



UNHCR
The UN Refugee Agency

Annual Results Report

2022

Sudan

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Section 1: Context and Overview

1.1 Changes to the Operational Context

In Sudan, UNHCR seeks to ensure that the forcibly displaced and stateless have safe access to essential services alongside host communities, contribute to sustainable peace and progressively attain durable solutions. In 2022, the operational context was characterized by a challenging security situation, political and economic uncertainty, and slow progress on the implementation of the Juba Peace Agreement (JPA) and the National Plan for the Protection of Civilians (NPPOC), all of which presented significant risks and constraints to the operation. The circulation of small arms and the absence of rule of law exacerbated crime especially in Darfur. Insecurity and violent clashes related to competition for resources played an important role in multiple and new displacements. Increasing food insecurity continued to be experienced by displaced communities.

At the end of the year and estimated 1.1 million refugees and asylum-seekers were living in Sudan, of whom 76% were registered individually and 2% at group level. South Sudanese refugees represent 71% of the population; Eritrean refugees (12%), Syria (8%), Ethiopia (6%), Central African Republic (2%) and others (1%). Additionally, Sudan has an estimated 3.7 million internally displaced persons (IDPs), of whom about 20% are assisted by UNHCR, as part of the interagency response, through the protection and shelter clusters.

The majority of IDPs remain in a protracted situation whilst new and secondary displacements continue. The protection situation in Darfur remains dire with reports of unlawful killings, arbitrary arrest and detention, abduction, gender-based violence, and grave child rights violations. While UNHCR is implementing UN Peacebuilding Fund projects in Darfur, the unstable environment affects the impact on peacebuilding and social cohesion at large. Due to insecurity, humanitarian access in some areas is limited, with armed escorts unreliable, expensive and increasingly difficult to obtain.

1.2. Progress Against the Desired Impact

1. Impact Area: Attaining Favorable Protection Environments

IMP1: Refugees, asylum seekers, and stateless persons in Sudan enjoy their protection rights in line with the national, regional, and international standards and fair protection procedures

IMP2: IDPs and civilians in high risk areas of Sudan have access to improved protection measures.

Sudan is party to relevant global and regional refugee and human rights conventions and treaties, including the 1951 Convention (with a reservation on Article 26 on freedom of movement for refugees), its 1967 Protocol and the 1969 OAU Convention. In 2014, the Asylum (Organization) Act was adopted reinforcing restrictions on freedom of movement. Though the Act provides for granting refugee status on individual and prima facie basis, the law is applied inconsistently to different categories of refugees, and therefore needs to be amended.

The Government conducts Refugee Status Determination (RSD) with UNHCR technical support and supervision. In 2022 with support from UNHCR, the Commission for Refugees (COR) finalized and adopted the Standard Operating Procedures in RSD. Despite intermittent border closures between Sudan and neighbouring countries, Sudan continued to uphold an open-door policy and persons in need of international protection were able to seek asylum, with no refoulment reported in 2022.

Article 14 of the Asylum (Organization) Act requires refugees to obtain permission from COR to leave their areas of residence, with movement in the absence of legal permission constituting an offence under this Act. In practice, this authorization is granted on limited grounds. The Government of Sudan also requires asylum-seekers to register and stay in the states through which they entered Sudan. Technically, an encampment policy is implemented, albeit differently from one place to another.

On IDPs, UNHCR collaborated with the UN Integrated Transition Assistance Mission in Sudan (UNITAMS) on capacitating Protection of Civilian State-level Committees. UN agencies collaborated to address the weak capacity of Rule of Law entities, including civilian law enforcement, and the culture of impunity. UNHCR partnered with UNITAMS and other UN agencies in training of trainers workshops and awareness-raising for Sudanese security actors and specialized training for the police on gender-based violence and community policing. As protection cluster lead agency, UNHCR continued to coordinate protection and responses to emergencies and engage in advocacy on protection issues affecting IDPs in Sudan

2. Impact Area: Realizing Rights in Safe Environments

IMP3: Refugees and IDPs have access to relevant multi-sector humanitarian services and their basic needs met

IMP4: Refugees are empowered, and their wellbeing is improved through their inclusion in social service systems and development programmes by national and international partners.

Indicators	Population Type	Baseline (2022)	Actual (2022)
2.2 Proportion of PoCs residing in physically safe and secure settlements with access to basic facilities	IDPs	8.00%	11.55%
2.2 Proportion of PoCs residing in physically safe and secure settlements with access to basic facilities	Refugees and Asylum-seekers	28.25%	30.04%
2.2 Proportion of PoCs residing in physically safe and secure settlements with access to basic facilities	Returnees	28.57%	39.55%
2.3 Proportion of PoC with access to health services	Refugees and Asylum-seekers	79.22%	84.74%

In 2022, a total of 9.7 million people were reached by UNHCR, partners and other actors with multisectoral assistance (food, health, nutrition, shelter, water, sanitation, and hygiene (WASH), education, shelter and non-food items (NFIs)). This includes 707,885 refugees and asylum-seekers, improving their living conditions and meeting their basic needs.

Refugees are included in national vaccination campaigns, including tuberculosis (TB) and HIV/AIDS programs. Though there was a considerable increase in measles vaccination coverage as well as births attended by skilled health personnel for refugees and asylum-seekers, 75% of the target population was covered. There is also a slight increase in the proportion of refugees and asylum-seekers who can access health services.

According to UNHCR's access to education assessment in 2022, enrolment and retention rates remain stable. Education support for refugees in Gedaref, Kassala and Gezira states is ensured by the Ministry of Education (MoE) since 2008. In White Nile, UNHCR has a partnership agreement with the State MoE. In Khartoum and all Darfur states, refugees have full access to public schools and have been granted the same status as nationals.

Improvements in accessing water for domestic use and household latrines have also been reported across all population groups. Despite improvements, household latrine coverage remains very low for all population groups and water coverage is low especially for returnees and IDPs.

Only a small percentage of the population, especially among IDPs, reside in physically safe and secure settlements. About one third of refugees and asylum-seekers reside in spontaneous settlements which can be attributed to those living in formal camps. Although improvements in shelter conditions have been made, the proportion living in secure conditions remains low at 19%. Improvements in shelter conditions for returnees and IDPs have also been recorded.

A higher proportion of refugees and asylum-seekers received in-kind or cash assistance compared to the previous year, while the number remained the same for IDPs and lower for returnees

3. Impact Area: Empowering Communities and Achieving Gender Equality

IMP5: Refugees, IDPs and returnees in the country are increasingly empowered to make decisions that affect their lives and to create a peaceful living environment for themselves and the host communities.

Indicators	Population Type	Baseline (2022)	Actual (2022)
3.2a Proportion of PoC enrolled in primary education	IDPs	62.50%	74.11%
3.2a Proportion of PoC enrolled in primary education	Refugees and Asylum-seekers	35.00%	37.75%
3.2b Proportion of PoC enrolled in secondary education	Refugees and Asylum-seekers	5.00%	7.04%
3.3 Proportion of PoC feeling safe walking alone in their neighborhood (related SDG 16.1.4).	IDPs	25.00%	40.00%
3.3 Proportion of PoC feeling safe walking alone in their neighborhood (related SDG 16.1.4).	Refugees and Asylum-seekers	30.00%	38.00%

UNHCR continued to work with some 180 Community-Based Protection Networks (CBPN) and Community Reconciliations Committees (CRC) in refugee and IDP settings across the country, directly providing support to 88 such structures. CBPNs were trained to increase their capacities and continued to play a critical role in raising awareness on protection issues in their communities and identifying persons with specific needs in need of additional support or referral to other services. Teachers trained on psychosocial

support and other topics together with awareness raising on education by the CBPNs among other channels resulted in notable increase in school enrolment. This contributed positively to the social cohesion especially between the refugees living outside of the camps integrated within the hosting communities.

Further, UNHCR worked with women, persons with disabilities and youth groups, as well as with CRCs and “crop protection committees” to prevent conflict and displacement during the agricultural season. The prioritization of the preventive nature of their work has been effective in resolving disputes and thus preventing larger-scale conflict and displacement and brought further understanding and peaceful co-existence between communities for farmers and herders.

In West and Central Darfur, UNHCR’s community-based protection orientation has been supported by the construction of multi-purpose community centres managed by the communities themselves. In these centres, communities can gather and socialize, exchange views, and work to resolve issues. They can also use the space for training and some livelihood activities. These spaces allow for greater community self-management.

Lastly, UNHCR developed a three-year livelihoods strategy (2023-2025) to augment the country protection and solutions strategy and respond to the “National Solutions Strategy for Displacement in Sudan” adopted by the Government of Sudan. It aims to promote self-reliance and economic inclusion of refugees, IDPs, returnees and host communities. The strategy adopts and sets the pace for implementation of the whole society approach by engaging a wide range of actors to promote economic empowerment, self-reliance, and inclusion of forcibly displaced populations in planning systems.

4. Impact Area: Securing Solutions

IMP6: Sudanese refugees, IDPs, and returnees benefit from peacebuilding and improved conditions in areas of origin and an increasingly enabling environment towards durable solutions.

IMP7: By 2002, refugees attain durable solutions or access alternative pathways to solutions.

Indicators	Population Type	Baseline (2022)	Actual (2022)
4.2a Number of PoC who departed on resettlement. [GCR 3.1.1]	Refugees and Asylum-seekers	500	497
4.2b Number of PoC who departed through complementary pathways	Refugees and Asylum-seekers	500	364
4.3a Number of stateless persons for whom nationality is granted or confirmed.	Stateless Persons	0	1,353

Sudan’s fragile security and economic conditions dissuaded many Sudanese refugees and IDPs from returning to their places of origin. Nevertheless, the Government of Sudan developed a national durable solutions strategy for IDPs, refugees, and returnees in 2022, which paved the way towards the development of comprehensive durable solutions for displaced persons in Sudan and constitutes a critical step under the IGAD Solutions Initiative.

