



An IDP woman in Darfur receives assistance (UNAMID, archive 2014)

HIGHLIGHTS

- About 2,500 people were assisted to return to Turba village, South Darfur from Shangil Tobaya IDP camp, North Darfur.
- People flee East Jebel Marra due to internal fighting within the SPLA-AW and arrive in Otash IDP camp, South Darfur.
- The VRRC replaces HAC in co-leading the RRR sector in West Darfur.
- AWD cases continue to decline, according to the Ministry of Health.
- SHF announces US\$3 million as the first standard allocation of funds for 2018.

FIGURES 2017

# people in need in Sudan (2017 HNO)	4.8 million
# people in need in Darfur (2017 HNO)	3 million
GAM caseload (2017 HNO)	2.2 million
South Sudanese refugees - total (Pre-2013)	772,715
(Post-2013)	352,462
(31 Dec 2017)	420,253
Other refugees and asylum seekers, UNHCR (30 June 2017)	167,784

FUNDING

365 .4 million
US\$ received in 2017

45.4% funded
(FTS, as of 31 Dec 2017)

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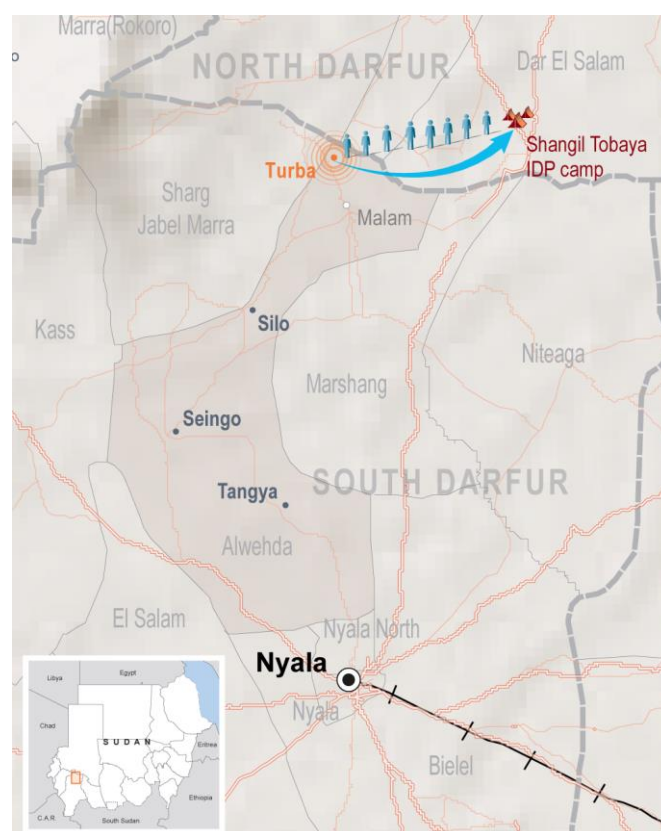
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Turba village welcomes homecoming families

The government's Voluntary Return and Resettlement Commission (VRRC)—with the support of a national NGO Manal—has facilitated the return of a group of some 500 families of internally displaced persons (IDPs)—about 2,500 people—to return to their Turba village, near El Malam town in Alwehda locality, in South Darfur. The IDPs had been hosted 40 km away in Shangil Tobaya IDP camp, in North Darfur. In December, their leadership had informed a government delegation visiting Shangil Tobaya of their interest in returning to their home village, said a report from VRRC.

Also in December, the same government delegation visited Turba village—the return area—and met with local authorities and the neighbouring community, who expressed their willingness to receive the returnees.

The returnees were provided with cereal, blankets, mats, 195 plastic sheets and 90 tents at Turba village. A mission led by the VRRC, supported by the Recovery, Return and Reintegration (RRR) sector, will be conducted soon to assess the conditions of return and to be better informed on Government and communities plans for the area which will ensure the sustainability of the return.



Internal fighting within an armed movement displaces 600 people from East Jebel Marra

Over 600 people (129 families)—mostly women and children—fled East Jebel Marra some 130 km to Nyala town, in South Darfur, since mid-December 2017, where they

were received at Otash IDP camp, the government's Humanitarian Aid Commission (HAC) reported in a letter to the Office for the Coordination of Humanitarian Affairs (OCHA). Following the receipt of the letter, a delegation consisting of HAC, OCHA, the UN Refugee Agency (UNHCR), the UN Children's Agency (UNICEF), the United Nations-African Union Mission in Darfur (UNAMID), the International Organization for Migration (IOM), World Vision International (WVI) and the World Food Programme (WFP) carried out a humanitarian needs assessment of the new IDPs, also seeking further clarification regarding the circumstances of the displacement.

The new IDPs reported to the group they fled their homes in the Deribat area following internal fighting among the non-signatory Sudan People's Liberation Army - Abdul Wahid (SLA-AW) factions, which started in November 2017. This fighting reportedly resulted in the killing and injury of civilians, destruction of houses, and looting of community assets. Humanitarian partners do not have access to SLA-AW controlled areas in Darfur and cannot verify these reports.

While the new IDPs are receiving assistance from relatives living in the camp, some have also found work as casual labourers in Nyala town. However, this is not sufficient to meet needs, due to current high food prices, said the humanitarian team in its assessment report. The report said that albeit in urgent need of food, emergency shelter and household supplies, the new IDPs have access to health, nutrition, water, sanitation, hygiene, and education services in the camp.

Aid organisations recommend that IOM verify and register the new IDPs and for WVI to follow up on the arrival of IDPs, since more people are expected from the affected areas. Due to the cold weather, the immediate distribution of emergency shelter and household supplies has also been recommended. Further in-depth assessments need to be carried out to plan the required interventions.

