



Children attend an e-learning session at the UNICEF-supported safe learning space (Makana) at El Gox gathering point in White Nile State, where children can play, learn and receive psychological care.

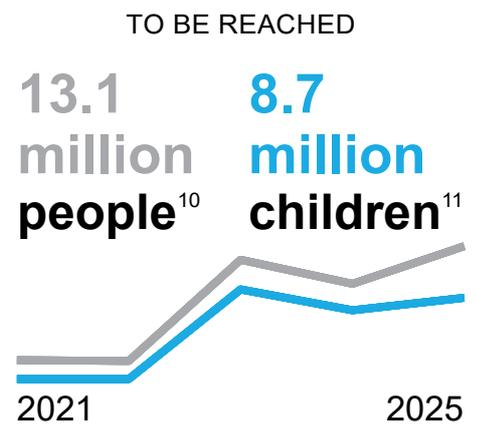
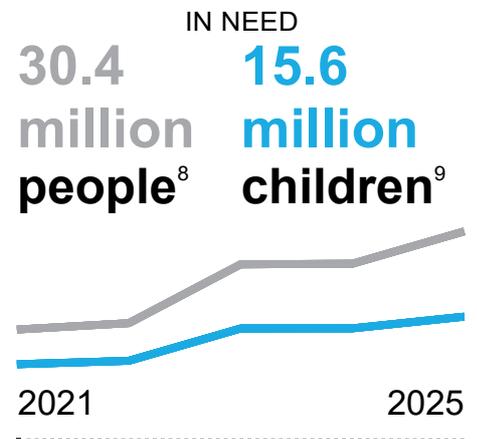


## Humanitarian Action for Children

# Sudan

### HIGHLIGHTS

- In 2025, 30.4 million people require urgent assistance in the Sudan,<sup>1</sup> up from 24.8 million in 2024, a 23 per cent increase.<sup>2</sup> Despite the extreme situation and millions of people requiring assistance, the response in the Sudan remains critically underfunded, jeopardizing the well-being of vulnerable children and families.
- More than 15.6 million children are affected by the crisis.<sup>3</sup> They face violence, including abuse and exploitation, along with forced displacement, malnutrition and disease outbreaks.
- More than 3 million children are at risk of deadly epidemics due to collapsing health systems,<sup>4</sup> and 24 million people face acute food insecurity, with famine devastating five regions and putting hundreds of thousands of children at risk of starvation.<sup>5</sup> Seventeen million children are out of school.<sup>6</sup>
- UNICEF's three-pronged (plus) strategy<sup>7</sup> targets conflict zones, displaced communities, returnees, refugees and host communities, aiming to support critical life-saving and life-sustaining services for all. UNICEF requires \$1 billion in 2025 to support 13.1 million people, including 8.7 million children.



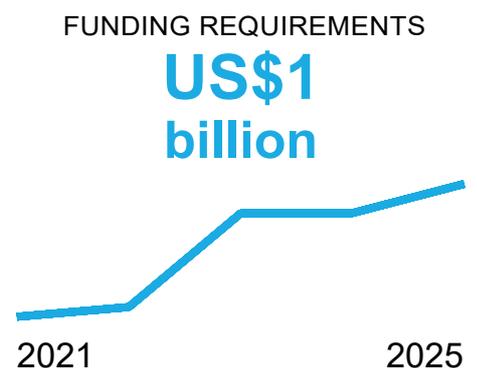
### KEY PLANNED TARGETS

**3.1 million** children and women accessing primary health care

**603,298** children with severe wasting admitted for treatment

**2.4 million** children accessing formal or non-formal education, including early learning

**9 million** people accessing a sufficient quantity and quality of water



## HUMANITARIAN SITUATION AND NEEDS

The extreme humanitarian crisis in the Sudan – prolonged conflict, widespread displacement, acute food insecurity, disease outbreaks and the collapse of essential services – has left more than 30.4 million people (half of them children) requiring urgent assistance in 2025.<sup>12</sup> The displacement crisis in the country is the largest in the world: nearly 11.6 million people, more than half of them children, have been forced to flee their homes.<sup>13</sup>

