



GBV in Sudan: Rapid Review

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Query: Please conduct a rapid review of GBV in Sudan and likely impacts of the conflict on prevalence, patterns, severity and impacts of GBV, including IPV, CRSV, child marriage and FGM. This should include data and evidence on prevalence, drivers and impacts of GBV in Sudan, including summarising GBV trends and challenges in existing humanitarian crises and during recent political violence. Please include data from across the country, such as Darfur and other affected areas, as well as Khartoum. Please include any available data on violence against marginalised groups, such as women with disabilities.

Note: We are also interested in wider data and evidence on gendered drivers and impacts of the conflict, so please include this where possible.

Key takeaways:

Organisations working in Sudan and neighbouring countries report ‘surging’ numbers of GBV incidents since the conflict began in mid-April. The current situation is highly fluid, with shifts in fighting and impacts on GBV spreading from Khartoum to neighbouring states. There are reports of increases in intimate partner violence (IPV), conflict-related sexual violence (CRSV), and sexual exploitation, abuse and harassment (SEAH), although exact data is limited at this stage.¹

The conflict is severely impacting GBV services in Khartoum and the most conflict-affected states, including through direct attacks on aid workers, health workers, hospitals, clinics and warehouses.²

However, the GBV sector is one of the most active sectors in Sudan and continues to provide services where it can, particularly through local organisations which are still operating, remote psychosocial support, and regular information-sharing.³

Although the current conflict is the most urgent GBV need, it is set against a backdrop of already severe humanitarian needs with 1 in 3 people in need of humanitarian assistance – about 15.8 million people. The Humanitarian Response Plan (HRP) was only 14% funded for 2023, with even less available of the \$34.7 million required for the GBV response pre-crisis.⁴

Even before the current conflict, women and girls were at high-risk of various forms of GBV, including IPV and other forms of family violence, non-partner sexual violence (including CRSV), SEAH, trafficking, FGM and early, child and forced marriage. Data is based mostly on the nationally representative survey, the 2014 Multiple Indicator Cluster Survey (MICS),⁵ with the next Sudan MICS in the survey design stage.⁶ Another useful source of GBV data is the qualitative assessment ‘Voices from Sudan’, which uses global best practice in in-depth GBV assessment in humanitarian contexts.⁷

Groups who experience intersecting inequalities are likely to be at heightened risk of GBV during the escalation in conflict. This includes but is not limited to women and girls with disabilities, adolescent girls, refugees and internally displaced people, pregnant women, LGBTQ+ women, and women without male guardians such as widows and divorcees.