Despite political upheaval in the country, durable solutions are feasible in some areas. For instance, in North Darfur, UNHCR as a co-chair of the Area-Durable Solutions Working Group provided technical support to the government in drafting the North Darfur Durable Solutions Strategy. Additionally, UNHCR and partners implemented four UN Peacebuilding Fund projects in Darfur which contributed to resilience and solutions strategies and programming. Where the protection environment for refugees was affected by general insecurity and intermittent conflict between refugee and host communities over scarce resources, the implementation of Community Support Projects supported social cohesion and peaceful coexistence.

With the global upscale of activities and increase in resettlement quota allocation for the Sudan operation, 1,319 refugees of seven nationalities were submitted for consideration for resettlement to various third countries, exceeding the allocation of 1,200 slots allowed for an increased number of refugees to potentially access long-term solutions. The operation also modified resettlement procedures to ensure equitable

access for Sudan's various refugee nationalities and vulnerable groups. In 2022, 497 refugees benefitted from resettlement opportunities in Australia, Canada, Norway Sweden, and the United States. Additionally, 364 refugees travelled to third countries through complementary pathways (i.e., family reunification and private or community sponsorships), but this figure represent those known or supported by UNHCR, but many refugees access these solutions by themselves.

On statelessness, through the window opened within the Sudanese Civil Registry to process nationality applications for those who can benefit from the 2018 Nationality Act Amendment, 1,353 individuals with unconfirmed nationality status were able to acquire Sudanese nationality documents. These individuals are mainly those with a Sudanese mother and a non-Sudanese father, with long residence in Sudan, or from Dinka Abyei/Ngok

1.3 Challenges to Achieving Impacts

Political instability and reduced development aid from the international community following the 2021 military takeover presented challenges to the realization of intended outcomes for the people UNHCR serves in Sudan. The poor economic situation and rising food insecurity have led to increased protection risks, thus limiting the impact of UNHCR's interventions. The suspension of most development aid also limited the degree to which integration efforts could be pursued for health, education, and livelihoods.

Limitations on the capacity of government line ministries have stalled progress on priorities such as the effective inclusion of refugees into national services. Limited partner capacity in protection has likewise hampered the quality of programme implementation. Lack of strong operational partners in protection further limited the impact of UNHCR coordination efforts across the operation. The complex security situation in Darfur and South Kordofan affected the operation negatively and the extent results could be achieved.

Funding constraints have limited the extent of UNHCR programming in critical protection areas for all population groups, particularly access to legal services/civil documentation, child protection and gender-based violence interventions, and provision of services or support. Meanwhile, limited durable solutions prospects continue to persist for refugees due to unconducive situations in their countries of origin for voluntary repatriation and very small resettlement quota allocated for Sudan, compared to the huge needs

1.4 Collaboration and Partnerships

In line with the Refugee Coordination Model (RCM) and the Global Compact on Refugees (GCR), UNHCR pursued a multi-sectoral approach to strengthen collaboration with all stakeholders within the triple nexus and to ensure the delivery of assistance to the displaced population. In Sudan, the RCM is implemented alongside the Inter-Agency Standing Committee (IASC) cluster approach. Both structures co-exist in the spirit of the UNHCR-OCHA Joint Note on mixed situations. UNHCR and COR co-chair the Refugee Consultation Forum at national level and the Refugee Working Groups at sub-national level.

UNHCR developed its response through a comprehensive consultative process involving all stakeholders, including implementing and operational partners, government actors and people it serves. In 2022, UNHCR signed partnership agreements with 21 government agencies, 25 international NGOs, 9 national NGOs, and 2 UN agencies and Memorandum of Understanding (MoUs) with 3 operational partners. UNHCR also worked collaboratively with other UN agencies, including WFP, UNICEF, WHO, and OCHA, in their respective areas of mandate and in implementing joint initiatives, including the operationalization of different bilateral Letters of Understanding (LoUs). These partnerships and collaboration arrangements supported the operation to implement planned programmes for the displaced and leveraged on the advantages of working with others and taking full advantage of the capacity built and established networks to enhance efficiency and effectiveness

in delivery of needed services for refugees and forcibly displaced people.

To enhance robust partnerships and maximize resources, the operation undertook a streamlining and rationalization exercise amid declining resources. To strengthen partnerships in the implementation of Sudan's Global Refugee Forum (GRF) pledges and the localization agenda, UNHCR strategically increased partnership engagements with line ministries and other government counterparts in three key sectors (health, education, and WASH) to enhance and support the gradual inclusion and integration of refugees in service delivery in these sectors.

UNHCR continued to lead protection and Emergency Shelter/ Non-Food Items (ES/NFI) clusters in 2022 within the IASC coordination mechanism and led the development of the sector chapters in the Humanitarian Needs Overview and Humanitarian Response Plan for Sudan. UNHCR's Shelter and NFI Cluster coordination and leadership role is underpinned by a strong operational footprint in the sector. In addition, the UNHCR Common Pipeline plays a crucial role in emergency preparedness efforts and is accessible to both implementing and operational partners. UNHCR's robust procurement capacity, which leverages global framework agreements and a country-wide network of nine warehouses, enabled UNHCR to earn the trust of donors and secure funding from pooled funds.

Mixed migration and counter trafficking responses are coordinated through the State Committee on Counter-trafficking (CCT) in Kassala, chaired by Kassala Ministry of Social Welfare and supported by UNHCR, and the East Sudan Mixed-Migration Working Group.

Section 2: Results

2.1. Outcomes and Achievements

1. Outcome Area: Access to Territory, Reg. and Documentation

Outcome 1.1: All refugees and asylum seekers have unhindered access to territory, are biometrically registered and receive relevant documentation.

Indicators	Population Type	Baseline (2022)	Target (2022)	Actual (2022)
1.1 Proportion of refugees and asylum seekers registered on an individual basis.	Refugees and Asylum-seekers	65.46%	100.00%	76.44%
1.2 Proportion of children under 5 years of age whose births have been registered with a civil authority. [SDG 16.9.1 - Tier 1]	Refugees and Asylum-seekers	14.51%	20.00%	18.31%
1.3 Proportion of PoC with legally recognized identity documents or credentials [GCR 4.2.2].	Refugees and Asylum-seekers	19.35%	20.00%	21.48%

Progress Against the Desired Outcome

At the start of 2022, COR and UNHCR registration teams had individually registered 65% of the population of refugees and asylum-seekers in Sudan. Initiatives in 2022 targeted bringing this to 100% by the end of the year. Out of the population of 1,129,090 refugees and asylum-seekers, a total of 863,101 (76%) were individually registered in UNHCR's registration database (proGres v4). The population is distributed in the five main areas of operation as follows: Darfurs, 186,636 (84% registered), East operation inclusive of Blue Nile, 231,983 (78% registered), Khartoum, 308,030 (61% registered), Kordofans, 120,810 (92% registered) and White Nile, 281,631 (80% registered).

The level of individual documentation increased in 2022 with the scale-up of plastic COR ID card issuance in Khartoum (38,067), East (22,377) and Kordofans (1,864). Deployment of the COR ID issuance in Darfurs and White Nile State is planned in 2023. By the end of 2022, the coverage of ID card issuance was at 21% of the eligible population of refugees and asylum-seekers aged 16 years and above.

Initiatives under this outcome area have enabled UNHCR to advance its positioning as a trusted leader on data and information among the displaced. Through this, UNHCR has facilitated humanitarian partner activities such as through WFP which received refugee data facilitating food and cash assistance to vulnerable refugees in over 70 field locations. In addition, the Norwegian Refugee Council (NRC) and other partners were provided with data to allow for targeting for various interventions such as shelter, non-food items and multipurpose cash. Feedback from these initiatives have allowed UNHCR to maintain an updated registration database especially where the Global Distribution Tool was used thereby ensuring that contact with assisted refugees is recorded.

On access to civil registration, although the legal and policy framework are favourable, the extreme low capacity of the Civil Registry continued to pose serious challenge to the implementation of birth registration and issuance of documentation. Particularly since the military takeover of October 2021, Civil Registry as part of the police forces, became involved in other tasks including public control. This, coupled with continuous employees' turnover, had negatively impacted implementation of civil registry and documentation activities. In addition, excessive fees imposed on birth certificates also contributed to the challenges in achieving the target given the limited resources available.

Challenges to Achieving Outcome

Demonstrations, security related movement restrictions, and intermittent strikes by COR staff significantly undermined productivity, as nearly 50% of working days were either cancelled or shortened for these reasons. There were also difficulties to resolve issues around documentation and birth registration also proved a bottleneck for the issuance of ID cards, birth registration and Convention Travel Documents.

In Gedaref, temporary access restrictions to the camps and border areas affected timely registration from September to December 2022. In September, the military restricted the access of humanitarian organizations to Hamdayet border area citing security concerns due to intensified fighting in Ethiopia. A disconnect between the Civil Registry Office in Gedaref and Khartoum in relation to the release of funds for birth certificates led to a backlog with issuing. As a result, only 203 birth certificates were issued in 2022 out of a planned 1,000.

