

# **Sudan Emergency - Critical Life-saving Needs**

**September – December 2025** 





# **Overview**

The Sudan crisis has triggered the largest displacement and protection emergency in the world today. Over 14 million people have been forced to flee since April 2023, with 12 million remaining displaced. As of mid-2025, some 4 million refugees, asylumseekers and returnees have crossed borders into the Central African Republic (CAR), Chad, Egypt, Ethiopia, Libya, South Sudan, and Uganda. This is not only a Sudanese crisis; it is a regional emergency with global implications. The ripple effects are being felt across an already fragile region, placing enormous strain on host communities, local services, and humanitarian operations, while needs continue to grow.

The emergency requires a much stronger international response, including renewed efforts to support peace and practical solutions for people on the move. At the

same time, funding shortfalls are severely constraining the ability of humanitarian actors to respond effectively.

Within the overall needs of \$1.1 billion outlined in the <u>Sudan Situation Appeal 2025</u>, **UNHCR**, the **UN**Refugee Agency, is urgently seeking an immediate injection of \$106.5 million in flexible funding to sustain the response in Sudan and host countries between September and the end of year. These resources will help prevent additional loss of life and support the safety and dignity of individuals who have already endured incredible trauma. Whilst prioritizing is extremely difficult in a context where many people lack the basics of survival, UNHCR has nevertheless identified critical areas where additional resources would be life-saving.

# **Situation update**

Sudan continues to face a humanitarian crisis of epic proportions. Attacks on displacement camps, hospitals, and critical infrastructure, as well as looting, torture, and widespread conflict-related sexual violence. have displaced more than 14 million people since April 2023. Today 12 million people remain displaced from the conflict. Protection risks are acute, while humanitarian access remains critically constrained in some of the most affected parts of the country, particularly in North Darfur, South Kordofan, and West Kordofan. At the same time, the humanitarian landscape remains complex. Since the start of 2025, the number of returns has increased dramatically to Khartoum, Al Jazeera and Sennar amidst devastation, while the situation remains extremely dire in Darfur and Kordofan. The strain of new and secondary displacements is overwhelming basic services.

Return movements to pockets of relative safety in Sudan mark a hopeful but fragile shift, as some families return home, determined to rebuild their lives even after months of relentless conflict have devastated infrastructure and basic services. The scale of returns mainly from Egypt and South Sudan, with smaller numbers from Libya, are also a warning

sign of rising pressure and shrinking options for the Sudanese people. Significant numbers of of IDPs and refugees are returning to adverse conditions that could potentially lead to secondary displacement in and out of Sudan.

Humanitarian needs in countries of asylum are mounting, yet funding has not kept pace. Critical protection, health, and education services are being suspended or drastically scaled back, placing millions at risk and eroding UNHCR and partners' ability to provide even the basics of a dignified response. In Egypt, the provision of cash for food, rent and shelter to refugees and asylum-seekers will reach fewer than a quarter of beneficiary households in September-October compared to January-February, and risk imminent suspension from November. Without more funding, relocation of refuges away from the extremely congested transit locations in Chad and South Sudan will not continue, risking outbreaks of disease - such as the current cholera epidemic in Chad - and more exposure to protection risks like genderbased violence. Programmes focusing on community resilience and long-term inclusion are also under threat from chronic underfunding.



# **Urgent needs within UNHCR's Sudan Situation Appeal**

# Sudan - \$10M

# Access and Documentation

Critical gaps remain related to key protection activities, including adequate reception conditions for 17,000 new arrivals and timely registration. The funding gap also affects protection monitoring visits, which are crucial for monitoring and assessing the protection situation and needs on the ground to provide timely and needs-based services. Additional funds would allow for the provision

#### Health

The funding gap is likely to render the lack of access to primary health care, mental health services and essential medicines, vaccines and medical supplies for 380,000 individuals. While UNHCR seeks to ensure the integration of refugees into national service provision systems wherever possible, primary health care services

### Water, Sanitation and Hygiene

With additional funding, 450,000 individuals can benefit from the critical maintenance of water supply facilities, 120 latrines can be rehabilitated and made functional, and

### ◆ Community-Based Protection

The funding gap risks leaving around 23,000 individuals without protection services, and cash or in-kind support for the most vulnerable. The management of community structures will be affected by this funding gap. Multipurpose community centres could offer a one-stop service for all population groups. Additional funding would allow for the establishment of outreach and protection desks, which can then identify people in need, provide the needed services and refer people to service

of individual registration, identity management, and documentation services. UNHCR will enable support for individuals to access refugee status determination (RSD) procedures and legal assistance. Registration materials and equipment would be included as well as registration training of government staff.