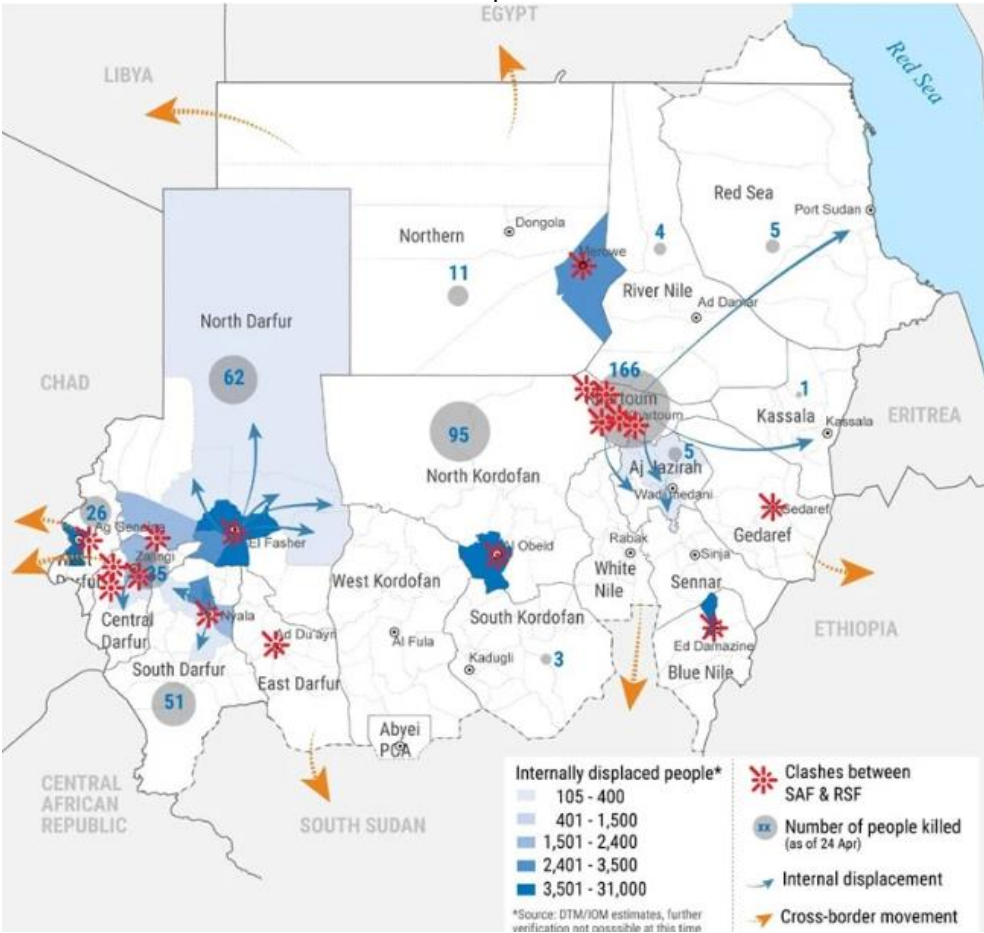
GBV in Sudan is caused by multiple, overlapping drivers. Examples include deeply rooted social norms and unequal gender dynamics, poverty and food insecurity, a culture of impunity, and drug and alcohol consumption by perpetrators, amongst others. As the conflict intensifies, it is likely that these existing drivers will be exacerbated, while other new drivers such as the availability of small arms will be introduced.⁸

The impacts are widespread and severe. They include negative impacts on survivors’ mental and physical health, adolescent pregnancies, access to education, women’s political participation and economic impacts.

1. 2023 Conflict

On 15th April 2023, violent clashes erupted between Sudan’s military and the country’s main paramilitary force.⁹ Forces loyal to the ruling military regime’s two main factions are currently competing for control of the country, shattering hopes for a peaceful transition to civilian rule.¹⁰ Fighting is spreading across the country, as shown in the map below.¹¹ More than 450 people have been killed and 4,000 injured but the actual figures are likely to be higher as are only based on deaths and injuries reported to health facilities.¹² Civilians continue to flee the fighting, causing huge displacement within Sudan and across borders to the Central African Republic, Chad, Egypt, Ethiopia and South Sudan.

Clashes between Sudanese Armed Forces (SAF) and Rapid Support Forces (RSF), as of 28 April 2023¹³



The current conflict in Sudan is the most urgent but is set against a backdrop of instability, conflict, natural disasters, disease outbreaks and economic deterioration. Before the fighting broke out, Sudan already had severe humanitarian needs with 1 in 3 people in need of humanitarian assistance – about 15.8 million people.

The Humanitarian Response Plan (HRP) was only 14% funded for 2023, with even less available of the \$34.7 million required for the GBV response pre-crisis.¹⁴ The United Nations Women's Peace and Humanitarian Fund (WPHF) has announced the launch of its latest [WPHF emergency funding appeal for Sudan](#) to raise funds for local women's organisations leading the humanitarian response, with the goal of ensuring the safety and protection of women and girls throughout the country.¹⁵

1.1 What do we know about likely impacts of the conflict on GBV?

The situation in Sudan is highly fluid. Many organisations working on GBV are directly affected by the conflict, and therefore information about the current and likely impacts of the conflict is incomplete. However, GBV is one of the most active sectors in the country, having regular meetings and information sharing.¹⁶ Some of the key impacts of the conflict on GBV are summarised below.