2. Outcome Area: Status Determination

Outcome 1.2: Asylum seekers have their status determined in line with national and international standards

Progress Against the Desired Outcome

In 2022, the management of the backlog and case processing by the Commissioner for Refugees (COR) continued to be limited, despite intensive efforts to improve monitoring, scheduling, and data entry of all Refugee Status Determination (RSD) events. However, in general, recognition rates remained very high, appropriate to the profiles undergoing determination, and opportunities for appeal were available to those rejected. RSD was limited primarily to Ethiopian and Eritrean individuals, as South Sudanese refugees continue to be recognized on a prima facie basis and do not require RSD. Asylum-seekers who are Syrian and Yemeni nationals do not have access to the state asylum system as they are considered brothers and sisters under the Arab/Islamic notion of asylum. However, following the 2021 military takeover, Syrian and Yemeni nationals have not been accorded favourably as they were under the previous government. A total of 3,252 asylum-seekers underwent RSD procedures registering a 90% recognition rate, a considerable increase from 2021. Refugees and asylum-seekers have the right of access to the judicial system for civil and criminal matters and 3,997 individuals benefited from legal assistance services provided by legal aid partners.

UNHCR continued to maintain a channel for mandate RSD when necessitated by case profiles, where national law or attitudes are considered likely to prevent full and accurate assessment of the case, for example, in certain Gender-based Violence (GBV) cases, or involving lesbian, gay, bisexual, transgender and intersex (LGBTI) profiles, particularly if outside of the usual nationalities encountered. Shortcomings in the data maintenance of RSD cases in previous years was partially remedied by UNHCR-led data updating exercises during the year, to align electronic data and physical files.

In Kassala, RSD activities were carried out by COR adjudicators in Shagarab reception centre with technical and logistical support of UNHCR throughout 2022. A total of 2,544 individual RSD cases were processed, at the end of 2022, of which 2,541 individual cases were recognized as refugee on the first instance while 3 cases were rejected and referred for adjudication to the Board of Appeal who reviewed the primary decisions of the COR adjudicators and granted refugee status upon the cases. With support of UNHCR, the Board of Appeal was established and continued to convene on an ad hoc basis, reviewing cases in appeal for international protection in Sudan.

To increase the capacity of the COR RSD adjudicators, five training sessions were organized for seven RSD adjudicators and 26 multifunctional staff drawn from COR and operational partners. Following the election of the Board of Appeal, UNHCR provided capacity building trainings tailored towards enhancing the professional capacity and knowledge of the essentials of RSD, international protection regimes and UNHCR standards and standard operating procedures. The recognition rate has been over 99%, particularly for Eritreans in East Sudan.

Challenges to Achieving Outcome

Lack of familiarity and capacity in using UNHCR's registration database, proGres, contributed to slow or incomplete recording of data. Additionally, the lack of capacity to monitor the asylum-seeker caseload, lack of continuous registration and verification, and closure/inactivation of absent individuals contributed to a backlog of cases.

In the field, RSD activities were affected throughout the year due to persistent connectivity issues, collective work strike by COR staff, downsizing of RSD activities in observation of restrictions resulting from COVID-19, electricity outages, and fuel shortages compounded by lengthy processes of pre-screening security clearance by the security institutions, for example in Shagarab. No show by applicants to the scheduled RSD interviews and poor scheduling also remained as major challenges.

3. Outcome Area: Protection Policy and Law

Outcome 1.3: Refugee policy changes are made to align national refugee framework with the GRF commitments.

Outcome 1.4: The national refugee management and coordination is functional and capacitated

Outcome 1.7: Risks of statelessness are reduced, and statelessness is resolved equitably for men and women.

Progress Against the Desired Outcome

UNHCR held preparatory meetings with the Civil Registry and shared information with other stakeholders on the state on birth registration of 1,500 children from refugee, IDP, returnee and host communities. However, the actual birth registration did not take place in the respective states, for example in Blue Nile, due to operational challenges that persisted throughout the year. These include multiple increases in the cost of birth certificates and state levies and high turnover of Civil Registry staff at the federal and state levels. Nevertheless, UNHCR, COR and UNFPA issued birth notifications for children born in the camps in addition to biometric registration and documentation. UNHCR advocated for the inclusion of refugees in public services such as health and education as per Sudan's GRF commitments. Advocacy at the local level provided the basis for ongoing support to line ministries, especially the Ministry of Health and Ministry of Education, to progressively include refugees in the provision of these public services.

UNHCR conducted protection training and facilitated six capacity building workshops for COR, the Humanitarian Aid Commission, line ministries and humanitarian actors (implementing and operational partners) in the country on the UNHCR's protection mandate, principles of partnership, and responsibilities in the protection of refugees and asylum-seekers.

UNHCR has advocated for the implementation of the Framework Agreement on the Status of Nationals of the other State in October 2012 (which provides for enacting the 2012 "Four Freedoms" Agreement between the Republic of Sudan and the Republic of South Sudan for South Sudanese living in Sudan) that ensures access of South Sudanese in Sudan and Sudanese in South Sudan to key social and economic rights. UNHCR also advocated with various stakeholders, including the Governments of Sudan and South Sudan, the African Union, UN missions in both countries and other stakeholders in its full implementation of the framework of the IGAD Solutions Initiative. This entailed advocacy for the full implementation of the freedom of residence, the freedom of movement; the freedom to undertake economic activities, and the freedom to acquire and dispose of property as provided for by the 2012 Four Freedoms Agreement. This aims to ensure that steps are taken to facilitate greater access of South Sudanese to the freedoms provided for by the agreement in accordance with relevant laws.

Challenges to Achieving Outcome

The capacities of Government institutions and partners, especially national NGOs, is limited and efforts to increase their capacity through attendance of coordination mechanisms and thematic awareness raising sessions on refugee protection and assistance are critical.

Despite a generally favorable protection environment for refugees, the political climate has not been conducive to progress on the implementation of the Four Freedoms Agreement and the IGAD Solutions Initiative. Advocacy efforts will continue to be needed to make progress in attaining durable solutions and enhancing protection, including local integration for refugees.

The programmatic capacity of the Civil Registry, multiple increase in the cost of birth certificates and introduction of fees for regular birth certificates, and lack of political will and commitment led to non-achievement of the target of 1,500 birth certificates for refugees and IDPs, returnees and vulnerable host community members in the state.

4. Outcome Area: Gender-based Violence

Outcome 1.8: Incidents of SGBV and PSEA among persons of concerns are reduced, prevented, and victims are supported through referral pathways and sensitization mechanisms.

Indicators	Population Type	Baseline (2022)	Target (2022)	Actual (2022)
4.1 Proportion of PoC who know where to access available GBV services	IDPs	87.27%	90.00%	94.23%
4.1 Proportion of PoC who know where to access available GBV services	Refugees and Asylum-seekers	64.49%	85.00%	71.95%
4.1 Proportion of PoC who know where to access available GBV services	Returnees	85.00%	90.00%	90.00%
4.3 Proportion of survivors who are satisfied with SGBV case management services.	IDPs	46.43%	50.00%	65.62%
4.3 Proportion of survivors who are satisfied with SGBV case management services.	Refugees and Asylum-seekers	22.32%	30.00%	41.22%
4.3 Proportion of survivors who are satisfied with SGBV case management services.	Returnees	54.17%	70.00%	65.52%

Progress Against the Desired Outcome

Disclosures and self-referrals of GBV have increased compared to the previous years due to improved reporting. In 2022, 712 GBV incidents were reported and provided with safe and confidential survivor-centered case management services. Evidence obtained through offline trackers and assessments indicate that the main forms and types of GBV are sexual and physical violence, intimate partner, violence, rape, forced and child marriage, economic and emotional violence, female genital cutting/mutilation and forced sex work.

Increased reporting of GBV incidents in the 2022 GBV dashboard indicates that majority of the population know where to seek GBV services. This was further supported by the strengthening of community sensitization through various regular awareness campaigns and 16 days of activism against GBV and International Women's Day.

Capacity building trainings were conducted for Community-Based Protection Networks, UNHCR and partner staff to strengthen knowledge and capacity on GBV case management. In addition, proGres v4 GBV module Training of Trainers (ToT) was provided to focal points in all field locations to enhance staff knowledge and expertise in using the GBV module for case management and to standardize tools in GBV case management.

Moreover, women empowerment projects were initiated in some of the locations like West Kordofan and East Darfur states through livelihood projects. Women received income generation activities that provided them with alternative income which contributed to reducing vulnerability to GBV and sexual exploitation and abuse. In Gedaref, projects also engaged men and youth groups to achieve transformative social change through peer support networks that challenges broad-based beliefs, attitudes, behaviors, and social norms that condone or contribute to violence, sexual exploitation, and abuse. In Khartoum, the establishment of Community-Based Mental Health and Psychosocial Support (MHPSS) in one of the camps has improved the referral and self-disclosure by GBV survivors. It has also improved the quality of MHPSS service provided in the camp. Additionally, collaboration with UNFPA was strengthened in Darfur and GBV services by UNFPA was extended to refugees.

Challenges to Achieving Outcome

GBV risks continue to be exacerbated due to, inadequate livelihoods opportunities, poor lighting in camps/settlements, limited access to energy and the long distances that women and girls need to walk to collect firewood and fetch water, and lack of adequate gender segregated latrines. This is further aggravated by socio-political context and economic crisis of the country of asylum and massive reduction of food rations by WFP (50%) for refugees which is triggering additional GBV risks. The onward movements, hard labour outside the camps, sex in exchange of money, alcohol brewing and abuse, and other harmful coping mechanisms are among the various protection risks.

