure to include groups mainly responsible for collecting water, as well as people with specific needs (PWSN), underrepresented groups such as people with disabilities, women, and girls.
- Drilling new boreholes, extending water networks, installing/ rehabilitating hand pumps, emergency bladders and water yards and providing water trucking in emergencies in the absence of water sources to increase water quantity to SPHERE standard of 7.5 - 15 litres per person per day (l/p/d).
- Monitoring ground water levels using data loggers to ensure water table sustainability.
- Providing sustainable and environmentally friendly power sources such as solar technology inclusive of operation and maintenance costs for water points and biogas for alternative fuel sources.
- Constructing additional gender, age, and disability sensitive latrines with handwashing facilities no more than 50 meters from each latrine in line with SPHERE standards and rehabilitating and maintaining sanitation facilities to prevent groundwater contamination and improve hygienic practices during emergencies.
- Launching hygiene promotion campaigns through risk communication and community engagement (RCCE) to raise awareness of improved hygiene practices in coordination with the local authorities and communities inclusive of PWSN and underrepresented groups.
- Supporting communities to develop infection prevention and control (IPC)

Funding Required

\$90,000,000

Funding Confirmed

\$3,607,901

4%

96%



measures using WASH strategies to manage disease outbreaks such as COVID-19, cholera, and Hepatitis E.

- Providing guidance and tools for solid waste management protocols such as garbage collection and disposal to prevent environmental pollution.
- Procuring, prepositioning, and distributing:
 1. WASH items such as soap, jerrycans, and culturally appropriate hygiene kits inclusive of menstrual hygiene management (MHM) items chosen in consultation with local communities.
 2. Water filters, water purification tabs, and chlorine for vulnerable households and technicians and providing training on the correct usage and handling of these water treatment items to support water quality control practices and improve access to clean water.
 3. Spare parts and tools for maintenance and rehabilitation of WASH facilities.
- Training both female and male community members as technicians and mechanics to operate, maintain, and repair water points.
- Establishing WASH management committees to collect tariffs from community members to maintain facilities and develop contingency plans for management of WASH facilities, including operation and maintenance (O&M) guidelines in line with similarly successful mechanisms.
- Establish AAP systems, including feedback and complaint mechanisms, to ensure safe access to services and post distribution monitoring and after action missions to determine beneficiaries satisfaction with assistance provided.



DIRECT HEALTH SUPPORT

People Targeted: 820,000 IDPs, refugees, returnees, internal and international migrants, host communities, and crisis-affected communities. **Entities**

Targeted: Ministry of Health (MoH), international and national NGOs, medical students' international network in Sudan (Med SIN-Sudan). To reduce mortality, morbidity, and alleviate the suffering of crisis-affected individuals and host communities by ensuring access to and availability of life-saving health care and nutrition services through:

- Rehabilitating primary health-care facilities (PHCs) and providing mobile clinic services to support inpatient and outpatient care.
- Providing life-saving medicine, medical equipment and supplies to support the continuity of the basic package of primary health care services (BPPHS).
- Providing operational support for the target health facilities and mobile teams to deliver the minimum BPPHS including but not limited to:
 1. Conducting outpatient consultations and treatment for acute and chronic non-communicable diseases such as diabetes and communicable diseases such as HIV and tuberculosis (TB), including testing, identification, counselling, referral for treatment and follow-up.
 2. Supporting essential maternal and child health care services including screening, diagnosis, and management of malnutrition focusing on the specific needs of children under the age of five and pregnant and lactating women. This will include ante- and post-natal care, deliveries by skilled attendants, sexual and reproductive health information sessions as well as nutrition counselling such as infant and young child feeding in emergencies (IYCF-E), growth monitoring, middle and upper arm circumference (MUAC) screening, provision of vitamin A, and deworming.
 3. Facilitating the provision of vaccination to children under the age of five in collaboration with other stakeholders such as UNICEF, GAVI, and MoH, with a special focus on zero dose children among IDPs, refugees, returnees, and other vulnerable crisis-affected communities.
 4. Facilitating referrals for specialized medical assistance to secondary and tertiary facilities for continuity of care.
 5. Facilitating waste management and vector control at health facilities and in

Funding Required

\$25,000,000

Funding Confirmed

\$4,673,774

18%

82%



communities to reduce risks of disease outbreaks and improve environmental health in coordination with WASH and Health Sectors including strengthening of IPC through provision of supplies and training health staff on IPC protocols, medical waste management, and supportive supervision.

- Supporting early warning alert and response systems (EWARS) for improved surveillance of disease outbreaks such as malaria or cholera.
- Providing capacity building trainings and refresher courses for health-care providers and community volunteers such as community health workers (CHWs) and community midwives (CMs). The training will include public health surveillance, case management of disease outbreaks, health information management, IPC, reproductive health, IYCF-E, community management of acute malnutrition (CMAM), referrals for the survivors of gender-based violence (GBV), prevention of sexual exploitation and abuse (PSEA), disability inclusion, and overall promotion of better health and nutrition practices in the community.
- Providing risk communication and community engagement (RCCE) activities for effective community mobilization on health education, especially during emergencies (i.e., outbreaks).
- Supporting communities to establish community health management committees (CHMC) to engage the affected community to identify new public health threats, monitor ongoing health interventions, and provide feedback to IOM, partners, local health providers, and MoH.



MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT IN HUMANITARIAN RESPONSE

People Targeted: 150,000 IDPs, refugees, returnees, internal and international migrants, host communities, and crisis-affected communities. **Entities**

Targeted: Ministry of Health (MoH), international and national NGOs, Med SIN-Sudan. To promote, protect, and support the psychosocial well-being and mental health of crisis-affected populations, IOM is planning to provide services aimed at reducing psychosocial vulnerabilities during emergencies and support individuals' and communities' ability to cope by:

- Providing support for doctors trained for the WHO mental health gap action programme (MHGap) to ensure access to treatment providers and programmes for affected populations.
- Providing capacity building for frontline health-care workers including counsellors, psychiatrists, community volunteers, and community leaders on psychological first aid (PFA) and basic mental health and psychosocial support (MHPSS) to support their local crisis-affected communities.
- Promoting community-based psychosocial support provided by trained community health workers and psychosocial mobile teams (PMTs) during emergencies.
- Referral of persons with severe mental disorders to specialized mental health care facilities during and after emergencies.

Funding Required
\$1,500,000



PROTECTION

People Targeted: 200,000 IDPs, refugees, returnees, internal and international migrants, and other vulnerable crisis-affected communities and government officials receiving capacity building training. **Entities Targeted:** Federal and State Ministries of Social Development, National and State Councils for Child Welfare, Ministry of Labour, Ministry of Foreign Affairs, Ministry of Interior, HAC, Commissioner of Refugees (CoR). IOM Sudan will incorporate the four protection mainstreaming principles, which are fundamental to crises and post crisis responses, in all activities implemented: (1) prioritize safety and dignity and avoid causing harm, (2) secure meaningful access to support and services, (3) ensure accountability to affected populations, and (4) ensure participation and empowerment of beneficiaries. Protection efforts will focus on the following activities:

- Ensuring that protection is mainstreamed in all of IOM's interventions through training of staff and partners on protection principles, PSEA, diversity and

Funding Required
\$15,000,000

Funding Confirmed
\$5,493,620

36% **64%**



inclusion, review of tools used for programming and operation, reinforcing access to community-based complaint mechanisms (CBCM), and establishing or reinforcing safeguarding measures including Child Safeguarding Policy.

- Providing technical support and tools to the Government of Sudan to ensure the effective management of migration and protection of all migrants including increasing the local government's capacity to develop new policies, frameworks, and advocacy for internal and international migrants to ensure that they are properly registered and have access to services.
- Monitoring the protection situation in concerned locations and collecting relevant information on protection needs, gaps, and trends for advocacy and assistance purposes in coordination with the Protection Sector, GBV working group and the IOM Displacement Tracking Matrix team.
- Providing capacity building and awareness raising for international migrant communities, local communities, and youth in crisis-affected communities on: (i) risks of irregular migration including migrant smuggling, human trafficking, and available community-based protection mechanisms and resources, (ii) the importance of peacebuilding, coexistence, informal dispute resolution, and crisis mediation.
- Providing direct assistance services such as medical assistance, psychosocial support (PSS) and counselling, food and non-food items, hygiene kits including menstrual hygiene management (MHM) items, personal protective equipment (PPE), and public health awareness and prevention messaging in coordination with Protection, WASH, and Health focal points, using in-kind, cash and voucher modalities. Assistance will be provided to international migrants in vulnerable situations including migrant children living on the streets or studying in religious schools through the Migrant Resource and Response Centre (MRRC) in Khartoum and Migrant Resource Centres (MRCs) in Gedaref and Kassala, or through IOM's sub-offices in Darfur in coordination with local partners and service providers.
- Providing direct assistance through mobile teams to support international migrants with specific vulnerabilities who reside in community safe houses, are in administrative detention or are otherwise unable to reach MRRC, MRCs, or service providers.
- Facilitating referral pathways for critical needs and essential services that are provided including ES/NFI, protection, health and MHPSS (in line with the IOM Manual on Community-Based Mental Health and Psychosocial Support in Emergencies and Displacement).
- Providing capacity building for local partners including civil society, health and social welfare staff, psychologists, psychiatrists, immigration officers and other frontline law enforcement officers on identification of vulnerable populations, direct assistance, PSEA, and referral to service providers, especially provision of information on access to essential services and counselling for survivors of trauma including victims of trafficking, smuggled migrants, unaccompanied minors, with a special focus on children, youth, women, the elderly, and people with disabilities considering their additional vulnerabilities and needs.
- Coordinating with Protection Sector partners managing GBV cases to ensure that GBV referral pathways are up to date and staff are trained on how to provide support in case of GBV disclosure. This includes establishing safe platforms for engagement for women and girls to access information related to women's empowerment and available protection services including services for survivors of GBV.