Increase in intimate partner and family violence: GBV coordination groups from within Sudan are observing an increase in domestic violence as a result of the increased stress associated with the conflict, such as movement restrictions, acute shortages of food, fuel, medicine and water, and families trapped inside due to fighting and missile attacks.¹⁷ The GBV Sub-Sector Coordinator in Sudan has reported hearing about 'surging numbers' of survivors, including in Khartoum and Darfur State.¹⁸

Violence towards aid workers: There have been increasing reports of humanitarian aid workers and facilities being targets of violence. At least 18 health and humanitarian workers have lost their lives,¹⁹ including three from the World Food Programme, prompting the organisation to suspend operations.²⁰ The UN has also received reports of sexual violence against aid workers.²¹

Conflict-related sexual violence: There are also reports of sexual violence happening as part of armed conflict and looting – a pattern that has been observed in several states.²² Although the majority of survivors are female, GBV actors are increasingly hearing reports of male survivors since the conflict began, including in Khartoum.²³

Increased GBV and SEAH against refugees and IDPs: Women-led organisations in Sudan are reporting that cases of GBV and SEAH are 'surging' among refugees and Internally Displaced People (IDPs) who are on the move, seeking shelter and safety.²⁴ This can either be in reception centres that are not yet fully equipped with safeguarding measures or in host communities, where people open up their homes. In Chad, which hosted over 400,000 refugees from Sudan before the crisis, UNHCR estimates that up to

GBV coordination groups are observing increases in various forms of violence since the conflict began in mid-April.

[GBV SUB-SECTOR COORDINATOR, 2023]

20,000 people have fled across the border to Chat. Most of those arriving are women and children and are currently sheltering out in the open, increasing the risk to various forms of GBV.²⁵

Disrupted GBV services: GBV services have been severely impacted by the current conflict in Khartoum and some of the most conflict-affected states such as Blue Nile. In less conflict-affected states, GBV services

are still operational.²⁶ 76 organisations participate in the GBV sub-sector in Khartoum, more than half of which are local organisations who are helping communities keep GBV services running and need urgent support. UNFPA are supporting through remote PSS services.²⁷ Looting of warehouses means that GBV organisations are struggling to protect existing stock and there is a limited number of dignity kits and Clinical Management of Rape (CMR) Kits in some states.²⁸

Risks of increased GBV and SEAH due to rising cost of basic necessities: There are reports of growing shortages and rapid increases in the price of food, water, fuel and medicine, especially in Khartoum and surrounding areas. For example, water prices have doubled, and fuel is 15 times higher than before the crisis,²⁹ causing significant household stress as well as increasing the risk of sexual exploitation and abuse in exchange for goods, which is commonplace in humanitarian settings.³⁰ There have also been increasing reports of women and girls experiencing violence when fetching water and fuel or buying food.³¹

Violence against vulnerable people unable to evacuate: There have been reports of families having to leave elderly parents behind when they evacuate, due to high-risk journeys, lack of passports and mobility.³² This increases the risk of GBV towards elderly women, given the lack of protection available for them from family members. Additionally, HelpAge have noted that elderly people are more at risk of the threat or act of physical, sexual and psychological abuse, due to their increased vulnerability. With cycles of dependency, discrimination and isolation, it may also place elderly people at risk of abuse within the family, particularly elderly women.³³ There is currently no evidence on how people with disabilities are being supported with evacuation.

1.2 What do we know about the likely gendered impacts of the conflict?

Closure of hospitals: With the heavy fighting in Khartoum, only one in four health facilities are fully functional. There is a shortage of medical supplies, blood, electricity and water.³⁴ Alongside this, it is estimated that there are 219,000 pregnant women in Khartoum who are unable to seek urgent care in hospitals and 24,000 women expected to give birth in the coming weeks. Pregnant women are at a disproportionate risk of health-related complications as a result of the lack of services and safe spaces to give birth or access antenatal, delivery services and post-natal care.

GBV services have been severely impacted by the current conflict in Khartoum and conflict-affected states.

[UNFPA, 2023)

Women's involvement in decision-making processes: It has been noted that women's participation in both formal and informal structures is limited, even for issues relating to women or girls in Sudan. For example, by not having women in decision-making processes, three Primary Health CARE centres within Wad Alheliw Locality do not have any GBV referral systems in place.³⁵ As it is the norm that women are not part of any decision-making processes, response to the crisis may be gendered and place women and girls particularly at risk.