A rapidly worsening food crisis has caused acute food insecurity affecting more than 24.6 million people.<sup>14</sup> Disrupted markets, damaged infrastructure and poor harvests have made food unaffordable for the majority of people, pushing malnutrition in the Sudan to critical levels.<sup>15</sup> In 2025, 770,000 children are projected to be at immediate risk of severe wasting without urgent intervention.<sup>16</sup> Untreated, this condition can lead to death and cause irreversible physical and cognitive damage. Children in conflict-affected and hard-to-reach areas, where access to basic services remains severely restricted, are particularly vulnerable.<sup>17</sup> Global acute malnutrition rates are above the WHO emergency threshold of 15 per cent. Some areas exceed 30 per cent, signaling famine,<sup>18</sup> which has already ravaged several areas,<sup>19</sup> while additional parts of the country remain at risk.<sup>20</sup>

The country's health system is in crisis. Seventy per cent of health facilities are non-operational due to damage and shortages of critical supplies. Health workers have been unpaid for months, further weakening the already fragile system. Security challenges and restricted access have severely disrupted essential health services, including routine immunization. As a result, approximately 3.4 million children under age 5 are at high risk of disease outbreaks.<sup>21</sup>

Widespread destruction of infrastructure has left millions without access to essential services, including health care, education and safe drinking water. Women and girls continue to face the threat of gender-based violence, including sexual violence, abduction and enslavement, reportedly perpetrated by the warring parties.<sup>22</sup> Seventeen million children are out of school, deepening the cycle of poverty and vulnerability.<sup>23</sup> The collapse of water and sanitation systems has contributed to a rise in waterborne diseases, with one third of the population lacking access to safe drinking water.<sup>24</sup> The upsurge of malaria cases is particularly alarming: the Sudan accounts for 41 per cent of all malaria cases and 49 per cent of malaria-related deaths, with an average of 10,000 malaria cases and 21 deaths each day.<sup>25</sup>

## SECTORNEEDS<sup>26</sup>



**20.7 million**  
people in need of  
health assistance



**3.9 million**  
children and women in  
need of nutrition  
assistance<sup>27</sup>



**11.7 million**  
children in need of  
protection services



**8.5 million**  
children in need of  
education support<sup>28</sup>



**26.1 million**  
people in need of  
urgent WASH support

## STORY FROM THE FIELD



Ismail suffered from diarrhoea and vomiting, and he was severely malnourished. At a health facility supported by UNICEF, he received treatment, including ready-to-use-therapeutic food. By his second appointment, however, nutrition supplies had run out, interrupting Ismail's treatment, before becoming available again.

After nearly two years of conflict, the Sudan faces the grim prospect of a lost generation. Without urgent action, the country risks a future where countless children are trapped by the long-term impacts of malnutrition, stunting and trauma. UNICEF and its partners are working tirelessly to reach the most vulnerable.

Ismail, 14 months, is screened for malnutrition at Elhmedia health centre, Rokoro, Central Darfur in September 2024. The red showing in the screening window indicates severe wasting.

UNICEF's strategy for humanitarian response in the Sudan focuses on providing targeted, life-saving support to the most vulnerable populations while restoring essential services, building resilience and supporting recovery efforts in areas of return and within host communities. The strategy addresses immediate needs and sustains basic services, particularly in conflict-affected areas, for displaced populations and in returnee areas that are newly accessible, emphasizing life-sustaining support as resource pressure increases.

UNICEF will enhance early detection and treatment of malnutrition while scaling up preventive nutrition services to mitigate long-term risks. Efforts will focus on preventing the further collapse of health systems while strengthening rapid response mechanisms to address disease outbreaks and support the operation, maintenance and expansion of critical water supply systems.

UNICEF is also focusing on rebuilding essential services in conflict-ravaged areas where infrastructure and systems have been severely damaged. Restoring these services is critical for supporting returnees and enabling communities to regain access to vital resources.

A key component of the strategy is the continued provision of integrated health, nutrition, education, water, sanitation and hygiene (WASH) and child protection services. This will safeguard children's well-being by maintaining services and preparing for emerging challenges such as floods and disease outbreaks.

UNICEF emphasizes delivering high-quality, targeted aid and empowering local responders to act in hard-to-reach and conflict-affected areas. This ensures a sustainable response and the continuity of essential services.

UNICEF is scaling up programmes in urban areas, particularly in cities hosting internally displaced people and in areas of return, where restoring such essential services as water and sanitation is crucial to preventing further deterioration of living conditions.