MOVEMENT ASSISTANCE

People Targeted: 17,000 internal or international migrants including third country nationals (TCNs). **Entities Targeted:** National airlines and international airlines with agreements with IOM, ground transport companies, participating host governments (Embassies and Consulates), Government of Sudan (Ministries of Foreign Affairs, Interior and Health), service providers for catering and accommodation. To provide humane, dignified, and voluntary movement support to vulnerable migrants in need of urgent movement assistance, activities will include:

Funding Required
\$28,000,000

Funding Confirmed
\$647,410

2%

98%

- Facilitating outbound and inbound travel and onward transportation by air, land, or sea as appropriate; as well as accommodation, food, and cash assistance to internal and international migrants including TCNs stranded by crises and IDPs, returnees, and refugees.
- Conducting pre-departure briefings and information sessions on processes and cultural orientation where needed.
- Providing operational and medical escorts and extra support to unaccompanied migrant children, victims of trafficking, and victims of other abuses due to their additional vulnerabilities and needs.
- Coordinating associated health checks such as pre-departure medical screening and fit to travel assessments in collaboration with the Migration Health Division.
- Providing support, liaison, and coordination services for both the host country and country of origin embassies or consulates to organize reception assistance and appropriate case management and referral services including in-kind or financial support, where applicable.



Border management information system training for Ministry of Interior Passport and Immigration Directorate Staff; © IOM Sudan 2022.

ADDRESS THE DRIVERS AND LONGER-TERM IMPACTS OF CRISES AND DISPLACEMENT, SUPPORTING DURABLE SOLUTIONS AND INVESTING IN CRISIS PREVENTION

Funding Required
\$178,500,000

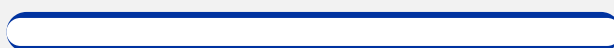
People Targeted
861,200

People Targeted Description

IOM foresees that community stabilization, peacebuilding, and durable solutions integrated with risk reduction strategies will be needed for the following population groups:

1. IDPs in protracted displacement situations who continue to suffer from poor living conditions and lack of support.
2. IDPs, refugees, returnees, and other vulnerable internal migrants (including former fighters) facing challenging conditions for return and (re)integration such as residual insecurity, damage to property and public infrastructure, limited access to basic services and livelihood opportunities, and fractured social relations.
3. Underserved host communities in areas of displacement and return where services are lacking, overstretched, and/or inter/intra communal conflict persists.
4. Stakeholders including government counterparts, CSOs and CBOs in need of capacity building to better address longer-term impacts of crises on affected and vulnerable communities.

4%
Funding Confirmed



96%
Funding Gap



PROVISION OF WATER, SANITATION AND HYGIENE IN TRANSITIONAL AND POST-CRISIS SITUATIONS

People Targeted: 350,000 crisis-affected people including IDPs in a protracted displacement situations, returnees at risk of displacement, and underserved home and host communities. **Entities Targeted:** Ministry of Irrigation and Water Resources, Water and Environmental Sanitation (WES). IOM aims to provide water, sanitation, and hygiene (WASH) services in transitional and post-crisis situations to support and sustainably respond to the needs of underserved and at-risk communities and improve their capacity and resilience to future shocks such as disease outbreaks and malnutrition by addressing the risks related to faecal-oral transmission and water contamination through improved and sustained access to WASH services by:

Funding Required
\$55,000,000



- Conducting WASH assessments such as knowledge, attitude, and practice (KAP) surveys to identify accessibility to potable water points and understand sanitation and hygiene practices, risks, and safety concerns to inform WASH programming. KAP surveys will ensure to include questions for underrepresented groups and PWSN, such as people with disabilities, women, and girls.
- Increasing access to safe and clean water by drilling, constructing, and/or rehabilitating water points including ground water monitoring, and providing water treatment as well as prepositioning of spare parts and tools to maintain water points; ensuring that communities have better livelihood opportunities by providing them with sufficient water for agriculture and livestock management – which are primary sources of income in majority of the target locations.
- Using community-led approaches to total sanitation (CLTS) to engage the community in designing the responses and supporting construction of more gender, age, and disability sensitive latrines including maintenance and rehabilitation of the sanitation facilities to prevent groundwater contamination, reduce open defecation, and improve household and community hygiene practices.
- Launching hygiene promotion campaigns identified through participatory assessments to positively encourage a change in attitude and behaviour towards improved hygiene practices including proper storage of water, safer methods of food preparation, regular hand washing with soap, and other mitigation measures to reduce risks of undernutrition linked to poor hygiene and faecal-oral transmission of infections.
- Building the capacity of community members to establish WASH management committees, consisting of both men and women, to collect tariffs from community members to support the operation, management, and maintenance of facilities and conduct community-led sanitation and hygiene awareness campaigns for public health and environmental preservation.
- Actively working with government and national water authorities to build institutional capacity including structures, coordination, and management mechanisms inclusive of and for regular operation and management (O&M) activities including human resources, supplies and financial resources to support local communities with sustainable WASH services.