Women's economic empowerment: Even before the current conflict, women were already highly marginalised within the labour market in Sudan.³⁶ There are concerns that urban women are particularly vulnerable to the impact of conflict, since they serve as their family's sole source of income by working as tea and food vendors, petty traders, or other street vendors in Khartoum. Despite the risk to their lives, many of these women in the informal sector continue to work because they have few other options.³⁷

2. Wider GBV trends in Sudan before the 2023 Conflict

Recent data and evidence on GBV in Sudan remain limited. There is rigorous data on FGM, child marriage and views on wife-beating from the 2014 Multiple Indicator Cluster Survey (MICS) – which was being updated. Another useful source is the 'Voices from Sudan' – a qualitative assessment of GBV. It is adapted from the Whole of Syria GBV AoR study, which is generally considered to be the global best practice for in-depth analysis of GBV in humanitarian contexts.

2.1 Data and evidence on different forms of GBV pre-crisis

Intimate partner violence: There are currently no national figures on IPV prevalence, although it is likely to be high. A cross-sectional household survey of 1009 women and girls aged 15-49 in Kassala (eastern Sudan) estimated that 33.5% had experienced physical and sexual violence from a current or former partner,³⁸ but this figure is likely to be underreported.³⁹ As is the situation globally, IPV is likely to be the most widespread form of violence, and when the first GBV helpline was set up in Sudan in April 2020 in response to COVID-19, 68% of callers reported physical violence, mostly perpetrated by an intimate partner or family member.⁴⁰

Family violence: In addition to violence from an intimate partner, physical violence in the home by family members is reported to be very common, according to the 'Voices from Sudan' qualitative assessment.⁴¹ Physical violence by brothers against sisters is reported to be the most widespread form of family violence (other than partner violence). Participants in the assessment also reported sexual violence of children by extended family members, such as older cousins and uncles.⁴² Women in polygynous relationship

1 in 3 women and girls aged 15-49 in Kassala (eastern Sudan) have experienced physical and sexual violence from a partner.

[ALI ET AL., 2014]

were also reported to be at high risk of family violence, particularly physical and economic violence, where wives share the same house.⁴³

Conflict-related sexual violence (CRSV): Women and girls have also been exposed to conflict-related sexual violence as part of the ongoing insecurity and intercommunal violence in Darfur, Southern Kordofan and Blue Nile.⁴⁴ The UN documented 61 cases in 2021 (likely to be underreported), with the majority attributed to various armed forces including the Sudan Liberation Army – Abdul Wahid (SLA/AW), the Sudan Liberation Army / Peace and Development (SLAPD), armed nomads, and unknown armed men. The Jebel Marra area reported incidents of conflict-related sexual violence, but humanitarian access was limited due to security concerns. The UN also received ‘disturbing reports’ of sexual violence by security forces during the mass demonstrations against the military that followed the October 2021 coup.⁴⁵

Before the crisis, Sudan was **ranked 10th globally** on the [Sexual Exploitation and Abuse Risk Overview \(SEARO\)](#) – a composite index that brings together risk factors for SEA. Areas of highest risk include around the enabling environment, the intensity and severity of the humanitarian context, funding, and percentage of funds allocated to GBV and child protection.

Sexual exploitation, abuse and harassment: The recent economic deterioration has led to increases in sexual harassment as women spent more time outside the home queueing for basic supplies such as bread and fuel.⁴⁶ In 2022, Sudan made efforts to strengthen collective efforts to advance prevention and response to sexual exploitation and abuse in humanitarian aid delivery, including adapting PSEA materials to the Sudan context, establishing a PSEA Task Force in two states (Gedaref and West Darfur) where risk assessments were carried out, awareness-

raising campaigns, and rolling out Victim Assistance Protocols and procedures to PSEA focal points.⁴⁷ However, challenges remain in the availability of services for survivors, with access reported to have deteriorated since the start of the recent conflict.⁴⁸

Trafficking: There has been a significant increase in the number of women and girls trafficked in Sudan since 2011, and the country has long been a transit point for irregular migrants and refugees from the Horn of Africa seeking to reach Europe. Trafficked women and girls are at higher risk of various forms of violence linked to trafficking for the purposes of sexual exploitation.⁴⁹ Observers have expressed concerns that government officials from the Commission of Refugees and the General Intelligence Service were potentially sexually exploiting refugees in Sudan, including newly arriving Ethiopians. Furthermore, because the government's refugee encampment policy prevents refugees from travelling freely throughout the nation, some refugees used migrant traffickers within Sudan, increasing their danger of exploitation.⁵⁰ The 2022 US Trafficking in Persons Report reported claims that corrupt RSF officials profited financially from their employment as border guards and had a direct role in people trafficking.⁵¹ With the current conflict increasing displacement within Sudan and at the borders, it is likely that refugees and IDPs may be at increased risk of sexual exploitation and GBV associated with trafficking.