Cost: \$2,600,000

are urgently needed, including outpatient consultations, essential medicines, vaccines and medical supplies, immunization campaigns, support to health facilities and primary healthcare services.

Cost: \$2,100,000

145,000 individuals can receive hygiene support, such as dignity kits and soap.

Cost: \$1,300,000

providers. Implementation of community-based activities, promoting social cohesion and peaceful co-existence would also be possible and community-based protection networks strengthened through provision of activities including psychosocial support services, and complaints and feedback mechanisms put in place.

Cost: \$4,000,000

# **Central African Republic - \$12M**

#### Shelter

Due to drastic funding cuts, UNHCR and its partners have been able to ensure the construction of only 220 semi-durable shelters in 2024 for Sudanese refugees in Korsi, which hosts more than 26,700 refugees. In 2025, only 150 semi-durable shelters are being constructed in Korsi while no emergency shelters have been built. To adapt, UNHCR and partners have opted for an approach that aims to allocate plots of land (10 x 15 metres) to newly arrived refugee families to build emergency shelters using plastic sheeting that is distributed to them.

However, with refugees arriving in extremely vulnerable conditions and with very few resources, many families are not able to construct such a shelter, which increases their vulnerability and exposes them to significant risks, especially during the rainy season. The current coverage of shelters is less than 23 per cent of the identified needs. Additional funds are urgently needed to build 2,000 semi-durable shelters for 2,000 refugee families in a participative community approach, ensuring that they are adequately protected from the elements.

Cost: \$5,000,000



# ◆ Water, Sanitation and Hygiene

Water and sanitation conditions remain a critical challenge in refugee-hosting areas. In Korsi, despite interventions to improve existing water systems and carry out hygiene promotion activities, the adoption of good hygiene practices remains limited due to insufficient infrastructure and community habits practiced in dispersed settlement contexts where risks of hygiene-related sickness and epidemics are significantly lower.

To date, 60 blocks of semi-durable community latrines have been constructed as part of efforts to move towards more sustainable facilities, and 60 handwashing stations are operational at key locations. In parallel, 220 family semi-durable latrines have been constructed along

with the 220 semi-durable shelters. However, the daily average of water supply stands at 10 litres per person, well below the humanitarian standard of 15 litres and the current ratio of 67 people per community latrine exceeds the emergency threshold of 50 people per latrine. More than 12,100 refugees still lack adequate access to sanitation, and an estimated 722 additional community latrines and 2,000 family latrines are urgently needed. Immediate funding is required for borehole drilling, latrine construction, and hygiene promotion to reduce the risk of waterborne disease outbreaks.

Cost: \$5,865,000

#### Protection

Over 12,000 Sudanese refugees are living outside the Korsi settlement, integrating into local communities with the support of local authorities, UNHCR, and partners. While limited protection services are available in some areas, access to health care, shelter, WASH, and social protection remains critically low due to weak national systems and the absence of humanitarian actors in many locations as well as restricted resources for mobile protection teams. The most vulnerable—pregnant and lactating women, children at risk, persons with disabilities, older people, and those with chronic illnesses—are disproportionately affected. Limited service availability is

driving harmful coping strategies, including child labour, recruitment by non-state armed groups, and increased exposure to gender-based violence. Immediate investment is needed to sustain and expand referral pathways for protection and health services, maintain psychosocial support for survivors of gender-based violence and children at risk, and provide targeted assistance to 6,000 households most at risk.

Cost: \$780,000

# ♦ Well-being and Basic Needs

While WFP has been able to safeguard food security for some refugees through in-kind contributions and complementary cash transfers, over 26,000 refugees and host community members remain in urgent need of additional food assistance. Expanding cash-based interventions would provide families with the flexibility to purchase food locally and meet their needs, while boosting the local economy. The overstretched health system in Birao also urgently needs reinforcement to

integrate refugees into national services and ease the strain on basic social infrastructure. Without urgent funding, an estimated 26,700 Sudanese refugees will not have access to adequate medical services, leaving them at heightened risk of disease, prolonged suffering, and premature loss of life.