In addition, limited community participation in GBV prevention, underreporting of GBV cases due to fear of retaliation and social stigmatization and reconciliation of GBV incidents at the community level, limited capacity of NGOs to respond, lack of women empowerment opportunities, non-standardized case management tools, gaps in referral pathways, insufficient data on GBV, insufficient legal services, psychosocial support, and health response to survivors continue to challenge the operation in GBV prevention, risk mitigation and response.

Reliance on traditional justice mechanisms is also a barrier to survivor-centered justice and accountability. Women's and girls' participation and empowerment activities are also impeded due to lack of resources.

With the large percentage of women and girls across the camps, there is a need to expand and increase awareness raising activities and capacity building sessions for both communities and state actors on GBV prevention and response especially on issue of refugees' plight, women's and human rights, gender equality and women's right to reproductive health and security from violence. Considering the sensitivity of GBV issues from both communities and government sides such as underreporting from the community and delay in communicating and messaging GBV incidents from the government or camp management side, this remains a critical issue that affects the safety and security of refugee women and girls and need more advocacy work at state and federal levels.

More resources are needed to integrate GBV prevention and mitigation activities across the sectors mainly WASH, education, shelter/NFIs and health

5. Outcome Area: Child Protection

Outcome 1.5: Registered with specific needs benefit from targeted services, including best

interest procedures.

Indicators	Population Type	Baseline (2022)	Target (2022)	Actual (2022)
5.1 Proportion of children at heightened risk who are supported by a Best Interests Procedure.	Refugees and Asylum-seekers	41.67%	50.00%	68.86%
5.2 Proportion of children who participate in community-based child protection programmes	Refugees and Asylum-seekers	43.00%	65.00%	59.14%

Progress Against the Desired Outcome

Efforts were made to strengthen Child Protection (CP) case management. A total of 7,971 children were provided with Best Interest Procedure (BIP)/case management services and referred to service providers who supported them with appropriate needs such as legal assistance, medical care, and psychosocial support. Out of the target, 93% was achieved. Additionally, 23,579 identified Unaccompanied and Separated Children (UASCs) were provided with appropriate alternative care arrangement, or twice the set target. In some locations, UASCs were provided kits comprising hygiene items and food and non-food items. Finally, 32,799 boys and girls participated in awareness-raising activities on CP issues.

UNHCR supported 53 children (22 boys and 31 girls) with legal assistance and 422 with multi-purpose cash assistance. The supported children accessed CP activities at multipurpose community centers. Children were also referred to schools and CP services. Communities also received key messages as well as sensitization on child rights, forms of abuse, female genital mutilation, domestic violence, early marriage, and harmful traditional practices.

Furthermore, to strengthen Community-Based Protection Networks (CBPN), UNHCR together with the child protection partners established new CBPNs and provided them with capacity building trainings and material support to understand their role and responsibilities to prevent, respond and mitigate to risks to children at risk and how to identify, report, and refer CP cases to respond to their needs. At community level, UNHCR continued to capacitate CBPNs to identify and refer children with specific needs. UNHCR coordinated with operational partners and ensured the protection needs of refugee and displaced children were on the agenda in child protection sub-working groups.

UNHCR together with operational partners and the state government continued strengthening measures and structures to prevent and respond to abuse, neglect, exploitation and violence affecting children through timely identification of UASCs and children at risk, case management of refugee UASCs and children-at-risk and referral to mental health and psychosocial support services, family unification, birth registration, best interests of the child procedures, and child friendly spaces.

In addition, proGres v4 CP module training of trainers was provided to the CP focal points in all field locations to enhance staff knowledge and expertise in using the CP module for case management and to facilitate harmonization in the application of CP BIP guidelines and the use of standardized tools in CP case management.

Challenges to Achieving Outcome

There remain critical gaps though targets were achieved. More resources are required to achieve minimum standards to bring impactful and sustainable changes to children under UNHCR's mandate.

Lack of access to livelihood opportunities for families and youth, limited resources, and staff turnover impacted partner capacity to provide quality Child Protection services to prevent and address risks facing children, including UASC and children with disabilities. Movement restrictions for refugees act as a push factor to seek the services of smugglers to facilitate their irregular onward movements, often exposing them especially children and adolescents to human trafficking.

In addition, inaccessibility to civil documents and socioeconomic factors affected children's access to education, forcing many to drop out of school and increased risk of statelessness. Additionally, there were limited activities targeting adolescents and youth including life skills training.

6. Outcome Area: Safety and Access to Justice

Outcome 1.6: Refugees and asylum seekers caught in mixed flows enjoy access to asylum procedures and related services

Progress Against the Desired Outcome

Eastern Sudan shares a border with Ethiopia and Eritrea and continues to be a transit and destination point on the migratory route from the Horn of Africa to Europe, mainly through the central Mediterranean route. Protection assistance was provided to 566 people (291 females/275 males) who were intercepted in various localities. Of this number, 438 were from Ethiopia, 102 from Eritrea and 26 from Somalia. Services ranged from court representations, access to documentation, psychological counselling, family reunification, medical assistance, and in-kind support. A total of 144 migrants who opted to seek asylum were supported to access the procedures; 59 refugees arrested for allegedly being trafficked were unconditionally released and handed over to UNHCR and COR. Five trainings sessions were held with law enforcement actors in various localities in Gedaref on access to justice and remedies for victims of trafficking as well as judicial procedure and structures (national and international) for the prosecution of perpetrators. Following the training sessions with law enforcement officials, a positive change was observed in the form of expedited referrals to UNHCR for intercepted migrants and refugees.

Mixed migration coordination structures were strengthened, including partnership with government actors, UN agencies and other stakeholders at state level to address mixed migration challenges. A Mixed Migration Working Group has remained active with monthly sessions to facilitate complementary actions including joint advocacy and capacity building. Youth programming was linked to mixed migration initiatives. A youth working group was established in February 2022 to coordinate youth empowerment initiatives from different actors including consolidating initiatives to empower youth through livelihood projects.

Communication with communities on mixed migration was enhanced through social media tools (Telegram and WhatsApp with 127 users) as platforms for information campaigns for at-risk groups. A total of 122 community dialogues were conducted to address frequently asked questions on trafficking. A community-based approach to counter-trafficking response was strengthened and 21 Telling the Real Story (TRS) volunteers were recruited and trained to conduct information campaigns in the camps. Community volunteers facilitated door-to-door campaigns reaching 5,260 households and conducted 530 focus group discussions on mixed movement to counter false narrative of smugglers about trafficking and smuggling. Some 300 posters with information on onwards movement were put up in the camps.

Challenges to Achieving Outcome

Sudan's encampment policy and challenges to obtain travel permits have prompted some refugees to leave the camps without the necessary permits, with some resorting to smugglers to leave the camps.

Onward movement is viewed through a national security lens, affecting vulnerable refugees and migrants. All members of the ad hoc state level committee are drawn from security agencies. Additionally, the Government does not currently have a data system to track intercepted victims of trafficking/smuggling

7. Outcome Area: Community Engagement and Women's Empowerment

Outcome: 5.1 Community-based protection systems & structures supported and enhanced to identify and react to protection gaps of PoCs.

Outcome: 5.2 Camp coordination and camp management mechanisms and systems efficient and functioning in all formal and informal collective displacement sites and host communities.

Outcome: 5.3 Assistance planning, assessment, and delivery conducted with participation of refugees and host communities, sensitive to age, gender and diversity considerations.

Outcome 2.1 GOS protection of civilian mechanism supported and strengthened for better results in the protection of civilians

Outcome 2.3. Protection coordination strengthened and enhanced

Indicators	Population Type	Baseline (2022)	Target (2022)	Actual (2022)
7.2 Proportion of PoC who have access to effective feedback and response mechanisms.	IDPs	22.39%	25.00%	27.48%
7.2 Proportion of PoC who have access to effective feedback and response mechanisms.	Refugees and Asylum-seekers	57.49%	65.00%	74.74%

Progress Against the Desired Outcome

In Darfur, UNHCR continued to engage with 180 community-based structures in planning and implementing strategies to reduce protection risks and build community resilience. In 2022, UNHCR funded 88 community-based structures, which were capacitated with equipment and resources. Community-based protection networks (CBPN) were capacitated to provide first line responses. UNHCR contributed to the work of the State-level protection of civilian committees where these exist and other structures supporting civilian protection through facilitating State-level dialogue on critical protection issues affecting civilians and capacity building. UNHCR also provided specific support to the Executive Committee of Crop Protection, which was effective in resolving disputes and preventing larger-scale conflict and displacement.

In Kassala, UNHCR successfully supported the organization of community elections. Female representation in leadership structures increased to 50% achieving gender equality at camp levels. Each camp has youth and women sub-committees focusing on issues of concern and seeking ways to empower them.

In Gedaref, community-based protection focused on procedures and outcomes based on the principle of participation and empowerment of individuals and communities to enable them understand their duties and exercise their rights. Community-based protection structures were mapped. Protection monitoring and identification of protection risks at community and individual levels were strengthened. Identification of at-risk refugees was done through door-to-door vulnerability screening in collaboration with COR and partners to document and update data on PSNs with the aim of enhancing protection referrals and targeted assistance. A total of 10,129 refugee households were screened and 4,389 persons with specific needs were recorded. Human and financial resources were allocated to ensure that feedback from persons of concern is systematically collected, acknowledged, assessed, referred, and responded to in a timely, confidential, and effective manner.

In Khartoum, UNHCR restructured Communication with Communities and feedback mechanisms to better ensure that multiple channels are open to all refugees, to help guide them to services, respond to questions, and provide opportunities for the registering of complaints. UNHCR's Protection Hotline was operational with dedicated staff to ensure all calls are fielded and addressed. Information was regularly shared for the UNHCR-WFP Community Feedback Mechanism toll-free number.