Child and forced marriage: 34% of girls in Sudan are married before the age of 18, and 12% before 15, according to the most recent data from the 2014 Multiple Indicator Cluster Survey. Child marriage before age 18 is most prevalent in South and East Darfur (56%), Central Darfur (55%), the Blue Nile (50%) and Gadarif (49%)

34% of girls are married before the age of 18 and 12% before 15

87% of women have experienced FGM

[MULTIPLE INDICATOR CLUSTER SURVEY, 2014]

and is widely practised in rural areas.⁵² Since 2020, the deteriorating economic conditions, conflict and disruptions in education have exacerbated child and forced marriage, particularly in rural areas where there may be a perception that marriage provides protection and security to girls.⁵³

Female genital mutilation (FGM): FGM is widely practised across Sudan, with an 86.6% prevalence rate. However, prevalence, types and customs vary by regional and ethnic lines. FGM is more common in rural areas (82.7%) than in urban areas (85.5%). The highest rates are in North Darfur state (98%) and the lowest in Central Darfur state (45%).⁵⁴ Nonetheless, data show a modest decrease in FGM prevalence among women and girls aged 15-49 years from 89% (2010) to 86.6% (latest data). Attitudes towards FGM are also shifting, with 41% of women aged 15-49 years believing that the practice should continue compared to 79% in 1990.⁵⁵

2.2 Groups at high risk of GBV

Women with disabilities: Globally, women and girls with disabilities are up to 2-4 times more likely to experience violence than women and girls without disabilities.⁵⁶ 27% of households in Sudan include at least one member with a disability,⁵⁷ with 15% living with a disability.⁵⁸ Women and girls with intellectual disabilities are particularly vulnerable to exploitation and sexual abuse. Girls with disabilities are often married to older husbands to protect them and to give birth to children who will help take care of them in Darfur. There is also a significant stigma around disabilities, meaning survivors of GBV are less likely to report any incidents.⁵⁹

Refugees and internally displaced women: Sexual violence against IDPs and refugees is common, particularly in camp settings. This is alongside physical violence in camp settings, often in connection with accessing resources such as water and food. The latest figures from the Humanitarian Response Plan (issued December 2022) reported that there were 2.5 million IDPs and 0.9 million refugees, although this is likely to be higher since the recent conflict began.⁶⁰

Adolescent girls: In Sudan, adolescent girls are among the most vulnerable to different forms of GBV, particularly FGM and early marriage. UNFPA noted that girls are at particular risk of sexual violence in farming areas, near military areas, near water points, areas where drugs and alcohol are sold and on public transportation. Adolescent girls are more likely to be forced into survival sex in refugee reception centres, especially young unmarried girls. This is due to the lack of

economic resources available at reception centres, such that it has become normalised among young unmarried girls.⁶¹

LBTQ+ women: It is punishable by law to be homosexual in Sudan.⁶² This law is based on Sharia law, with those found guilty sentenced to life in prison or receiving the death penalty. There is no anti-discrimination or hate crime legislation that protects LGBTQI people from harassment and abuse on their diverse sexual orientation and/or gender identity and expression (SOGIE). Non-binary gender recognition is also not recognised, and conversion therapy is not banned.⁶³ Physical violence towards members of the LGBTQ+ community is common. An overwhelming majority of the population considers non-confirming sexual and gender expression socially unacceptable, with minimal discussion around it for fear of personal attacks and threats to safety.