COMMUNITY STABILIZATION

People Targeted: 200,000 IDPs, refugees, returnees, and home and host communities with special focus on underrepresented groups such as women and youth. **Entities Targeted:** 10 NGOs, CSOs, CBOs. Community engagement and stabilization programming aims to address the drivers and effects of forced displacement and irregular migration related to natural hazards and man-made crises. This includes the provision of essential services, the promotion of social cohesion and community management of resources, capacity building and supporting inclusive economic recovery through livelihood opportunities. To (re)establish stability and security, address drivers of further forced displacement or migration, restore trust amongst community members, vulnerable populations and local authorities, activities will include:

Funding Required
\$45,000,000

Funding Confirmed
\$6,816,675



- Promoting participatory decision-making at the community level through IOM's

Community Based Planning methodology and designing project interventions based on community priorities to build social cohesion around common goals.

- Providing basic services and infrastructure such as community-owned buildings (schools, community learning centres, recreational facilities) as well as community-based programs (farming and small business cooperatives) to promote social cohesion and address grievances around strained and overused resources which are a source of inter or intra community conflict.
- Building community capacity for collective, equitable, and sustainable management of natural resources including integrated water resource management (IWRM) and basic services.
- Facilitating complementary capacity building of communities and authorities on climate-smart agriculture, drought-resistant agricultural techniques, and livestock management, to manage food insecurity, secure livelihoods, and reduce tensions over limited resources.
- Facilitating market-oriented vocational and livelihood training and supporting inclusive skills development for income-generating activities in agriculture, livestock, trade, animal health and other livelihood opportunities specifically targeting vulnerable members of the community.
- Distributing in-kind income generating assets, providing conditional cash or voucher assistance, or supporting access to financial institutions based on community-identified priorities and available value chains, in coordination with participating local institutions and associations.



DURABLE SOLUTIONS

People Targeted: 250,000 IDPs, returnees, refugees and home and host community members. **Entities Targeted:** 5 NGOs, CSOs, CBOs. Progression towards durable solutions will be guided by IOM's Progressive Resolution of Displacement Situations Framework (PRDS), which is in line with the Inter-Agency Standing Committee (IASC) Framework on Durable Solutions for IDPs, to gradually resolve protracted displacement in complex crisis situations. IOM Sudan aims to support IDPs to voluntarily return, in safety, and with dignity to their homes or places of habitual residence, or to resettle in another part of the country. IOM will work closely with partners and local authorities by strengthening the capacity of individuals, households, and communities to better prevent, absorb, and recover positively and effectively to future risks by contributing towards rapid recovery, self-reliance, and promoting local integration and (re)integration in safer and more secure living conditions with better access to resources and opportunities by:

- Designing interventions that contribute to the material and social living conditions key to safe and voluntary integration, return or resettlement, using Displacement Tracking Matrix data.
- Facilitating community-led workshops and initiatives to triangulate the data, understand direct needs, and develop community action plans that support displaced people to return, integrate or settle elsewhere in the country by addressing the drivers of displacement and barriers to durable solutions.
- Supporting the establishment of water, waste, natural resource management, and security committees to oversee and monitor implementation of community action plans, contribute to the selection of the activities to be implemented in areas of intervention, and identify follow-on or future initiatives.
- Supporting the establishment and strengthening of local protection mechanisms to improve the overall safety and security of areas of return, integration, or settlement.
- Constructing or rehabilitating basic infrastructure and facilities that increase access to an adequate standard of living, as prioritized by communities, including housing, access to adequate WASH, health, and education facilities.
- Building the capacity of local institutions and communities to support the provision, maintenance, and sustainability of basic services, safety, and security, such as training water technicians, health workers, and teachers in coordination with the relevant ministries.
- Identifying partnership opportunities with the private sector to improve access to diversified and secure livelihoods and supporting small businesses and

Funding Required
\$40,000,000

Funding Confirmed
\$443,496

1% 99%



community or farmers' associations to access additional financial support.

- Develop innovative approaches to increase the transfer of valuable and sustainable skills or knowledge, and resources to Sudan through increased diaspora engagement for more durable solutions.
- Coordinating with stakeholders, including national and local authorities as well as humanitarian and development actors, working together to identify the strategies and activities to assist IDPs in this process, and set criteria that will help to determine to what extent a durable solution has been achieved.



PEACEBUILDING AND PEACE PRESERVATION

People Targeted: 100,000 people from pastoralist or sedentary communities along migratory routes, in conflict affected locations including home and host communities with inter and intra communal disputes, with a focus on the role of women, youth, and former combatants/ fighters in peacebuilding and peace preservation activities.