Cost: \$248,000

# Chad - \$32.5M

#### Protection

Vital protection services for refugees are required, including registration, relocations to safer areas where they can access humanitarian assistance, legal assistance, specialized services for children and survivors of violence, gender-based violence prevention and response, and support for peaceful coexistence. Failing to move refugees from insecure border zones to secure settlements risks exposing them to insecurity, severe weather, and disease. Refugees in spontaneous border sites face protection dangers, increased violence risks,

exploitation, and lack access to essential services such as food, water, and healthcare. Women and children are especially vulnerable to violence and exploitation. Furthermore, survivors of gender-based violence may not receive proper care, risking long-term trauma, while victims of rights violations might be left without sufficient support, perpetuating cycles of abuse.

Cost: \$4,000,000



#### Health

Health services need to be urgently scaled up in and around refugee settlements to ensure that refugees and their hosts have access to quality primary healthcare—including curative and preventive care, mental health and psychosocial support, sexual and reproductive health; and support cholera prevention and response activities, including surveillance, community outreach,

Water, Sanitation and Hygiene

Since July, a deadly cholera outbreak has affected several refugee settlements across two provinces in eastern Chad hosting Sudanese arrivals from Darfur, raising alarm over worsening sanitary and health conditions. Despite UNHCR interventions, only a fraction of WASH needs have been met in relocation sites. More is needed to immediately improve access to water and sanitation in all refugee settlements to prevent the continued spread of cholera: displaced populations have access to less than 10 litres of water per person per

Well-being and Basic Needs

Urgent support is needed in the distribution of essential household items, including soap and jerry cans, to promote good hygiene and ensure families have the necessary supplies to fetch water from clean water points safely and store water properly, preventing contamination.

establishment of treatment units and pre-positioning of medicines. Failure to act would increase the risk of preventable illnesses and deaths, higher transmission of communicable diseases, and greater pressure on already limited healthcare resources.

Cost: \$7,100,000

day, below the emergency standard of 15 litres. Water trucking is temporarily used in newly established refugee settlements, but more boreholes and proper distribution systems must be installed to ensure sustainable water access. Furthermore, latrines designed for 20 families often serve twice this number of people. There is an urgent need to decommission latrines and build new ones.

Cost: \$14,900,000

UNHCR plans to distribute three bars of soap to all refugees and jerry cans to each family, both in cash and in kind. Failure to act would undermine efforts to prevent the spread of cholera, endangering the health of families and communities.

Cost: \$6,500,000

# Egypt - \$6M

# ◆ Well-being and Basic Needs

In July, UNHCR had to exclude 1,677 vulnerable refugee households from its monthly cash assistance list, reducing the total number of monthly cash beneficiaries to 15,898 households, compared to 20,002 households at the start of 2025. In addition, the transfer value has been reduced by approximately 11% (below survival minimum standards) and capped at a family size of five meaning that families of five, six, or more members will receive the same cash amount.

This reduction leaves around 50,000 vulnerable refugee families without the means to pay rent, buy food, or

#### Health

Health services for refugees in Egypt have been severely undermined by funding cuts, with UNHCR forced to suspend primary health care for two months early in the year and secondary and tertiary services shifted to a cost-recovery arrangement with a partner. As a result, refugees face overwhelming barriers to medical care. Life-saving treatments including cancer care, dialysis, and cardiac interventions, are largely out of reach as refugees are excluded from Egypt's state financial coverage for advanced care. Families are going into debt traps to

cover essential expenses, accelerating malnutrition, homelessness, and child labour, also exposing women and girls to higher risks of gender-based violence and exploitation. This in combination will likely drive more people to attempt dangerous onward movement to Europe. Coinciding with Egypt's economic crisis and soaring inflation, the loss of this lifeline risks destabilizing host communities as well, with rising eviction rates, food insecurity, and competition over scarce resources straining social cohesion.