Given intermittent access to IDPs in several localities, access to response and feedback mechanism was limited. UNHCR and WFP established a call centre, and efforts are being made for IDPs to be able use it. Monitoring missions and CBPN played a key role in providing response and getting feedback from the

community.

Challenges to Achieving Outcome

Context developments in Sudan hindered achievement of outcomes. These include a lack of implementation of the security arrangements set out in the Juba Peace Agreement such as deployment of joint forces, lack of a clear UN strategy on engagement on protection of civilian (PoC) issues following the events of October 2021, lack of formal establishment and proper resources for State-level PoC committee structures, and an overall weak rule of law.

Operationally, implementation was challenged by limited capacity of protection partners, limited presence of partners with protection expertise, lack of coordination between partners at locality level, and lack of monitoring and feedback on concerns raised by CBPNs. Partnerships and coordination with relevant stakeholders need to be further enhanced. As part of this, protection data and information-sharing between humanitarian and development actors across sectors should be strengthened.

Although efforts were made to ensure female representation in committees, networks and decision-making forums, the domestic responsibilities they bear regularly hinder them from pursuing participation in leadership structures. Women and girls possess insights about the situation of their community and are willing to step forward and provide support. Efforts were made to mobilize them and maximize their participation.

8. Outcome Area: Well-Being and Basic Needs

Outcome: 3.6 Multi-purpose cash grant employed as an efficient means to meet basic needs for refugees

Outcome: 3.7 Safe and renewable energy services for refugees delivered through innovative programmes.

Outcome 2.2 Emergency assistance and appropriate referral services coordinated and delivered for identified victims of violence.

Indicators	Population Type	Baseline (2022)	Target (2022)	Actual (2022)
8.2 Proportion of PoC with primary reliance on clean (cooking) fuels and technology [SDG 7.1.2 Tier 1]	Refugees and Asylum-seekers	16.72%	19.00%	19.57%

Progress Against the Desired Outcome

Safe and renewable energy assistance was provided for both lighting and cooking purposes to both South Sudanese and Ethiopian refugee populations. For the South Sudanese those with ethanol cooking stoves received 30,919 liters of ethanol fuel. Two 5,000 liters of ethanol tanks were installed at Alagaya and Khor Alwaral camps in White Nile. A total of 3,000 persons received fuel assistance. For the Ethiopian population, a total of 2,295 energy efficient stoves and fuel assistance benefited 27,510 refugees in the form of compressed charcoal and sawdust, mesquite charcoal and firewood.

Overall, energy-efficient stoves reduced firewood and charcoal consumption enhancing forest protection and reduced firewood collection frequency and distance travelled by women and girls. The provision of assistance for cooking fuels to vulnerable persons improved their well-being through proper cooking of food. Considering most families still rely on firewood and charcoal consumption, afforestation activities were conducted to restore degraded land in Gedaref, East Darfur and White Nile States. As a result, 126,000 tree

seedlings were produced and 1,320 hectares of plantations were established to restore degraded land and foster peaceful coexistence between refugees and host communities. Environmental conservation training was offered to 1,739 households.

The provision of solar torches and lanterns to families and installation of 281 streetlights in camps were complemented by other operational partners and reduced refugee exposure to toxic flames that could bring forth eye and respiratory infections besides improving security. The solar lamps were easier to manage than the purchase of kerosine for lamps, which was not only unaffordable to most families but also produced unhealthy poisonous flames.

Through multi-purpose cash assistance (MPCA), UNHCR supported a total of 13,509 households (67,545 individuals) comprising 7,708 IDP households, 4,406 refugee households and 1,395 host community households). MPCA was scaled up in Darfur, Kordofan and Gedaref operations during the reporting period. An average of \$65, representing 100% of the non-food component of the Sudan Cash Working Group recommended Minimum Expenditure Basket, was distributed to each benefiting household. UNHCR delivered cash-based interventions in partnership with its financial service provider, through cash over the counter and prepaid ATM card delivery mechanisms. UNHCR's project partners were responsible for other upstream and downstream activities which include beneficiary targeting, referral mechanisms for persons with specific needs, complaints management and post-distribution monitoring (PDM). Results from a PDM conducted in March 2022 revealed that 75% of interviewed households preferred cash or a combination of cash and in-kind support as the modality of assistance. Food, transport, hygiene items, health costs and rent were reported as the top five expenditures from MPCA.

Challenges to Achieving Outcome

Multi-purpose cash grants remained limited to only certain nationalities. However, other forms of assistance were extended to all populations. Delays with the bank were encountered in the replacement of damaged or lost ATM cards, and communication difficulties with COR resulted at times in friction with community members. COR's lack of capacity to produce reliable and timely lists contributed to frustration among beneficiaries. Access constraints also hindered distributions.

For energy and environment, the scale of intervention was low compared to existing gaps for clean cooking stoves and clean cooking fuels due to inflation and reduced budgets. The rainy season and flooding hindered the survival rate of tree seedlings and limited ethanol fuel access due to poor road networks and lack of adequate ethanol storage tanks at camp level. Hence, beneficiaries reverted to non-renewable energy use during that period.

9. Outcome Area: Sustainable Housing and Settlements

Outcome: 3.1 Appropriate shelter and housing delivered for refugees and IDPs.

Outcome: 3.2 Basic domestic items delivered for refugees and IDPs.

Indicators	Population Type	Baseline (2022)	Target (2022)	Actual (2022)
9.1 Proportion of PoCs living in habitable and affordable housing.	IDPs	20.00%	25.00%	29.67%
9.1 Proportion of PoCs living in habitable and affordable housing.	Refugees and Asylum-seekers	11.77%	18.00%	19.23%
9.1 Proportion of PoCs living in habitable and affordable housing.	Returnees	21.74%	40.00%	41.36%

Progress Against the Desired Outcome

In 2022, UNHCR and other sector partners managed to respond to the urgent shelter and basic domestic needs of the most vulnerable. A total of 60,122 households were reached with a range of shelter interventions including provision of emergency shelter (emergency shelter kits, family tents, shelter construction materials and cash for emergency shelter) and the construction of tukuls (durable shelters). Shelter conditions, mainly in refugee camps in Gedaref and Blue Nile, improved due to the construction of additional tukuls. Similarly, those who received emergency shelter assistance that include new refugee influxes, newly internally displaced persons, flood affected populations and populations affected by fire incidents were also able to meet their emergency shelter needs. Road access issues and issues related to lighting were also addressed through the construction/rehabilitation of roads, bridges, culverts and drains and installation of solar lights mainly in the refugee camps in eastern Sudan. In terms of basic domestic items, 136,090 households received NFI kits. Similar to shelter assistance, provision of basic domestic items was also prioritized for new refugee influxes, newly internally displaced persons, flood affected population and population affected by fire incidents. Each full NFI kit also includes two tarpaulin sheets which, in the absence of shelter assistance, the affected population used for roofing of their improvised shelters. Construction of shelters and provision of shelter materials mainly used local materials and local skilled and unskilled workers which benefited local vendors and populations.

UNHCR contributions stood at 71% for shelter and 67% for basic domestic items. As the shelter/NFI sector lead in Sudan, UNHCR also maintains a common pipeline that is also available to operational partners to respond to emergencies under MOU arrangements especially in areas where there is a comparative advantage for these partners to respond. In 2022, UNHCR provided shelter support to 42,716 households and basic domestic items support to 91,325 households. In addition, UNHCR also supported the construction, rehabilitation and installation of infrastructure including roads, bridges, culverts, drains, and solar lights. UNHCR also responded to areas controlled by non-state actors in Blue Nile and West Kordofan states (also called “Two Areas”) with 2,000 NFI kits and in the Abyei Area with 800 NFI kits.

Challenges to Achieving Outcome

In 2022, the shelter/NFI sector was only 41% funded. Lack of funding combined with ever increasing needs and access issues in some areas limited the capacity of the sector including UNHCR to respond to the identified needs. The limited funding also forced sector partners to prioritize only new arrivals, newly displaced and population affected by flooding and fire incidents, which left protracted caseload of refugees and IDPs unsupported, many of whom continue to live in shelters that do not provide adequate privacy and protection from weather elements. Housing, land and property issues affect the planning and delivery of settlement and shelter support especially those who are displaced. Identification and availability of suitable land for refugee camp has been challenging especially in White Nile where over 40,000 South Sudanese refugees were displaced due to flooding in 2021 and remain displaced living in unplanned and overcrowded situation with limited basic services

10. Outcome Area: Healthy Lives

Outcome: 3.3 Health and nutrition services for refugees strengthened and health systems enhanced

Indicators	Population Type	Baseline (2022)	Target (2022)	Actual (2022)
10.1 Proportion of children aged 9 months to five years who have received measles vaccination.	Refugees and Asylum-seekers	56.39%	68.00%	75.56%
10.2. Proportion of births attended by skilled health personnel. [SDG 3.1.2 Tier 1]	Refugees and Asylum-seekers	64.00%	70.00%	70.69%

Progress Against the Desired Outcome

Access to primary healthcare services was ensured for refugees and host communities. The crude mortality rate remained within the standard of ≤ 0.75 and under five mortality rate within the standard of ≤ 1.5 . A total of 556,996 outpatient consultations were done for refugees and 283,692 consultations made for Sudanese nationals. This constitutes an estimated health facility utilization rate of < 1 consultations/refugee/year (against a target of 1-4), and number of consultations of above 65 per clinician. Upper and lower respiratory tract infection (38.4%) and malaria (18%) were the leading causes of morbidities. Over 4,000 refugees benefitted from secondary and tertiary medical referrals. Services for mental health and noncommunicable diseases were supported through capacity building and procurement of drugs and equipment. COVID-19 vaccination was provided for more than 80,000 refugees. UNHCR supported various State-level Ministry of Health (MoH) with facilities/structural rehabilitations, ambulances, capacity building and logistical support.