Entities Targeted: 7 CSOs and CBOs, relevant line ministries and institutions, Sudan Disarmament, Demobilization and Reintegration Commission (SDDRC). IOM will contribute towards reducing risks of conflict by promoting social cohesion and by working directly with selected communities to identify root causes of tension and conflict, while strengthening local peacebuilding initiatives and conflict resolution mechanisms, and improving human security by addressing the need for immediate security, longer-term recovery, and delivering appropriate peace dividends through:

- Conducting analyses on conflict sensitivities and context in the target areas including using Transhumance Tracking Tool data to develop an early warning system that identifies conflict hotspots along migratory routes.
- Supporting reconciliation efforts and strengthening conflict resolution mechanisms at the national and community level and improving opportunities for women and youth representation in conflict resolution mechanisms.
- Supporting facilitated dialogues or workshops with diverse groups to contribute towards restoring trust and mitigating future violent conflict based on analysis and in communication with affected communities, where appropriate.
- Increasing community capacities to engage local actors in peacebuilding activities including supporting community-based interventions to promote social cohesion, the peace process, and political transition. Specific attention will be dedicated to promoting the role of women and youth in these processes.
- Enhancing traditional conflict resolution mechanisms and capacity building for local rural courts/institutions to facilitate regulated access to pastures and resolving land and other issues which cause inter/intra communal conflict.
- Increasing access to water and other basic services for pastoralists and communities along migration corridors as part of conflict mitigation measures or peace dividends. The type and location of the basic service will be chosen in coordination with the target communities and encourage collaborative selection, use, and protection of shared resources.
- Developing integrated resource management systems to promote the coordinated development and management of water, land, and related communal resources, to reduce conflict over natural resources and maximize socio-economic gains without compromising the sustainability of vital ecosystems.
- Improving access to local livelihood opportunities, especially focusing on women and youth, and providing seed funding to community-designed and led social and economic development initiatives to encourage collective action.
- Strengthening local protection mechanisms through capacity building trainings to improve security of target areas and promote trust building and accountability between local authorities and communities they serve.
- Building capacity to respond to the challenges of Disarmament Demobilization and Reintegration (DDR) and work with CBOs and CSOs to understand barriers to reintegration. Coordinating with the local authorities and the SDDRC to provide ex-combatants in need with: (i) Information Counselling and Referral Services (ICRS) support for mental health; (ii) sustainable reintegration grants for ex-combatants for socio-economic activities and other essential basic services; (iii) community initiatives to contribute to post-conflict recovery and build the

Funding Required

\$25,000,000

Funding Confirmed

\$885,725

3%

97%



■ IOM



HEALTH SYSTEM STRENGTHENING

People Targeted: 150,000 health care workers, community health workers, and local officials who will benefit from capacity building and provide direct health services to IDPs, refugees, returnees, internal and international migrants, host communities, and crisis-affected communities. **Entities Targeted:** Ministry of Health (MoH), Ministry of Interior (MoI), National Health Insurance Fund (NHIF), international and national NGOs, Med SIN-Sudan. IOM will contribute to the strengthening of health systems and inclusion of migrants in Sudan through the following interventions and adhere to the 2005 International Health Regulations (IHR), to build resilience of the communities on the border against public health threats by:

Funding Required
\$11,500,000



- Continuously monitoring the needs of migrants through IOM's presence in the field offices, coordination with other stakeholders such as HAC, MoH and or Health and Nutrition Sector, and through Displacement Tracking Matrix data.
- Contribute to relevant national health strategies such as national multi-hazard health emergencies preparedness and response plan in coordination with WHO, FMoH, Health Sector.
- Leading the integration of migration data into national health system whenever possible, such as National Health Information Management System (NHIMS) in collaboration with Federal Ministry of Health (FMoH) and WHO, following the first workshop conducted in July 2022.
- Facilitating the utilization of the national health insurance system to work towards universal health coverage (UHC) for migrants, through advocacy during technical and coordination meetings, and in collaboration with the National Health Insurance Fund (NHIF).
- Strengthening the capacity to provide services for HIV and TB, especially in hard-to-reach areas in collaboration with MoH and other relevant agencies and organizations.
- Strengthening the capacity of authorities and communities along the border to prevent, detect, and respond to health threats within the mobility continuum, under the Health, Border, and Mobility Management (HBMM) Framework. This will include capacity building on public health surveillance and/or strengthening of existing community-based surveillance to allow health care providers and local authorities to address the various challenges that migrants encounter along migratory routes such as a lack of access to primary health care due to distance, mobility, inter-communal tension, and the lack of health and nutrition-related information and awareness raising messages in their languages.
- Empowering and engaging youth in the community on health promotion activities in coordination with medical students' network (Med SIN-Sudan).
- Supporting local NGOs by providing financial and capacity building training to improve localization of interventions at the grassroots level.



MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT IN TRANSITION AND RECOVERY

People Targeted: 100,000 vulnerable community members and 600 community health workers and local officials who will benefit from capacity building training.