Cost: \$3,600,000

pay for emergency health costs, while others forgo care altogether, resulting in preventable deaths and untreated chronic illnesses. Maternal and child health indicators are worsening and limited psychosocial support services cannot meet the needs of traumatized populations. Refugees' inability to access affordable care pushes households deeper into poverty as families divert scarce income to cover medical bills, often at the expense of food or schooling. Expanding health services is therefore essential not only to save lives but also to strengthen



resilience, reduce protection risks, and prevent onward movements driven by despair. Without urgent funding, an estimated 52,000 patients will lose access to medical

services, leaving them at heightened risk of disease, prolonged suffering, and premature loss of life.

### Cost: \$1,500,000

### **◆** Education

Among Sudanese refugees, one in two children are not attending school, with many families unable to pay even subsidized fees. Rising vulnerabilities are driving harmful coping mechanisms, including child labour and early marriage, as families struggle to make ends meet. Education interventions are underfunded and cannot meet the overwhelming demand. Critically, 15,000 refugee and asylum-seeker children will not be able to enroll in school if additional resources are not mobilized. The education gap is directly linked to broader systemic challenges. The closure of two of the three registration

centres in Egypt and reduced staffing have left a backlog of over 190,000 individuals without legal stay, limiting children's ability to access schools, which require valid residency permits. While the Asylum Law enacted in December 2024 offers opportunities for refugee inclusion in national systems, the transition will take years. Without immediate external support, the cumulative effects of poverty, displacement, and limited legal pathways will further erode refugee children's right to education, perpetuating cycles of exclusion and vulnerability.

Cost: \$1,000,000

# Ethiopia - \$3M

#### Protection

UNHCR will strengthen community-based protection by actively engaging displaced populations, building their capacities, and improving feedback and accountability mechanisms. A critical component of this approach is the expansion of mental health and psychosocial support (MHPSS) services to address trauma and promote resilience. In parallel, UNHCR is reinforcing gender-based violence programming through life-saving support for survivors, risk mitigation strategies, and prevention efforts via awareness-raising among refugees and host communities. Child protection remains a vital area of intervention, with a focus on case management

for children at risk, including emergency medical and cash assistance to meet urgent needs. These efforts are coordinated across agencies and supported by the establishment of safe spaces for women, girls, and children, ensuring a protective environment that upholds dignity and rights. A lack of funding would seriously hinder household pre-registration (Level 1) of approximately 5,000 new arrivals at Kurmuk and Metema entry points, and the biometric registration as well as inclusion into the national ID programme of 15,000 in Ura and Aftit sites.

### Cost: \$360,000

#### **◆** Education

Education remains a critical and lifesaving intervention during emergencies. UNHCR will establish temporary learning centres, train teachers in psychosocial support and inclusive practices, distribute learning materials, and integrate life skills and protection messaging into the education programmes which contribute to safeguarding futures and strengthening communities in crisis.

### Cost: \$450,000

# ◆ Well-being and Basic Needs

Cash assistance remains a critical component of UNHCR's response for Sudanese refugees and vulnerable host community members affected by the ongoing crisis. The flexibility of cash enables families to meet their most urgent needs including food, health care and other essential while preserving dignity and promoting self-reliance. However, current coverage reaches only a fraction of the vulnerable population, with many households facing heightened risks of food insecurity

and eviction. Urgent investment is needed to sustain and expand multipurpose case assistance to reach at least 10,000 additional households, strengthen targeting and verification systems to ensure assistance reaches those most in need, and to support market-based approaches that stimulate local economies and enhance community resilience.

### Cost: \$460,000

### Water, Sanitation and Hygiene

The water, sanitation, and hygiene response in the Ura and Aftit settlements continues to face critical gaps that threaten public health, environmental sustainability, and peaceful coexistence with host communities. The current reliance on a river-based water abstraction system is increasingly vulnerable due to upstream catchment



degradation. Additionally, the absence of a liquid and solid waste management system poses a serious risk of communicable disease outbreaks. Family latrine interventions to improve sanitation coverage and reduce public health risks, drilling of additional deep boreholes to ensure sustainable access to safe water in areas with limited surface water availability, establishment of permanent liquid and solid waste management systems

aimed at supporting the environmental health and longterm settlement sustainability, and pipeline extensions to expansion areas are urgently required. These improvements will significantly reduce poor hygiene and reduce the risk of disease for the growing number of arrivals.