VRRRC officially takes over the responsibility of returns sector in West Darfur

The VRRRC replaces HAC in co-leading the RRR sector in West Darfur

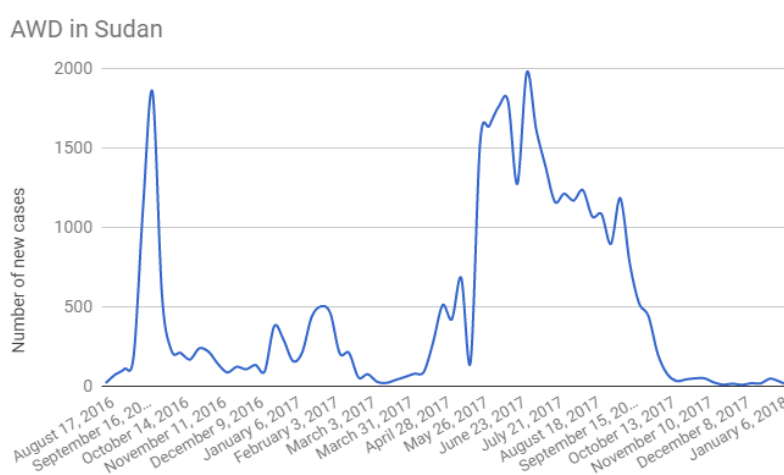
In West Darfur, VRRRC announced that it would replace HAC in co-leading the RRR sector—with the UN Development Programme (UNDP)—for the state.

The VRRRC office in West Darfur reports to the Federal VRRRC Commission who, in turn, reports to the President's office. It is responsible for the voluntary return of IDPs and refugees; the comprehensive assessment of return areas; and the implementation of early recovery programs. This mainly entails the second phase package of the Darfur Development Strategy (DDS)—which includes the provision of basic services such as construction of water yards, schools, health units and police posts. The VRRRC office in West Darfur will work in close collaboration with the government and partners to achieve its longer-term goals.

Watery diarrhoea cases continue to decline

AWD cases decline with no related deaths reported in December 2017, according to the Ministry of Health

The number of reported Acute Watery Diarrhoea (AWD) cases remains low across Sudan, with 98 cases registered during the last four weeks (17 December 2017 – 13 January 2018), according to the Federal Ministry of Health (FMoH) and the World Health



The AWD outbreak in Sudan started in August 2016 and spread to all 18 states by August 2017

Organization (WHO). The most recent deaths—two in Red Sea State—were reported during Week 1, with no deaths before that since Week 47.

Despite the low level of new cases, a slight increase in cases was reported during week 52 and week 1, where 46 and 30 new AWD cases respectively were registered. This was the highest level of new cases per week since Week 44 (50 new cases), and more than twice the average of all weeks since then (17.7 new cases on average from Week 45 to Week 51). Active transmission has been reduced to three localities (during week 2, one case was reported from Port Sudan, two from Sawakin, and one from Al Gouneb Wal Ollib) in Red Sea State. The assessment of the situation in Red Sea State is urgently required given the persistent cases of AWD over the past six weeks in the area.

The current AWD outbreak in Sudan started in August 2016 in Kassala State and spread to 10 states in May 2017, 12 states in June 2017, 16 states in July 2017 and 18 states in August 2017. The outbreak has resulted in 36,494 cases up to week 2 of 2018 (attack Rate of 0.124 per cent), including 820 deaths (case fatality rate of 2.25 per cent).

To interrupt the transmission of AWD completely, response activities must continue until there are no new cases reported for four consecutive weeks in all localities nationwide, with laboratory confirmation of stool samples for the same causative agents. WHO and FMOH proposed an in-depth evaluation of AWD response and risk assessment to refine and re-strategize control efforts in early 2018.

WHO also advises partners to shift their public health approach towards multi-sectoral interventions, moving from purely emergency response to include recovery and development response.

Sudan Humanitarian Fund announces strategy for the first standard allocation for 2018

The Sudan Humanitarian Fund (SHF) announced the strategy for its first standard allocation of funds for 2018 for the total of US\$3 million. The strategy focuses on the needs of South Sudanese refugees in White Nile State (\$1.5 million) and prevention of waterborne diseases in West Kordofan, Red Sea and White Nile states (\$1.5 million).



Girls in a school in Nertiti (Central Darfur) that is funded through the SHF (UN, Nov 2017)

The allocations aim to address the most urgent needs in Sudan before the start of the rainy season. The two priority interventions of this strategy are closely aligned with the 2018 Humanitarian Response Plan (HRP) as well as the South Sudanese refugee response plan. The first area of interventions will focus on improving poor sanitation within targeted refugee camps in White Nile State. The second area of intervention will focus on the prevention of waterborne diseases in the three states most affected by the Acute Watery Diarrhea outbreak, based on the number of cases, deaths and the case fatality rate.

In 2017, SHF allocated \$29.6 million for 89 projects across Sudan which provided life-saving and other assistance to 2.2 million people.

SHF announces US\$3 million as the first standard allocation of funds for 2018

Coordination meeting schedule - January 2018

January 2018						
Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16 11:00 IMWG 10:00 – 12:00 CASH WG	17 9:00 - 16:00 SHF local partners training	18 9:00 - 16:00 SHF local partners training	19	20
21	22	23 14:00 ISCG	24 9:00 - 16:00 SHF local partners training	25 9:00 - 16:00 SHF local partners training HCT (TBC)	26	27
28	29	30	31 DCG (TBC)			

CASH WG – CASH Working Group

DCG – Donor Coordination Group

HCT – Humanitarian Country Team

IMWG – Information Management Working Group

ISCG – Inter-Sector Coordination Group

SHF – Sudan Humanitarian Fund

UNCT – UN Country Team

TBC – To be confirmed

TBD – To be determined