Entities Targeted: Ministry of Health (MoH), international and national NGOs, Med SIN-Sudan. IOM will promote and support MHPSS at individual, family, and community level to contribute to wider efforts to strengthen social cohesion, recovery, and crisis prevention through community engagement by:

Funding Required
\$2,000,000



- Training community health workers on the topic of prevention of mental health issues in emergency and post-conflict situations including conflict and gender sensitivities and social dynamics; to address the mental health and psychosocial issues that migrants and host community face during crises.
- Conducting community information sessions, focus group discussions, and workshops on the prevention and treatment of mental health issues by introducing psychosocial education in primary health care, social, educational

and religious settings in post-conflict environments and providing resources and referrals to service providers for both migrant and host communities.

- Conducting psychosocial activities including socio-relational activities, counselling, and referral in vulnerable communities.

STRENGTHEN PREPAREDNESS AND REDUCE DISASTER RISK

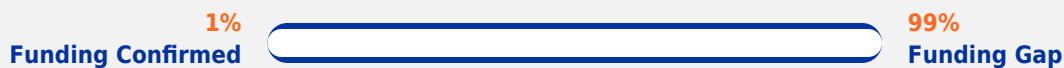
Funding Required

\$58,000,000

People Targeted Description

IOM foresees that emergency preparedness support to reduce disaster risks and build resilience through climate change adaptation will be needed for the following population groups:

1. IDPs, refugees, returnees and vulnerable internal or international migrants exposed to disaster risks that may cause further protracted displacement, secondary displacement, or impede sustainable return.
2. Local communities exposed to multi-hazard risks including natural hazards and health risks, who may otherwise have to leave their homes, because of critical emergencies and limited preventative measures or unavailability of essential services.
3. Stakeholders including government counterparts, CSOs, CBOs, and NGOs in need of capacity building to better assist communities exposed to disaster risks.



DISASTER PREVENTION

People Targeted: 120,000 IDPs, returnees, and at-risk and vulnerable communities prone to risks associated with man-made or natural hazards. **Entities Targeted:** HAC, Civil Defence, Higher Council for Environment and Natural Resources (HCENR), local authorities and communities. IOM aims to develop disaster risk reduction (DRR) strategies and mechanisms to prevent or reduce displacement triggered by natural hazards, environmental degradation, or the adverse effects of climate change, and build the resilience of vulnerable communities to existing and future disaster risks. DRR approaches and interventions will also be used as entry points for wider community stabilization programming by:

- Implementing hazard, community vulnerability, and capacity assessments in high-risk locations to capitalize on local knowledge and ensure the most-needed interventions are prioritized. The assessments will focus on collecting demographic data such as sex, age, disability and other data related to the prevalence and vulnerability of the population to future and existing disaster risks. Data on mobility due to slow on set events will also be collected to inform trends on population movement due to natural events related to hazards and climate change (climate change and migration nexus).
- Building capacity of relevant government institutions and other key stakeholders to develop DRR plans including supporting the use of early warning systems, planned relocation, and expertise on DRR capacity assessment in the framework of Capacity for Disaster Reduction Initiative (CADRI).
- Training local authorities and selected community leaders on DRR to support community early recovery response and raising awareness on disaster risk mitigation measures.
- Establishing community DRR committees with representation from vulnerable groups such as the elderly, women, people with disabilities, with the ability to cascade the awareness-raising campaigns, develop resilience strategies, and contribute to community-based DRR plans such as conducting regular clean-up campaigns and positioning of latrines in areas where collapse is less-likely to

Funding Required
\$10,000,000

Funding Confirmed
\$27,985



reduce the risk of contaminating water sources and preventing environmental pollution in camps, settlements, and host communities.

- Working with Sudanese diaspora and other key stakeholders to mobilize technical expertise and financial resources for the development of DRR programming in coordination with local communities.
- Develop community action plans to prevent disaster risks (particularly floods and droughts) and adapt to climate change. Plans can include embankment, building back safer (BBS) measures, construction and rehabilitation of critical climate resilient infrastructure, applying nature-based solution (NBS), and increasing water harvesting especially in communities where water scarcity and conflict over natural resources continue to persist.
- Advocating for climate change and DRR related policy changes or additions at state and national level.



EMERGENCY PREPAREDNESS

People Targeted: 300,040 IDPs, returnees, and at-risk and vulnerable communities prone to risks associated with man-made or natural hazards. **Entities Targeted:** 5 Government counterparts and local communities. IOM will develop capacities of government and non-governmental partners to improve humanitarian response and provide services that are scalable and support community emergency preparedness and resilience by:

- Conducting comprehensive community assessments including community hazard and resource mapping which identify gaps in emergency preparedness services and response including assessment of warehouse capacity, capability to preposition life-saving items, and the level of accessibility of these items at state and community level.
- Building the capacity of national and state level counterparts on emergency preparedness and providing support to sector leads and other stakeholders on the development of contingency and action plans for local communities. Capacity building will also include simulation exercises (SIMEX) to increase state and community level actors' preparedness to respond to crisis including sensitization workshops on guidelines for Mass Evacuations during Natural Disasters (MEND).
- Developing mechanisms and Standard Operation Procedures (SOPs) on topics such as warehousing, stock management, and supply chain management.
- Procuring, prepositioning, and distributing key supplies and items to rapidly respond to emergencies such as floods and mass displacement.
- Conducting research to implement risk-informed approaches that integrate prevention, emergency preparedness, and response including government planning and promoting innovative solutions for provision and management of basics services before and during crises.
- Seek to establish humanitarian hubs at border areas in coordination with other UN agencies and relevant government counterparts to assist internal and cross-border migrants during crises.