Cost: \$775,000

### ◆ Shelter, Infrastructure and Energy

Recent meteorological forecasts from the Ethiopian Meteorological Institute indicate that refugee-hosting areas including Ura and Aftit refugee sites are likely to experience up to 65 percent above-normal rainfall. This poses a significant risk to infrastructure and service delivery within these sites. There is urgent need for 400 family tents to house vulnerable refugees, 500 kits to maintain and strengthen existing emergency shelters, upgrading of 1,246 emergency shelters to sustainable shelters providing more durable and environmentally sustainable materials. Furthermore, maintenance is urgently required for 13 existing communal shelters exposed to harsh weather conditions.

There is a pressing need to construct seven kilometres of road to the refugee sites to improve humanitarian access and services. Furthermore, there is a desperate need to

#### ◆ Health

Efforts are ongoing to improve health and nutrition services for refugees, focusing on surveillance, emergency preparedness, medical referrals, facility upgrades, medicine supply, and mobile clinics, and targeted nutrition programs prioritize children under five and pregnant women. Underfunding severely limits UNHCR's ability to provide essential health services to Sudanese refugees and host communities, leading to increased morbidity and mortality rates. Refugees in protracted camps currently receive only 1,050 kcal per person per day, which is insufficient and increases the risk of malnutrition.

Funding shortages in camps like Assosa and Aftit lead to frequent shortages of drugs, medical supplies, and

provide maintenance to existing gravel roads damaged by heavy rains. Additional culverts are needed along eight kilometers of road to manage stormwater runoff and prevent flooding in sites. Secondary drainage channels are required to prevent flooding, reduce waterborne disease risks, and improve stormwater management in the settlement.

It is a high-priority to install 150 additional solar-powered streetlights to enhance safety, security, and mobility during nighttime. Priority areas include internal roads, sanitary corridors, and shared critical facilities for both refugees and host communities. Reliable electricity is also desperately needed to power essential services and improve overall living conditions in the settlement.

Cost: \$424,000

equipment, compromising care quality. Nearby hospitals also face shortages and limited services, while security issues disrupt referrals and ambulance availability, causing delays in specialized care. Lack of funding for stabilization centers forces treatment of severely malnourished children in general wards, increasing infection risks. 2024 nutrition reports confirm high malnutrition rates in Assosa camps, highlighting the need for a coordinated multi-sectoral response.

Cost: \$498,000

# **Libya - \$12M**

# ♦ Well-being and Basic Needs

Refugees, particularly in Alkufra and elsewhere in eastern Libya, arrive in extreme material deprivation, lacking even the essentials for shelter, dignity, and health. With harsh living conditions and fragile coping mechanisms, families are left exposed to preventable risks such as disease, unsafe shelters, and overcrowding. Without new funding, thousands of already vulnerable families will be left unprotected and at greater risk of further deterioration of their situation. With urgent donor support, UNHCR and partners will scale up the distribution of solar lamps,

kitchen sets, jerry-cans, mosquito nets to prevent malaria in high-risk areas, and hygiene kits to be replenished every 4–6 weeks to safeguard dignity and health in informal sites. At the same time, expanded partnerships with national NGOs will strengthen delivery across the country, including detention centres and disembarkation points.

Cost \$6,000,000



# Health

In Alkufra, the primary entry point, medical facilities are overwhelmed, understaffed, and under-equipped to cope with the constant influx of refugees in poor health. Meanwhile, across the country, shortages of staff, medicines, and equipment leave thousands without access to life-saving care, while maternal and child health services, chronic disease management, and care for survivors of sexual violence remain critically underresourced.

With increased funding, UNHCR will scale up health support across priority locations including Alkufra, Ajdabiya, Az-Zawiyah, Benghazi, Jalu, Janzour, and Tripoli, reaching both refugees and vulnerable host communities. Planned interventions include the provision of essential

medicines, medical consumables, and basic diagnostic equipment to frontline health centres, alongside small-scale rehabilitation to improve service delivery conditions. UNHCR will also invest in training health workers to strengthen refugee-sensitive care and expand access to maternal and child health, infectious disease management, and mental health and psychosocial support. With urgent donor support, these interventions can reduce preventable deaths, ease the burden on overstretched public health facilities, and provide equitable, cost-effective healthcare for some of Libya's most vulnerable populations.