Women without male guardians: Widows and divorced women were identified as particularly vulnerable groups for GBV in the 'Voices from Sudan' qualitative assessment, because they had no male guardian to 'protect' them from violence.⁶⁴ Widowers are particularly restricted in terms of their movements and are also victims of economic violence, due to disputes around inheritance. Divorcees were seen to be highly stigmatized, and unlikely to be believed if they report GBV, with one participant saying, 'if a divorced woman goes to the law she will be thrown in fire'.⁶⁵

Pregnant women: Pregnant women are another group that is at high risk of GBV when households are under intense stress due to conflict. With the closure of health services and support networks being disrupted, pregnant women and their unborn children are at higher risk and require better protection. This was the case during the flooding that occurred in Sudan in 2020, where damages to livelihoods caused increased stress and consequently increased domestic violence.⁶⁶

Women activists and human rights defenders: Women played a prominent role in the protests that resulted in al-Bashir's removal from power. However, reports soon emerged that regime-backed military and security forces had carried out organised sexual violence against female protestors at the demonstrations. Since then, there have been more reports of sexual violence being used by state forces in a 'targeted campaign against female protestors'.⁶⁷ After the military takeover in October 2021, the UN has observed an increasing 'pattern of violence against women's rights activists' in Sudan.⁶⁸

The UN has observed an increasing 'pattern of violence against women's rights activists'

[AL-JAZEERA, 2022]

2.3 Drivers

Gender-based violence in Sudan is driven by multiple factors, underpinned by patriarchal oppression and gender inequality, which intersect with other inequalities and socioeconomic factors. As the conflict intensifies, it is likely that existing drivers will be exacerbated (e.g. unequal gender dynamics), while other new drivers and risk factors will be introduced (e.g. availability of arms). It is also important to note that these factors operate at different levels from the individual to interpersonal, community, institutional and societal levels, and preventing GBV in Sudan will require action throughout each of these levels.⁶⁹ Examples of drivers identified through the rapid review include:

Social norms: Social norms are a root cause of GBV globally, with gendered expectations about the appropriate roles of men and women and access to and control over resources, sustaining power imbalances that are used to justify GBV. In Sudan, these social norms can manifest as views that men are justified in beating their wives. According to the 2014 MICS, 34% of women believe men are justified in beating their wives for one of a number of reasons.⁷⁰ Justification of wife-beating was more common among women who were less educated, from the poorest households, or currently/formerly married women (compared with never-married women). Fewer urban women (25%) justified wife-beating than rural women (38%).⁷¹ Social norms can also drive other forms of GBV, such as FGM, child and forced marriage. For example, social norms that younger women make better mothers and are easier to socialise into obedience, which is fundamental in the *Beja silif* system, reinforce child marriage.⁷²

Unequal gender dynamics: Sudan is near the bottom of the latest Gender Inequality Index (2021)⁷³ ranking 141 out of 170 countries with a GII score of 0.55. However, considerable data gaps on gender equality exist, with less than a third of indicators needed to monitor the SDGs from a gender perspective being available as of 2020.⁷⁴ Unequal gender dynamics, often operationalised as inequitable social norms, underpins all forms of GBV. The escalation of armed conflicts within existing patriarchal societies often leads to increases in GBV, including CRSV.⁷⁵

Poverty and food insecurity: More than 11.7 million people (24% of the population) are experiencing crisis levels or worse levels of acute food insecurity in Sudan, according to the latest Humanitarian Response Plan (issued December 2022), with drivers including violence, high food prices and climate shocks.⁷⁶ The current conflict threatens to push millions more into hunger and poverty, with aid operations being suspended in areas.⁷⁷ The deteriorating economic situation is increasing the risks of various forms of violence for women and girls, including intimate partner violence, child marriage, trafficking and sexual exploitation and abuse.⁷⁸

Rule of law / culture of impunity: Sudan has made some progress towards criminalising various forms of violence, including criminalising FGM in 2020. However, Sudan does not have domestic violence legislation and marital rape is not criminalised.⁷⁹ The Criminal Act was amended in 2015 to remove the conflation of the crimes of rape and adultery (Zina) that existed under the previous rape offence. However, the failure of state structures including overstretched police and justice systems to fulfil their roles as purveyors of justice has led to a culture of impunity. For example,