Expanding cash-based interventions, including multipurpose cash assistance, empowers families with the financial flexibility to meet immediate needs and make key decisions in an evolving context.

UNICEF's approach incorporates accountability, localization and sustainability to enhance humanitarian operations. Interventions around social and behaviour change and accountability to affected populations ensure communities are informed, engaged and empowered to shape decisions impacting their lives.

By fostering strong coordination with humanitarian partners and authorities, UNICEF aims to ensure a swift, well-coordinated response that upholds the well-being of children and families across the Sudan.

UNICEF leads the Education,<sup>29</sup> Nutrition and WASH clusters, and the Child Protection Area of Responsibility. The organization plays a pivotal role in the Health Cluster, the gender-based violence sub-cluster and the Refugee Consultation Forum; and co-chairs the Country Task Force on Monitoring and Reporting.

UNICEF embraces calculated risk management strategies, navigating logistical and political barriers to deliver services to children and families in need, safeguarding their dignity and future.



## Health (including public health emergencies)

- **3,077,116** children and women accessing primary health care in UNICEF-supported facilities
- **1,334,938** children vaccinated against measles, supplemental dose<sup>32</sup>
- **5,934,678** persons assessing the health service on cholera/AWD including OCV, and other disease outbreaks in UNICEF-supported facilities



## Nutrition

- **5,650,364** children 6-59 months screened for wasting<sup>33</sup>
- **603,298** children 6-59 months with severe wasting admitted for treatment
- **2,805,538** primary caregivers of children 0-23 months receiving infant and young child feeding counselling<sup>34</sup>



## Child protection, GBViE and PSEA

- **2,966,962** children, adolescents and caregivers accessing community-based mental health and psychosocial support
- **460,000** women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions
- **4,834,584** people with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations
- **14,300** unaccompanied and separated children provided with alternative care and/or reunified
- **352,286** children provided with landmine or other explosive weapons prevention and/or survivor assistance interventions<sup>35</sup>



## Education

- **2,364,946** children accessing formal or non-formal education, including early learning
- **1,600,000** children receiving individual learning materials



## Water, sanitation and hygiene

- **9,000,000** people accessing a sufficient quantity and quality of water for drinking and domestic needs
- **700,000** people accessing appropriate sanitation services
- **9,000,000** people reached with handwashing behaviour-change programmes
- **1,800,000** people reached with critical WASH supplies



## Cross-sectoral (HCT, SBC, RCCE and AAP)

- **100,000** households reached with UNICEF-funded humanitarian cash transfers (including for social protection and other sectors)
- **72,000** people sharing their concerns and asking questions through established feedback mechanisms
- **4,081,442** people participating in engagement actions for social and behavioral change

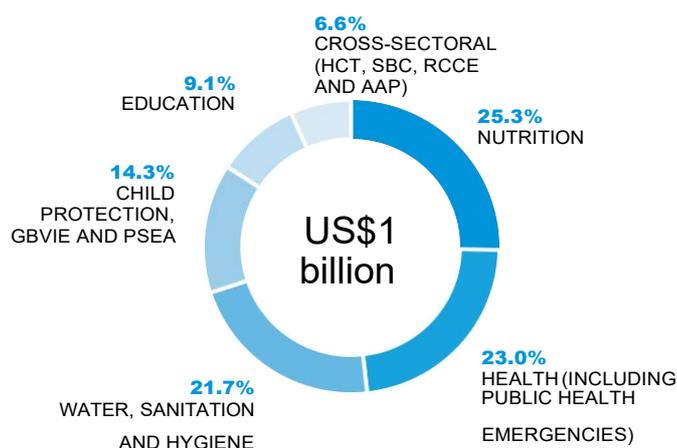
## FUNDING REQUIREMENTS IN 2025

UNICEF urgently requires \$1 billion to provide critical support to 13.1 million vulnerable children and adults in the Sudan, addressing their needs for child protection, education, health, nutrition and WASH services and for cash-based interventions. As the conflict intensifies, the complexity of the humanitarian response grows. The situation for children is becoming increasingly dire, heightening the urgency of the needed response and ultimately driving up the cost of aid efforts.