# Cost \$6,000,000

# South Sudan - \$28M

### Access and Documentation

Large numbers of refugees are still unable to obtain basic identity papers or proof of legal stay, leaving them at risk of harassment, restricted movement, and exclusion from essential services. Some 48 per cent of the total eligible refugee population are still awaiting issuance of refugee ID cards. Registration teams at border points and in host communities are overstretched, with very few staff, outdated equipment, and limited capacity to run mobile missions to remote areas. At the Joda reception centre, limited space and resources slow down processing and delay relocation movements to camps or settlements,

# Well-Being and Basic Needs

Thousands of refugees and returnees continue to arrive in South Sudan without the basic household items they need to survive. However, ongoing funding shortfalls have severely limited UNHCR's ability to provide essential supplies like blankets, cooking sets, and hygiene kits. Cash assistance has also been constrained by funding gaps. This includes cash for protection programmes, which are critical for vulnerable populations such as survivors of gender-based violence and other at-

# ◆ Shelter

With many South Sudanese returnees along with Sudanese refugees, arriving exhausted, without shelter, and exposed to the elements, UNHCR is providing emergency, transitional, and flood-resilient shelter solutions, alongside essential items, to ensure safety and dignity from the moment people arrive.

Shelter support ranges from rapid-assembly emergency kits for immediate protection, to more durable structures

# **◆** Logistics, Supply and Telecommunications

In South Sudan, logistics and supply costs are extremely high, including the need for airlifts in rainy season, and river routes inaccessible due to conflict. This is one

leaving people in overcrowded and inadequate conditions for longer than necessary.

Without additional resources, these bottlenecks will persist, and thousands will remain without the documents they need to move freely, work, or access services. Strengthening teams on the ground, upgrading equipment, and expanding mobile outreach are urgent steps to close this gap and protect people's rights from the moment they arrive.

### Cost: \$6,000,000

risk groups. Without urgent funding to scale up both distribution of non-food items and cash assistance, vulnerable households risk slipping deeper into hardship. Restoring full coverage of these interventions is vital to helping refugees and returnees meet their immediate needs, rebuild their lives, and regain a measure of independence.

### Cost: \$6,000,000

built with local materials that strengthen community resilience. In flood-prone areas, raised platforms and waterproofing measures are incorporated to protect families and their belongings. Additional funding is essential to ensure that all arrivals have safe, dignified shelter and are protected from climatic risks.

### Cost: \$9,000,000

of the areas for which UNHCR needs more funding to ensure service delivery across all sectors. Serious gaps in transport and supply chain capacity are already limiting



UNHCR's ability to respond to new displacement in South Sudan. In the first half of 2025, over 42,000 refugees and asylum-seekers required transport from border points to transit centres, yet funding constraints meant not all could be relocated promptly to safer, better-serviced sites. Limited resources also slowed secondary relocations from transit centres to refugee-hosting areas, leaving vulnerable families in overcrowded conditions for longer periods.

Pre-positioning essential relief items before the onset of heavy rains is critical, but insufficient funding in early 2025 forced the suspension or delay of several supply pipelines. This gap is particularly alarming in flood-prone states such as Upper Nile and Unity, where road access has been cut and river routes remain unreliable due to insecurity. Humanitarian logistics are extremely costly during the rainy season, when impassable roads force reliance on airlifts to deliver life-saving supplies and fuel, consuming a significant share of available resources and further constraining the scale and timeliness of the response. Without urgent investment, there will be insufficient shelter materials and other life-saving

assistance close to flood-prone and displacement areas.

Telecommunications infrastructure, essential for coordinating logistics, maintaining protection services, and enabling refugees and returnees to access critical information and assistance, remains underdeveloped in several priority sites. While there have been some improvements, large gaps persist: many locations still lack reliable internet and secure communication systems, restricting both humanitarian workers and refugees from benefiting from timely, accurate communication. These gaps hinder real-time registration, tracking, and response, and also limit refugees' ability to connect with education opportunities, such as distance learning or higher education, youth engagement initiatives, and family reconnections. Without additional resources to strengthen transport, pre-positioning, and connectivity for humanitarian workers as well as refugee and returnee communities, the humanitarian response will face severe delays and coverage gaps, with direct consequences for the safety, well-being, and education prospects of refugees and returnees.