2018 data show that no cases of conflict-related sexual violence had been investigated by the Special Court for Darfur since the conflict began in 2003.⁸⁰ The first line of reporting for GBV is the family, followed by informal and tradition mechanisms of dispute resolution (Joudia), but these allegedly have been used to perpetrate injustices against women. The police are seen as the last resort.⁸¹ In the last few years, harassment and GBV have become increasingly politicised, and 'connected to the current civil rule, as opposed to the previous authoritarian/military regime', with participants in 'Voices from Sudan' describing how whenever girls and women complain about harassment, the police told them, 'This is the civil rule you wanted'.⁸²

Drug and alcohol consumption: Many of the factors that drive GBV can be exacerbated by drug and alcohol misuse – a growing problem in Sudan, despite being prohibited.⁸³ Areas where alcohol and drugs are sold and consumed are perceived to be at high risk for sexual violence by participants in the recent 'Voices from Sudan' qualitative assessment.⁸⁴ Participants reported that women whose husbands misuse drugs or alcohol may be more likely to be abusive, 'Sometimes men return home drunk or under drugs and beat women for now reason' (Female participant, Khartoum).⁸⁵

4. Impact

Violence against women and girls has serious impacts for individuals, communities and society globally. There are significant gaps in evidence from Sudan about the impact of GBV on women and girls. However, this review did identify the following evidence on impacts:

Over 90% of Sudan's localities lack specialised GBV services

[VOICES FROM SUDAN, 2020]

Physical and mental health: GBV has substantial impacts on the physical and mental health of survivors. Many women who have survived violence are either unable or unwilling to seek help from formal services, according to the 'Voices from Sudan' assessment.⁸⁶ Over 90% of Sudan's localities lack specialised GBV services,⁸⁷ and the current conflict is likely to further limit access to the services that do exist. Based on global evidence, we can predict that survivors are likely to experience declines in mental well-being as well as physical health, which without access to services can have wide-reaching impacts including a likely reduction in the ability of women to engage in economic opportunities and other forms of public life.

Adolescent pregnancies: Sexual violence is likely to go unreported, unless it results in pregnancies, according to participants in the 'Voices from Sudan' assessment.⁸⁸ There are huge reputational damages associated with getting pregnant out of wedlock, and therefore girls who fall pregnant after being raped often have no choice but to marry the perpetrator as a settlement or be banished from family homes. Forced marriage is commonly used to cover up pregnancies outside of wedlock in Sudan, including as a result of sexual violence.⁸⁹

Access to education: Denial of education was seen both as a form of violence, but also resulting from fears of violence or harassment at school or on the way to/from school, by participants in the 'Voices from Sudan' assessment.⁹⁰ Child and forced marriage is also linked with girls' education, with one participant from North Darfur observing that 'if a girl fails at school, that will be a pretext to take her out of school and marry her away'.⁹¹

Economic impacts: Economic violence is a common form of GBV, with 14% of participants in the Voices from Sudan saying it was the most widespread GBV incident in their community.⁹² Impacts include denial of resources, assets and inheritance, and financial resources being tightly controlled, leaving women in precarious situations as the wider economy has deteriorated in Sudan and the cost of living has escalated.⁹³

Women's political participation and activism: There are concerns that the targeting of women's activists will risk reducing their participation in politics and peace processes.⁹⁴ Although women were at the forefront of the protests, they have been largely excluded from formal political leadership. Nevertheless, women have continued to find other spaces, both online and offline, to organise and build on the solidarity generated during the protests.⁹⁵ Despite the challenges and concerns about being targets of violence and harassment, Sudanese women remain 'committed to making their voices heard in peacebuilding efforts.'⁹⁶

Sudanese women remain committed to making their voices heard in peacebuilding efforts

[ABBAS, 2023)

Annex 1: Methodology

This rapid research query has been conducted as systematically as possible, under tight time constraints with a two-day turnaround.

Step 1: Search – Evidence was identified through online desk-based research. Searches were conducted using Google and relevant electronic databases using key search terms including but not restricted to: Sudan AND gender-based violence, GBV, violence against women, VAWG, violence against girls, violence against children, intimate partner violence, IPV, sexual violence, physical violence, emotional/ psychological violence, economic violence, child marriage, trafficking, SRGBV, online violence AND drivers, causes OR impacts, consequences, effects.