In the face of rising operational costs, UNICEF remains adaptable and proactive, committed to delivering life-saving assistance to those in greatest need. To navigate the challenge, UNICEF is strengthening its direct implementation capacity and fostering partnerships with local organizations – allowing for more efficient resource use and a greater impact on children’s lives. By integrating humanitarian, development and peace nexus programming, UNICEF seeks to achieve improved outcomes and build long-term resilience in affected communities.

The stakes could not be higher. Without immediate intervention, millions of children will be deprived of the essential services required for survival and dignity. More than 772,000 children suffering from severe wasting are at a heightened risk of death without timely treatment. An additional 20.3 million people may lack access to essential health care services and medical supplies, leaving them vulnerable to deadly disease outbreaks. A generation of children – 17 million in total – could lose access to education. And more than 11 million boys and girls will remain at risk of violence, exploitation and trauma, including the alarming threat of child marriage.

UNICEF’s role in addressing these urgent needs is more critical than ever. Flexible funding is essential to ensure a rapid, efficient and impactful response that safeguards the lives, dignity and future of children and their caregivers in the Sudan.



Sector	2025 requirements (US\$)
Health (including public health emergencies)	233,276,300
Nutrition	257,226,174
Child protection, GBVIE and PSEA	144,811,336 <sup>36</sup>
Education	92,797,895
Water, sanitation and hygiene	220,541,000
Cross-sectoral (HCT, SBC, RCCE and AAP)	67,543,191 <sup>37</sup>
<b>Total</b>	<b>1,016,195,896</b>