Cost: \$7,000,000

# Uganda \$3M

### Well-being and Basic Needs

UNHCR provides non-food items (such as blankets, sleeping mats, buckets, and jerry cans) to new arrivals, and emergency shelter assistance through cashbased interventions, enabling households to quickly meet urgent needs while sourcing materials from local markets. This support is essential to prepare for and respond to the continuous arrival of Sudanese refugees, whose presence further strains already limited shelter

and service capacity. Many new arrivals are urbanized and lack traditional shelter construction skills, requiring additional support to establish safe and durable housing. UNHCR therefore seeks urgent funding to provide emergency shelter kits, repair materials, and multipurpose cash, alongside tools and training, to help new arrivals stabilize quickly, restore dignity, and build resilience.

Cost: \$900,000

## ◆ Mental Health, Psychosocial Support, and Peacebuilding Interventions

With over half of refugee households reporting psychosocial distress, communities have emphasized the urgent need to scale up mental health and psychosocial support, alongside peacebuilding initiatives to address the root causes of violence such as discrimination, competition over land and water, and inequitable assistance. UNHCR seeks urgent resources to expand community-based psychosocial support services, complemented by specialized care for severe cases; implement structured peacebuilding activities—

including dialogues and youth engagements—to foster social cohesion; and strengthen protection case management for survivors of gender-based violence, separated children, and other vulnerable groups. These interventions are critical not only to heal trauma but also to prevent future outbreaks of violence by building resilience and equipping youth and women with conflict resolution skills.

Cost: \$300,000

## ◆ Basic Services

Essential services in Kiryandongo are severely overstretched, including water points and healthcare facilities. These service gaps have further heightened community tensions and perceptions of inequity. UNHCR, together with partners, is working to address these gaps, but significant investments are urgently needed to restore access to water, expand education and healthcare services, and strengthen protection systems.

Without this support, refugees' well-being will be severely compromised, and competition over scarce services will continue to fuel inter-communal tensions.

Cost: \$1,800,000



# **Financial requirement**

While humanitarian needs are mounting, flexible funding is urgently needed to support UNHCR and partners' ability to provide a dignified response and prevent the suspension or scaling back of life-saving assistance and services including protection, health, and education. Action to build community resilience and ensure that areas affected by conflict and fragility are not left behind is critical.

Country	Urgent Needs (US\$)
Sudan	\$10m
Access and Documentation	\$2.6m
Health	\$2.1m
Water, Sanitation and Hygiene	\$1.3m
Community-Based Protection	\$4m
Central African Republic	\$12m
Shelter	\$5m
Water, Sanitation and Hygiene	\$5.9m
Protection	\$0.8m
Well-being and Basic Needs	\$0.2m
Chad	\$32.5m
Protection	\$4m
Health	\$7.1m
Water, Sanitation and Hygiene	\$14.9m
Well-being and Basic Needs	\$6.5m
Egypt	\$6m
Well-being and Basic Needs	\$3.6m
Health	\$1.5m
Education	\$1m
Ethiopia	\$3m
Protection	\$0.4m
Education	\$0.4m
Well-being and Basic Needs	\$0.5m
Water, Sanitation and Hygiene	\$0.8m
Shelter, Infrastructure and Energy	\$0.4m
Health	\$0.5m
Libya	\$12m
Well-being and Basic Needs	\$6m
Health	\$6m
South Sudan	\$28m
Access and Documentation	\$6m
Well-being and Basic Needs	\$6m
Shelter	\$9m
Logistics, Supply and Telecommunications	\$7m
Uganda	\$3m
Well-being and Basic Needs	\$0.9m
Mental Health, Psychosocial Support, and Peacebuilding Interventions	\$0.3m
Basic Services	\$1.8m
Total	\$106.5m



# Sudan Regional Refugee Response Plan 2025

As the ongoing conflict propels ever-larger outflows to neighbouring countries, the 2025 Regional Refugee Response Plan (RRP) for the Sudan situation focuses on life-saving WASH, protection and health interventions that shield the most at-risk while laying foundations for localization and self-reliance in seven host countries.

In the context of reduced funding in 2025, the RRP has gone through a hyper-prioritization process to identify people in the most urgent need of assistance and the most critical response to be mobilized. While overall needs remain staggering across the region – 4.8 million people targeted across seven countries, with total requirements of \$1.8 billion – the hyper-prioritization process puts an immediate focus on 4.1 million people, with corresponding financial needs of \$1 billion across 111 RRP partners.