Antenatal care (ANC), family planning, postnatal care and basic emergency obstetric and neonatal care and HIV treatment continued to be availed to refugees. ANC coverage is low due to shortage of staff. The proportion of deliveries conducted by skilled personnel is 70% due to lack of qualified midwives. Immunization services were availed with vaccination coverage among children at above 85%. HIV counselling and testing services are available including testing for pregnant women. VCT, prevention of mother to child transmission, antiretroviral therapy and treatment of opportunistic infections continued to be implemented.

A Non-Communicable Disease (NCDs) program began in East Darfur, Kassala, Gedaref and White Nile with funding from World Diabetic Foundation. It strengthened operational capacity of health facilities for the detection and therapeutic management of NCDs by providing medical equipment and consumables. 97 health care providers were trained on management of NCDs as per national guidelines, and 65 health workers were trained on mental health support using the Mental Health Global Action Program guide.

Nutrition services were provided with support from WFP and UNICEF. Therapeutic and supplementary feeding programs for management of acute malnutrition among children (moderate and severe acute malnutrition), children under five, pregnant and lactating women were conducted to improve the refugee nutrition status. 34,101 children were admitted into therapeutic feeding programs and 6,376 pregnant and lactating women benefitted from supplementary feeding programs. A Standardized Expanded Nutrition Survey was conducted in Gedaref and Kosti in 2022. Results showed a global acute malnutrition rate of 9.98% in Gedaref and 16.90% in Kosti (very high/critical if $\geq 15\%$). The stunting rate in both locations remains high in Gedaref at 34.4% and anaemia rate remains high among children 6-59 months at 56.40% in Kosti.

Challenges to Achieving Outcome

In Sudan, a protracted health crisis has increased the number of people without access to basic health services. Refugees and host communities heavily rely on humanitarian agencies for provision of basic medical services including medical supplies and equipment and referral to secondary and tertiary specialized health facilities. Additionally, limited health infrastructures, inadequate availability of drugs, limited health staffing and shortage of medical supplies remains a challenge thereby compromising the already low quality of healthcare.

Therefore despite the achievements, there is a need to increase access to health services, increase provision of essential medicines, equipment and supplies, build capacity of staff, support referral services and conduct rehabilitation of facilities. Prevention and treatment of diseases, provision of sexual and reproductive health and mental health and psychosocial support (MHPSS) services through facility and community-based interventions should be enhanced. Nutrition interventions including infant and young children feeding practices need to be strengthened.

Other challenges included the limited capacity of health facilities, deteriorating economic situation impacting access to essential health services, and limited community involvement and participation in health programs at district level. With limited resources, UNHCR prioritized the provision of primary health services, with secondary/tertiary health services limited to most critical cases. The unavailability of ambulances and means of transportation also affected timely referrals.

11. Outcome Area: Education

Outcome: 3.4 Education services for refugees strengthened and education facilities improved.

Indicators	Population Type	Baseline (2022)	Target (2022)	Actual (2022)
11.1 Proportion of PoC enrolled in tertiary and higher education.	Refugees and Asylum-seekers	0.33%	5.00%	0.34%
11.2 Proportion of PoC enrolled in the national education system. [GCR 2.2.1]	Refugees and Asylum-seekers	17.57%	23.00%	23.60%

Progress Against the Desired Outcome

UNHCR works with the Ministry of Education (MoE) in supporting the gradual inclusion of refugees into Sudan's national education systems as per the national education strategy and in line with UNHCR's strategic priority, reaffirming Sudan's GRF pledges. Furthermore, UNHCR actively works with operational partners to support refugee education. UNHCR and UNICEF have signed a Letter of Understanding outlining ways to support refugee children in accessing primary education. The support from the two agencies remains although this is extremely limited. Humanitarian needs in Sudan are now at record levels due to the combination of ongoing political instability, economic crisis, a rise in intercommunal violence, poor harvests, and most recently floods. This together with the limited donor appetite following the 2021 military takeover has seen the education sector experience decreased funding across the states. The support from the two agencies is unable to cover the huge gaps in the sector.

Through various partnerships with state-level MoEs as well as other partners, 71,507 children were supported in primary schools, 3,475 in intermediate level mostly located within the primary schools, and 4,400 children in secondary schools. Support received included textbooks, school uniform, school bags and examination fees. Additionally, 2,415 children in primary schools and 102 children in secondary schools received cash assistance through UNHCR's cash for education program. At the tertiary level, 257 refugee students were supported to continue their university studies in various universities across Sudan also through UNHCR's cash for education program.

In Gedaref, access to education and educational opportunities was expanded to reach more refugees. A Transitional Instructional Programme was implemented by UNHCR and partners to facilitate a gradual shift from non-formal to formal education. In the Kordofan states, 2,856 primary school students and 228 secondary school students received education assistance. In the Darfur states, UNHCR supported only a limited number of refugee children for education including 6,910 children enrolled in primary education, 187 students enrolled in intermediate education and 539 students enrolled in secondary education. In Blue Nile State, UNHCR, Windle Trust International and Save the Children International implemented education for refugee children in Camp 6 in Damazine where 962 refugee children were enrolled in primary school. In Khartoum state, the number of children assisted falls far below needs, as 2,000 children were assisted against a population of over 80,000 registered refugee children. In Kassala state, education programs were provided by the MoE across the camps, targeting both refugee population and the host community within and around the camps.

Challenges to Achieving Outcome

Families continue to grapple with balancing between providing basic needs or sending children to school due to the socioeconomic situation in Sudan. Almost 70% of basic school and over 90% of secondary school-age refugee children are out of school. Education-related fees differ by state resulting in challenges

in standardizing support to refugee children. Due to limited resources, access to education at secondary level has not been prioritized, exposing refugee children to the risk of negative coping mechanisms including child labor.

Other barriers to education include poor infrastructure, lack of accessibility options for students with disabilities, lack of school materials such as textbooks, lack of school feeding programs, lack of qualified teachers, and safety. Language barriers also affect the provision of education to refugees. The use of corporal punishment, still frequent in schools, presents an additional barrier to education and safe learning environments.

12. Outcome Area: Clean Water, Sanitation and Hygiene

Outcome: 3.5 WASH services for refugees delivered and improved WASH facilities in place.

Indicators	Population Type	Baseline (2022)	Target (2022)	Actual (2022)
12.1 Proportion of PoC using at least basic drinking water services [linked to SDG 6.1.1].	Refugees and Asylum-seekers	59.09%	60.00%	61.27%
12.1 Proportion of PoC using at least basic drinking water services [linked to SDG 6.1.1].	Returnees	27.10%	35.00%	27.10%
12.2 Proportion of PoC with access to a safe household toilet [linked to SDG 6.2.1].	IDPs	8.43%	10.00%	11.69%
12.2 Proportion of PoC with access to a safe household toilet [linked to SDG 6.2.1].	Refugees and Asylum-seekers	22.29%	30.00%	31.52%
12.2 Proportion of PoC with access to a safe household toilet [linked to SDG 6.2.1].	Returnees	6.33%	10.00%	6.33%

Progress Against the Desired Outcome

During the reporting period, 691,809 people, representing 61% of all refugee population groups and asylum-seekers were reached with access to safe drinking water through the operation and maintenance of 51 water supply systems across states hosting South Sudanese refugees. Out of these, 579,975 were reached by UNHCR funding while 111,834 were reached by UNICEF, COOPI/Sudan Humanitarian Fund, IOM, and other operational partners. Six water supply systems were upgraded, seven diesel-powered water pumping systems were solarized, and two new water supply systems were constructed to increase water access to persons of concern. Despite this achievement, the average water coverage remains at 16L/p/d, which is below the UNHCR desired standard of 20L/p/d.

A total of 355,920 refugees and asylum-seekers (32%) were reached with access to improved sanitation facilities through the construction of an additional 1,461 household latrines and 549 communal latrines. Within the same period, interagency partners rehabilitated 3,311 communal latrines and 587 bathing facilities across the various refugee-hosting locations. Proper latrine usage and management awareness sessions were conducted. To eliminate the risk of WASH related diseases and interrupt its transmission cycle, interagency partners conducted 336 communal vector control campaigns including the collection and safe disposal of 3,392 metric tonnes of garbage across various refugee-hosting states.

To enable refugee women and girls to meet their menstrual hygiene needs, access to menstrual hygiene kits was provided through in kind distribution of hygiene kits and soap. The piloting of cash assistance for hygiene kits was conducted in five locations. The cash assistance did not only empower women and girls to make their own choices but also helped them avoid negative coping mechanisms which can compromise their dignity and health, and education for the school-going children. During the reporting period, 33,719 girls and women were supported with personal hygiene kits (either in-kind or through cash-based

interventions).

In Darfur, UNHCR, closely working with implementing and operational partners, constructed or rehabilitated a total of 56 handwashing facilities. Additionally, 78,366 persons were reached with hygiene messaging through IEC material distribution, and 31,134 individuals through conducting hygiene promotion sessions.

Challenges to Achieving Outcome

Only 61% of refugees and asylum-seekers were reached with access to safe drinking water while only 32% out of the same target have access to safe household toilets.