## ENDNOTES

1. Office for the Coordination of Humanitarian Affairs (OCHA), Sudan Humanitarian Needs Overview and Response Plan 2025, Executive Summary, December 2024, available at <<https://reliefweb.int/report/sudan/sudan-humanitarian-needs-and-response-plan-2025-executive-summary-issued-december-2024>>.
2. OCHA, Sudan Humanitarian Needs and Response Plan 2024, December 2023, available at <[www.unocha.org/publications/report/sudan/sudan-humanitarian-needs-and-response-plan-2024-december-2023](http://www.unocha.org/publications/report/sudan/sudan-humanitarian-needs-and-response-plan-2024-december-2023)>.
3. OCHA, Sudan Humanitarian Needs Overview and Response Plan 2025.
4. UNICEF, "World Bank partners with WHO and UNICEF to boost health care access for 8 million people in Sudan", press release, 12 January 2025, available at <[www.unicef.org/sudan/press-releases/world-bank-partners-who-and-unicef-boost-health-care-access-8-million-people-sudan](http://www.unicef.org/sudan/press-releases/world-bank-partners-who-and-unicef-boost-health-care-access-8-million-people-sudan)>.
5. Integrated Food Security Phase Classification (IPC), Sudan: Acute food insecurity situation – Updated projections and FRC conclusions for October 2024 to May 2025, 24 December 2024, available at <[www.ipcinfo.org/ipc-country-analysis/details-map/en/c/1159433/?iso3=SDN](http://www.ipcinfo.org/ipc-country-analysis/details-map/en/c/1159433/?iso3=SDN)>.
6. OCHA, Sudan Humanitarian Needs Overview and Response Plan 2025.
7. This year's approach focuses on providing timely and targeted support to the most vulnerable populations while prioritizing restoration of essential services and building resilience across the country. The strategy is designed to address both immediate needs and long-term recovery, with a special focus on conflict-affected areas, displaced populations and regions newly accessible for returnees.
8. OCHA, Sudan Humanitarian Needs Overview and Response Plan 2025. Of the 30.4 million people in need, 51.4 per cent are children, 24.4 per cent are women and 15 per cent are people with disabilities.
9. Ibid.
10. The number of people to be reached is calculated based on the highest targeted indicator for each demographic group: 667,469 children aged 0–5 months vaccinated against measles (50 per cent of the target for children under age 1); 5,650,364 children aged 6–59 months screened for wasting; 2,364,946 school-age children (6–17 years old) accessing formal and non-formal education; and 4,374,000 adult women and men targeted with WASH interventions (i.e., 48.6 per cent of the WASH target). The total number of people to be reached includes 15 per cent people with disabilities (10 per cent children with disabilities).
11. The number of children to be reached is calculated based on the highest targeted indicator for each demographic group: 667,469 children aged 0–5 months vaccinated against measles (50 per cent of the target for children under age 1); 5,650,364 children aged 6–59 months screened for wasting; and 2,364,946 school-age children (6–17 years old) accessing formal and non-formal education.
12. OCHA, Sudan Humanitarian Needs Overview and Response Plan 2025.
13. Displacement Tracking Matrix/DTM Sudan, DTM Sudan Mobility Update (15), 5 February 2025, available at <<https://dtm.iom.int/reports/dtm-sudan-mobility-update-15?close=true>>. Prior to April 2023, 3.8 million were displaced in the Sudan; 1.1 million of these have been re-displaced and are included in the post-April 2023 figure.
14. This includes 8.1 million in emergency conditions (IPC Phase 4) and 638,000 in catastrophe/famine conditions (IPC Phase 5). Integrated Food Security Phase Classification (IPC) is an innovative multi-partner initiative for improving food security and nutrition analysis and decision-making. By using the IPC classification and analytical approach, governments, United Nations agencies, non-governmental organizations, civil society entities and other relevant actors work together to determine the severity and magnitude of acute and chronic food insecurity and acute malnutrition situations in a country, according to internationally recognized scientific standards.
15. Even before the conflict escalation in April 2023, the Sudan had one of the highest rates globally of acute malnutrition, at 13.6 per cent of children under age 5.
16. OCHA, Sudan Humanitarian Needs Overview and Response Plan 2025.
17. Ibid.
18. Nutrition Cluster analysis of recently conducted nutrition surveys.
19. Zamzam, Abu Shouk and Al Salam camps in North Darfur and the Western Nuba Mountains.
20. IPC, Sudan: Acute food insecurity situation – Updated projections and FRC conclusions for October 2024 to May 2025, 24 December 2024.
21. Including outbreaks of measles, malaria, pneumonia, diarrhoeal diseases and cholera.
22. OCHA, Sudan Humanitarian Needs Overview and Response Plan 2025.
23. Ibid.
24. Ibid.
25. World Health Organization (WHO), World Malaria Report 2024: Addressing inequity in the global malaria response, WHO, 2024, available at <[www.who.int/publications/item/9789240104440](http://www.who.int/publications/item/9789240104440)>.
26. All sector needs are based on the Sudan Humanitarian Needs and Response Plan 2025 and include vulnerable residents, internally displaced people, refugees and returnees. However, sector needs in this Humanitarian Action for Children appeal include not only Humanitarian Needs and Response Plan numbers of people in need in each sector, but also UNICEF's number of refugees in need in each sector.
27. This includes 3.3 million children under age 5 and 600,000 pregnant and lactating women.
28. In 2024, 17 million out of 19 million school-aged children in the Sudan were out of school for most of the academic year. The calculation to identify the need is based on the Sudan Multisectoral Needs Assessment (MSNA) conducted in 2024. Of the 17 million school-aged children out of school, the MSNA identified 8.4 million as being deprived of education specifically due to the conflict. These children meet the people in need criteria, because their access to education has been disrupted and their well-being compromised due to conflict-related factors. The remaining .1 million is the number of refugees in need of education support.
29. UNICEF co-leads the Education Cluster with Save the Children.
30. UNICEF 2025 programme target includes vulnerable residents, internally displaced people, refugees and returnees.
31. Beyond the UNICEF targets for these interventions, other humanitarian partners are expected to reach the remaining children/families in need.
32. UNICEF targets children under age 1 for measles and supplemental dose vaccination.
33. UNICEF's target is higher than the cluster's target because the Humanitarian Needs and Response Plan does not include a target for screening all children aged 6–59 months for acute malnutrition. The cluster target focuses solely on malnourished children and pregnant and breastfeeding women, whereas UNICEF's approach emphasizes the importance of comprehensive screening for early detection and prevention.
34. Ibid.
35. UNICEF's target is 1 per cent higher than the Mine Action Area of Responsibility target to address escalating needs in this programmatic area due to the emergence of new conflict hotspots, territorial shifts (with the Rapid Support Forces (RSF) losing control in key states) and the return of communities to areas previously under RSF control, which remain hazardous due to unexploded ordnance.
36. This includes \$3,569,000 for providing accessible ways to report sexual exploitation and abuse and \$54,280,000 for prevention and response to gender-based violence.
37. This includes \$50,000,000 for humanitarian cash transfers and \$2,072,000 for accountability to affected populations. The remaining amount is for social and behavioural change communication, including community engagement activities.