Step 2: Inclusion - To be eligible for inclusion in this rapid evidence review and mapping, reports had to fulfil the following criteria:

- **Focus:** Evidence on VAWG in Sudan with focus on key issues, prevalence, drivers and impacts.
- **Time period:** From January 2010 to present.
- **Language:** English.
- **Publication status:** Publicly available – in almost all cases published online.
- **Geographic focus:** Sudan
- **Format:** Research reports, evaluation reports, peer-reviewed journal articles, systematic reviews, rapid assessments, grey literature
- **Study design:** All study types, designs, and methodologies including primary and secondary studies with clear methodologies to enable an assessment of quality.

Endnotes

- ¹ UNFPA Webinar - Briefing on the Situation in Sudan, 27 April 2023.
- ² UNFPA Webinar - Briefing on the Situation in Sudan, 27 April 2023.
- ³ UNFPA Webinar - Briefing on the Situation in Sudan, 27 April 2023.
- ⁴ OCHA (2023) *Humanitarian Response Plan: Sudan*.
https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/sdn_hrp2023_en_vss.pdf
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- ⁶ MICS Surveys: <https://mics.unicef.org/surveys>
- ⁷ UNFPA/CVAW (2021) *Voices from Sudan 2020: A Qualitative Assessment of Gender Based Violence in Sudan*, New York: UNFPA. <https://reliefweb.int/report/sudan/voices-sudan-2020-qualitative-assessment-gender-based-violence-sudan-enar>
- ⁸ Murphy, M., Fraser, E., Lamb, G., Artz, L., (2022). *Evidence for Action: What Works to Prevent Conflict-Related Sexual Violence*. What Works to Prevent Violence: Impact at Scale.
- ⁹ Fulton, A. and Holmes, O. (2023) 'Sudan conflict: Why is there fighting and what is at stake?' The Guardian, April 27, 2023. <https://www.theguardian.com/world/2023/apr/27/sudan-conflict-why-is-there-fighting-what-is-at-stake>
- ¹⁰ Elbagir, N., Qiblawi, T and Orie, A. (2023) 'Rival generals are battling for control in Sudan. Here's a simple guide to the fighting', CNN, 26 April 2023. <https://edition.cnn.com/2023/04/26/africa/sudan-conflict-explained-intl/index.html>
- ¹¹ OCHA (2023) *Sudan – Situation Report*. <https://reports.unocha.org/en/country/sudan/>
- ¹² Al Jazeera (2023) *Sudan updates: UN chief warns violence could engulf region*. 24 April 2023. <https://www.aljazeera.com/news/liveblog/2023/4/24/sudan-live-news-evacuations-speed-up-during-a-fighting-lull#:~:text=More%20than%20420%20people%20killed,15%2C%20according%20to%20UN%20figures.>
- ¹³ OCHA (2023) *Sudan – Situation Report*. <https://reports.unocha.org/en/country/sudan/>
- ¹⁴ OCHA (2023) *Humanitarian Response Plan: Sudan*.
- ¹⁵ Women's Peace and Humanitarian Fund (2023) Global UN Financing Mechanism launches rapid new funding appeal for women's civil society in Sudan. <https://wphfund.org/2023/04/25/global-un-financing-mechanism-launches-rapid-new-funding-appeal-for-womens-civil-society-in-sudan/>
- ¹⁶ UNFPA Webinar - Briefing on the Situation in Sudan, 27 April 2023.
- ¹⁷ UNFPA Webinar - Briefing on the Situation in Sudan, 27 April 2023.
- ¹⁸ UNFPA Webinar - Briefing on the Situation in Sudan, 27 April 2023.
- ¹⁹ OCHA (2023) *Sudan – Situation Report*. <https://reports.unocha.org/en/country/sudan/>
- ²⁰ Jamal, U. (2023) 'Diplomats, aid workers under attack in 'nightmare', Sudan violence', *Al Jazeera*, 19 April 2023. <https://www.aljazeera.com/news/2023/4/19/diplomats-aid-workers-under-attack-in-nightmare-sudan-violence>
- ²¹ CGTN (2023) 'UN Reports of attacks and sexual violence against aid workers in Sudan', 19 April 2023. <https://newsaf.cgtn.com/news/2023-04-19/UN-Reports-of-attacks-sexual-violence-against-aid-workers-in-Sudan-1i73M2Rezwk/index.html>
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