The worsening economic crisis and political instability triggered the deterioration of the WASH situation in Sudan. Influx of new populations constrained already overstretched WASH facilities, with aged water infrastructure and inflation of materials and fuel straining systems. The impacts of climate change increased water scarcity, and population growth increased the demand for water, further straining existing water facilities. Overall, these challenges have led to the provision of water below the desired standard. Low investments in the WASH sector due to generally reduced donor funding has deprioritized key interventions. Meanwhile, low community ownership of water infrastructure resulted to vandalism, and inadequate awareness raising on maintenance of the facilities also contributed to low achievement of targets.

13. Outcome Area: Self Reliance, Economic Inclusion and Livelihoods

Outcome: 4.1 Development programs by national and international partners inclusive of refugees.

Indicators	Population Type	Baseline (2022)	Target (2022)	Actual (2022)
13.3 Proportion of PoC (working age) who are unemployed.	IDPs	82.28%	35.00%	37.00%
13.3 Proportion of PoC (working age) who are unemployed.	Refugees and Asylum-seekers	70.00%	85.00%	52.00%

Progress Against the Desired Outcome

During the year, UNHCR facilitated advocacy initiatives to engage with development actors including the private sector to advocate for programmes that promote inclusion and bridge the gap between humanitarian and development. As outcomes to such advocacy initiatives, the following key commitments and progress were made:

A private sector workshop was conducted to engage the private sector and explore employment creation and business opportunities for refugees and host communities. A private sector company provided employment opportunities for more than 300,000 unskilled refugees and more than 3,000 skilled refugees in White Nile State. Discussions are underway to start implementation in 2023. Another company will commence a pilot with 25 refugee women in Khartoum state to support refugees and host community milk value chain project in Kassala with technical support. This will be a joint development project between UNHCR, FAO and the company.

Sister UN agencies (FAO, UNDP, UNIDO, and ILO) have been engaged to support the scaling up of development-related livelihoods interventions through joint concept notes development and resource mobilization. Progress is being made to develop joint strategic frameworks, concept notes and joint programming to support scale up initiatives.

Finally, concept notes were developed jointly with UNDP to support scaling up of solutions initiatives in Sudan through the Sudan/South Sudan solutions platform.

Challenges to Achieving Outcome

Against the backdrop of an economic downturn in Sudan and the suspension of most development support following the 2021 military takeover, dwindling resources within UNHCR limited the scale of livelihoods interventions in various states. Given rising prices of goods amid a high inflation rate, increased poverty in host communities created and exacerbated tensions and conflicts if only refugees benefitted from services.

Refugees continued to face barriers to livelihoods opportunities, including restricted access to land, limited access to wage employment, restricted access to business registration, limited access to financial and mobile services, restricted freedom of movement, and limited access to information

14. Outcome Area: Voluntary Return and Sustainable Reintegration

Outcome: 7.1 Resettlement and complementary pathways utilized for lasting solutions to refugees hosted by Sudan, and resettlement utilized to expand the protection and humanitarian space for those who remain.

Outcome: 7.2 Voluntary repatriation in safety and dignity facilitated for Sudanese refugees.

Progress Against the Desired Outcome

Due to the resurgence of intercommunal conflicts in Darfur, voluntary repatriation of refugees from Chad to Sudan and from Sudan to Chad was significantly impacted, constraining the implementation of the 2017 Tripartite Agreement between Chad, Sudan and UNHCR.

Nevertheless, within the Tripartite Agreement, UNHCR supported and facilitated voluntary repatriation of a Sudanese refugee family of seven who voluntarily repatriated from Chad to Khartoum in accordance with UNHCR Operational Guidelines on Voluntary Repatriation and protection standards to facilitate the voluntary repatriation of the Sudanese refugee family in safety and dignity.

In order to strengthen information, data and evidence, UNHCR operations in Chad and Sudan established a cross-border coordination mechanism where information, data and strategic issues including situational and security developments, population movements, influx and cross-border protection issues were shared to ensure operational agility and capacity to respond to emergencies.

Additionally, UNHCR has undertaken five ad hoc monitoring missions to areas where spontaneous return of refugees was reported.

Challenges to Achieving Outcome

The security and political context in Sudan and the lack of implementation of the Juba Peace Agreement and the National Plan for the Protection of Civilians provisions critical to establishing the necessary preconditions for solutions stalled progress towards this outcome. Additionally, the lack of conducive conditions due to the situations in Sudan (for example, insecurity including intercommunal conflicts, generalized violence, criminalities in Darfur) limited prospects for voluntary repatriation for refugees.

Frequent pendular movements complicate the assessment of sustainable voluntary returns. The lack of a border monitoring mechanism for tracking and monitoring returns presented limitations in strengthening data and evidence to inform programming. Improving data and evidence on spontaneous returns will need to be carried out to inform programming decisions and ensure readiness to pilot durable solutions projects

16. Outcome Area: Integration and other Local Solutions

Outcome: 7.3 Reintegration of returning Sudanese refugees facilitated through tangible community level interventions in areas of origin

Outcome: 6.1 Government led evidence-based participatory durable solutions planning processes underway

Outcome: 6.2 Government authorities and local communities capacitated to integrate and address durable solutions and displacement issues in peace implementation, peacebuilding, and national policies and plans.

Outcome: 6.3 Conditions improved in areas of origin and in areas hosting IDPs/refugees, in terms of peaceful coexistence, access to basic services and other essential needs towards durable solutions

Outcome: 4.2 National social service systems capacitated towards refugee inclusion in alignment to the GOS pledges at the Global Refugee Forum.

Indicators	Population Type	Baseline (2022)	Target (2022)	Actual (2022)
16.1. Proportion of PoC with secure tenure rights and/or property rights to housing and/or land [revised SDG indicator 1.4.2].	Refugees and Asylum-seekers	60.00%	73.00%	77.05%

Progress Against the Desired Outcome

Despite the current political, security and operational challenges, UNHCR sought to enhance planning for solutions where opportunities exist. UNHCR continued to advocate for refugee inclusion in public services, in particular health and education (see further under health and education outcome areas), in line with the Government of Sudan's GRF pledges. UNHCR also co-leads Area Durable Solution Working Groups (A-DSWG). Where these are established and functional, UNHCR provided guidance, leadership, and technical support to ensure they are effective in coordinating and integrating to systemically implement protection, durable solutions, resilience and peacebuilding for affected populations, and to ensure the agenda maintains a protection and conflict-sensitive lens.

In North Darfur specifically, UNHCR provided technical support to the government-led initiative of the State government under the leadership of the Ministry of Finance (MOF) in drafting the North Darfur Durable Solutions Strategy through close working and coordination with the drafting secretariat from the MOF, Voluntary Return and Reintegration Commission (VRRC), UNDP and UNHCR, which culminated in the workshop to validate the Strategy in December 2022. The strategy covers all populations of concern to UNHCR, including refugees.

In addition, Locality Action Plans from the 2020-2021 projects supported by the UN Peacebuilding Fund were finalized. These plans provide essential data for future area-based programs promoting solutions including integration in the eight localities thus contributing to the future development of area-based approaches, involving relevant authorities and Government institutions, UN agencies and partners for joint concept notes for potential funding opportunities. However, given the situation on the ground, ongoing

situational awareness and analysis is required.

Meanwhile in Kassala state, the strategy for Sudan envisaged the provision of shared services between refugees and hosting populations in three localities of the state. Those services would in turn bring social cohesion between the two communities who have lived in coexistence for over four decades and have reached integration at community level. In pursuit of this outcome, UNHCR provided the host communities with access to some of the services offered in camps, integrated refugee education in the national systems, and pursued the mainstreaming of healthcare services by the state authorities. Accordingly, UNHCR engaged development actors including the German Ministry for Economic Cooperation and Development (BMZ) and the European Union (EU) to support the regional WASH programme and strengthen the capacity of local institutions to respond to emergencies, respectively.

Challenges to Achieving Outcome

The security and political context in Sudan, including lack of implementation of the Juba Peace Agreement and National Plan for the Protection of Civilians provisions critical to establishing the necessary preconditions for solutions including returns and local integration (security provision, land reform, justice) and lack of operationalization of the nine GRF pledges and Four Freedoms Agreement, presented a challenge in creating conducive conditions for solutions to the affected population in Sudan. Diminishing development aid on solutions initiatives following the 2021 coup have also stalled progress. The lack of prospects for programs on socio-economic inclusion, resilience and empowerment coupled with diminishing development aid for solutions initiatives following the 2021 coup have also stalled progress.

2.2. Age, Gender and Diversity

UNHCR Sudan adopted an age, gender, and diversity (AGD) orientation in all activities complemented by the Accountability to Affected Populations (AAP). The operation embarked on reviving the AAP working group at the national level and drafted an action plan including capacity building to move forward with establishing a Refugee Advisory Board. Despite the challenging working environment, the Sudan operation endeavored to maintain and develop the AGD approach within all sectors and activities, working closely with partners and other UN agencies to ensure participation of women, men, boys and girls and persons with specific needs. AGD considerations were used for planning and prioritization. Support was provided by technical units to ensure better systematization of the collection of disaggregated data and to contribute to improved programming.

UNHCR also actively participated in the national AAP Working Group. Focal points were designated in each office to ensure mainstreaming of AAP across activities as a cross-cutting issue. The operation sought to ensure that women and girls are consulted and part of the leadership in their communities. However, given the cultural barriers and women's overwhelming domestic responsibilities, women participation in management and leadership structures was affected.

To pursue the meaningful participation of the affected population throughout the programming cycle, UNHCR arranged for a systematic way of obtaining the communities' expressed priorities and needs through the establishment of consultative mechanisms, clear guidelines, and practices to engage them appropriately. Also, UNHCR established multi-channel systems for information sharing and receiving feedback from the communities to shape its interventions. This includes improving Communication with Communities by establishing a joint UNHCR-WFP hotline with operators trained and capable of speaking in different languages to provide timely and relevant responses.