Funding Required
\$47,000,000

Funding Confirmed
\$1,076,601

2% 98%



HEALTH COMPONENTS OF PREPAREDNESS AND RISK REDUCTION

People Targeted: 1,000 health staff in local facilities and community health workers will benefit from capacity building. The trained workers and pre-positioning of items will benefit IDPs, refugees, returnees, and other internal and international migrants, host communities, and crisis-affected communities. **Entities Targeted:** Ministry of Health, Ministry of Interior and officials at points of entry (PoEs), Med SIN-Sudan. IOM supports local authorities and community and frontline health-care workers at designated health-care facilities and PoEs including airports, ports, ground crossings, and communities along migratory routes and border towns, by promoting the obligations and recommendations outlined in the International Health Regulations (2005). IOM will also support emergency preparedness and response to natural and man-made hazard both at health facilities and at the community level by:

Funding Required
\$1,000,000



- Building the capacity of local authorities at PoEs, frontline health-care workers at health care facilities and community level on case management, infection prevention and control (IPC), and referral of cases of outbreak-prone diseases like cholera, acute watery diarrhoea, or malaria.
- Strengthening of health information management systems in the health facilities to ensure early detection and response to public health threats. Supporting health surveillance and disease screening at PoEs by developing gender sensitive SoPs for disease surveillance and IPC. For example, case definition or referral protocols to respond to public health emergencies.
- Increasing access to rehabilitated health facilities with solar power including operation and maintenance costs and safe access to water and hygiene supplies including hand washing facilities, soap, and chlorine for cleaning and disinfection.
- Procuring, prepositioning and distribution of essential medical items in strategic locations to respond to emergencies.
- Strengthening community-based disease surveillance and health security preparedness at PoEs by supporting cross-border health need assessments, providing technical support to taskforces, and organization of cross-border migration health meetings, workshops, and trainings on border health issues especially in areas where frequent human mobility is observed, such as the borders between the states, routes of seasonal migration, and communities hosting refugees or IDPs.
- Applying the 'One health' concept to emergency preparedness, to achieve more comprehensive and efficient planning of health responses, including strengthening of the community-based surveillance that monitors animal health.
- Providing health promotion and risk communication and community engagement (RCCE) support as part of awareness raising and information sharing processes including messaging on GBV risks and referral pathways during crises in coordination with Health, Nutrition, and Protection Sector leads and partners.

CONTRIBUTE TO AN EVIDENCE-BASED AND EFFICIENT CRISIS RESPONSE SYSTEM

Funding Required

\$16,500,000

People Targeted Description

IOM foresees supporting the following stakeholders by contributing to an evidence based and efficient crisis response:

1. Government counterparts, UN agencies, NGOs in need of humanitarian support services including information, resources, and capacity building to assist crisis-affected communities.

43%
Funding Confirmed



57%
Funding Gap



DISPLACEMENT TRACKING

People Targeted: Before the conflict of April 2023 IOM had identified 3,820,772 IDPs, 1,302,938 permanent returnees from internal displacement, 32,221 seasonal returnees, and 309,724 returnees from abroad and 559,000 foreign nationals during Mobility Tracking Round Six. According to DTM Situation Report 18, as of 22 August 2023, there are 3,601,593 IDPs and a further 1,040,883 people that have crossed borders into neighbouring countries due to the ongoing military conflict and subsequent humanitarian crisis that will receive support based on the information provided on their needs, vulnerabilities, and gaps in services. **Entities Targeted:** Directly reaching over 1,200 active subscribers and 60 entities on the Displacement Tracking Matrix (DTM) information product mailing list comprised of government counterparts, UN agencies, INGOs/NGOs, and other stakeholders, for more credible, comprehensive, and evidence-based situational analysis. IOM will use DTM to regularly capture, process, and provide

Funding Required
\$6,500,000

Funding Confirmed
\$1,147,049

17% **83%**



humanitarian actors with multi-layered information products, including sex and age disaggregated data, and the locations, composition, vulnerabilities, and needs of displaced and mobile populations to deliver more targeted humanitarian assistance and response, as well as produce an evidence base for programme strategy, design, and operational planning across the country. The following methodologies will be used in Sudan in 2023 to provide critical information management services: IOM will use DTM to regularly capture, process, and provide humanitarian actors with multi-layered information products, including sex and age disaggregated data, and the locations, composition, vulnerabilities, and needs of displaced and mobile populations to deliver more targeted humanitarian assistance and response, as well as produce an evidence base for programme strategy, design, and operational planning across the country. The following methodologies will be used in Sudan in 2023 to provide critical information management services:



- **Mobility Tracking (MT):** utilizing key informant networks to systematically track mobility in locations of interest over consistent data collection rounds. Enumerators will revisit each location and interview key informants to update and verify population presence on a quarterly basis.
- **Early Warning Flash Alerts and Emergency Event Tracking (EET):** deploying and tracking sudden displacements and population movements, providing more frequent updates on the scale of displacement that occurs between MT rounds, and quantify the number of affected populations. Early warning flash alerts will be disseminated within the first 24-48 hours of incidents to notify partners of sudden events where EET activities will subsequently take place. EET is activated within 72-96 hours of an incident induced by conflict or natural hazards to assist in rapid response planning.
- **Situation Assessments:** supplementing EET by collecting data on populations in non-emergency settings or protracted situations caused by conflict or natural hazards, utilizing a broad network of key informants to provide an overview of the context and inform response planning.
- **Multi Sectoral Needs Assessment (MSNA):** providing an overview of the sectoral needs of affected populations in localities hosting displaced populations to inform the Humanitarian Needs Overview and the Humanitarian Response Plan, as well as partners, by identifying the needs and underrepresentation of vulnerable populations and addressing information gaps in services. MSNA is critical for improving the coordination and collaboration between humanitarian partners to ensure more effective and targeted humanitarian response planning across Sudan.
- **Integrated Local Assessment (ILA):** providing a simultaneous and rigorous in-depth insight of displaced and returning populations in Sudan. Placing a special focus on profiling the locations in which these groups live including the demographic composition of locations, state of infrastructure, services, security, social cohesion, and movement intentions for IDPs and returnees to inform response planning.
- **Registration Activities:** providing rapid emergency and biometric registrations and data verifications in line with IOM Data Protection Principles with the priority of meeting immediate information needs to guide direct assistance to vulnerable people – implemented in response to government or humanitarian partner requests. Registration data is used for beneficiary selection, vulnerability assessment, and programming.
- **Flow Monitoring Registry (FMR):** capturing movements of populations at key transit points and borders to quantify and provide regular updates on internal and cross-border flows.
- **Return Index (RI):** to measure the severity of conditions in locations of return based on indicators such as livelihoods, access to basic services, social cohesion, and safety perceptions. This tool will determine the severity level of living conditions of returnees to allow partners to better strategize for resources and operations in vulnerable areas or to mitigate risks of forced migration (push or pull factors) for a more specific set of coherent interventions that bridge humanitarian, recovery, and community stabilization needs.
- **Transhumance Tracking Tool (TTT):** Mapping and understanding pastoralist seasonal migratory routes through the TTT with an in-depth analysis of context, inter-tribal dynamics, and socio-economic interdependencies including conflict

analyses from the displacement and human mobility perspective to inform programming and assistance for pastoralist and sedentary communities along migratory corridors.

- IOM will ensure equal representation of males and females within the data collection teams as well as key informant networks to address gender sensitivities during the data collection process.
- Training will be provided to data collection teams on data protection and confidentiality as well as prevention of sexual exploitation and abuse (PSEA) and how to manage and safely and ethically disclose and refer gender-based violence (GBV) cases.
- IOM will strengthen accountability to affected populations (AAP) by leveraging information received from the community to inform planning and programming and coordinating activities with the designated community representatives.



SUPPORT SERVICES FOR RESPONSE ACTORS

People Targeted: Indirectly reaching over 600,000 IDPs and other affected populations that will receive services based on support provided to targeted International Non-governmental Organizations (INGOs) and National Non-governmental Organizations (NNGOs). **Entities Targeted:** Directly supporting 30 INGOs/NNGOs. To build the capacity of partners to provide life-saving humanitarian assistance, IOM will support IN/NNGOs by:

- Managing a flexible, efficient, and needs based fund disbursement mechanism - Rapid Response Fund (RRF) - to further support humanitarian actors who are assisting people affected by natural and/or man-made hazards in Sudan in an effective and timely manner.
- Providing capacity building training on proposal development and grant writing for NGOs under the following sectors of emergency response: shelter and settlements, non-food items, water sanitation and hygiene, protection, health, food security and livelihoods, and humanitarian coordination assistance.
- Providing capacity building training on humanitarian principles such as do-no-harm, PSEA, and AAP and narrative and financial reporting in line with donor guidelines to ensure people-centred, rights-based, and consistent implementation across the funding mechanism.
- Conducting monitoring and evaluation visits to implementing partner project sites to ensure that funds are used effectively by IN/NNGOs, outputs and outcomes are achieved, successes and lessons learnt are properly documented and reported and adjustments are made for future programme implementation.

Funding Required
\$10,000,000

Funding Confirmed
\$6,000,287

60% 40%