Nevertheless, budget constraints, access constraints linked to security, logistics and outreach capacity of partners have limited interactions with communities in hard-to-reach areas. Accessible and confidential complaints and feedback mechanisms and measures to prevent, respond and mitigate gender-based violence and sexual abuse and exploitation are in place. However, additional efforts are needed to ensure these measures are functional and complaints are not only received but also properly recorded and responded.

To ensure access to disaggregated data, the operation provided capacity building for field staff to support the roll-out of the proGres database to further improve services for refugees. proGres has also instrumental to implement targeted activities such as the distribution of personal hygiene kits to women and girls of reproductive age, CBI for persons with specific needs, and profiling of refugees considering heightened protection risks

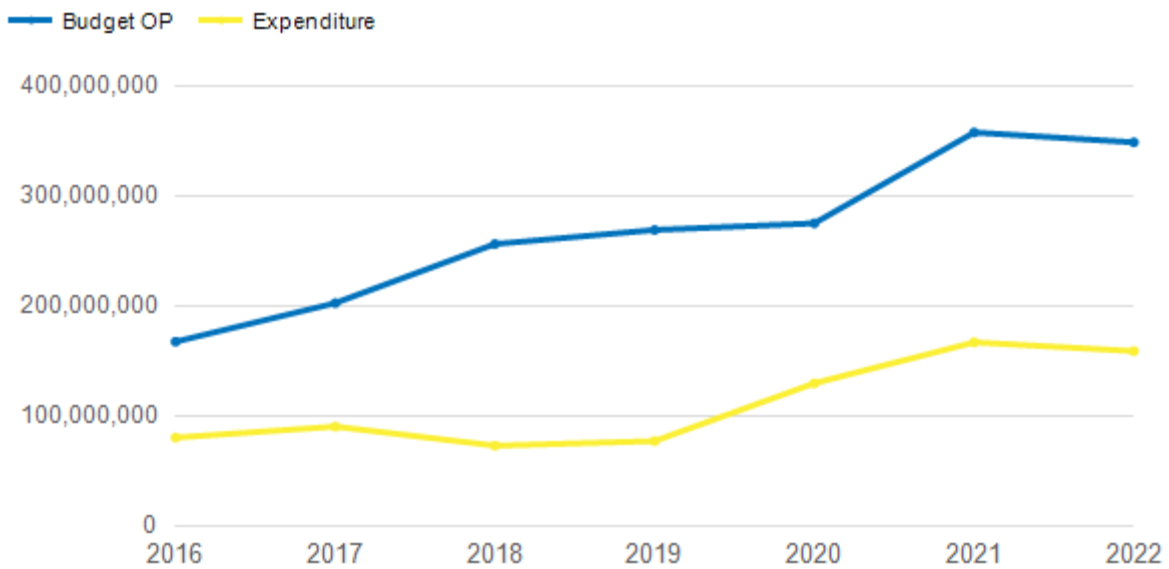
Section 3: Resources

3.1 Financial Data

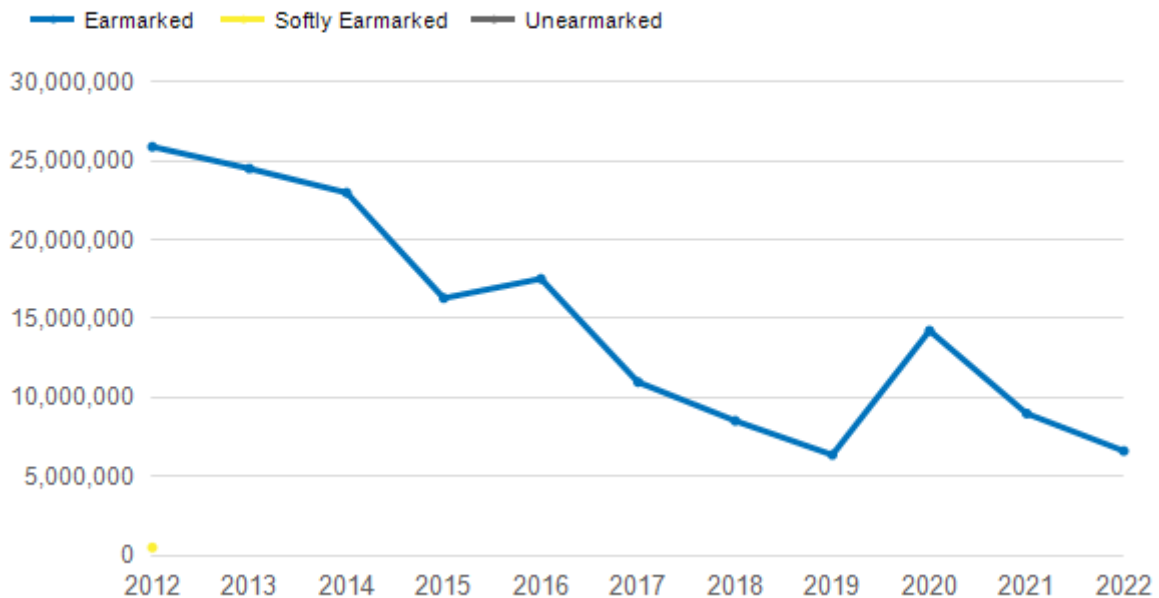
Impact Area	Final Budget	Funds Available	Funds Available as % of Budget	Expenditure	Expenditure as % of Funds Available
IA1: Protect	86,600,999	49,440,477	57.09%	49,440,477	100.00%
IA2: Respond	161,142,893	68,731,563	42.65%	69,163,739	100.63%
IA3: Empower	25,027,915	17,781,973	71.05%	16,115,305	90.63%
IA4: Solve	75,488,553	23,978,764	31.76%	23,978,764	100.00%
All Impact Areas		1,047,434	0.00%		0.00%
Total	348,260,359	160,980,212	46.22%	158,698,286	98.58%

Outcome Area	Final Budget	Funds Available	Funds Available as % of Budget	Expenditure	Expenditure as % of Funds Available
OA1: Access/Doc	24,861,548	13,298,956	53.49%	13,298,956	100.00%
OA2: Status	3,238,875	471,626	14.56%	471,626	100.00%
OA3: Policy/Law	11,565,390	11,036,388	95.43%	11,034,614	99.98%
OA4: GBV	20,636,031	8,903,326	43.14%	7,122,843	80.00%
OA5: Children	6,851,134	3,133,982	45.74%	3,133,982	100.00%
OA6: Justice	3,314,535	4,011,181	121.02%	4,011,181	100.00%
OA7: Community	36,096,423	20,455,107	56.67%	20,455,107	100.00%
OA8: Well-being	18,287,061	8,654,130	47.32%	8,654,130	100.00%
OA9: Housing	88,745,905	28,736,238	32.38%	28,236,564	98.26%
OA10: Health	19,433,609	14,400,968	74.10%	14,837,968	103.03%
OA11: Education	13,047,881	6,810,106	52.19%	6,810,106	100.00%
OA12: WASH	21,227,678	10,937,825	51.53%	10,937,825	100.00%
OA13 Livelihood	2,732,868	2,237,054	81.86%	2,237,054	100.00%
OA14: Return	18,517,895	5,721,473	30.90%	5,721,473	100.00%
OA15: Resettle		0	0.00%		0.00%
OA16: Integrate	59,703,526	21,612,681	36.20%	21,612,681	100.00%
EA18: Support		122,176	0.00%	122,176	100.00%
All Outcome Areas		436,996	0.00%		0.00%
Total	348,260,359	160,980,212	46.22%	158,698,286	98.58%

Budget and Expenditure Trend



Contributions Trend by Type



3.2. Resources Overview

In 2022, the Sudan operation had a total funding requirement of \$348 million and was only 46% funded by year end. Due to severe funding cuts compared to 2021, the operation prioritized intervention areas in consultation with all offices. Lack of funds also impacted human resources as the operation downsized.

The operation is characterized by insecurity incidences and emergencies, mainly intercommunal violence, flooding, and fires, affecting refugees, IDPs and the Sudanese host community. As such, and with limited resources in 2022, there was a need for the operation to reprioritize and cater to new emergencies and continuous needs, especially in the provision of emergency shelter kits, non-food items, personal hygiene kits, medical and drugs for refugees.

A significant amount of the budget was allocated for critical lifesaving needs, bridging huge gaps and stabilizing the operation in all sectors. Upgrade of the camp-based infrastructure to enhance monitoring in the camps and rainy season preparedness which is annual investment was also prioritized to avert any negative consequences of the rains and the monkeypox outbreak response. Partnership with line ministries and the Commission for Refugees at country and sub-office levels were prioritized in line with the strategy to build capacity of line ministries and foster refugee inclusion into Sudan's national services.

Sudan was among operations included in the UNHCR's most underfunded operations in 2022, the operation suffered from funding gaps across all outcome areas, most especially in WASH, shelter, cooking fuel, infrastructure including access roads in camps, and protection structure including registration offices, protection desks, women centres and reception centre facilities. Given the large needs in Sudan, the gap is exacerbated by a high inflation rate, local currency devaluation and other complexities related to the nature of the operation. Due to funding shortfalls, interventions critical to the well-being of persons we serve could not be adequately implemented. Livelihoods projects for example had to be deprioritized in some locations, and projects that could enhance economic inclusion and opportunities for could not be implemented. UNHCR also faced challenges in providing adequate protection programming, including gender-based violence and child protection services, to refugees across the country.



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