

Humanitarian Crisis Analysis 2025

Sudan

31 March 2025

1. Crisis overviewi

| 4.9 /5 | 30.4 million | 20.9 million | \$4.2 billion | 9.8% |
|-----------------------------|--|--|--|---|
| Inform severity index | People in need of humanitarian aid (HNRP 2025) | People targeted in the response plan (HNRP 2024) | Required to reach the target (HNRP 2025) | Of the required funding secured (HNRP 2025) |
| 261 MSEK Initial allocation | - Additional allocation | 14.1 MSEK Flexible funding | 275.1 N Total Sida fu | |

Since conflict erupted between the Sudanese Armed Forces (SAF) and the Rapid Support Forces (RSF) in April 2023, Sudan has faced one of the world's most severe humanitarian crises. As the conflict persists, civilians continue to suffer; an estimated 30.4 million people now require humanitarian aid. Over 11 million people have been displaced, out of which 4.8 million are externally displaced. Sudan currently is the world's largest internal displacement crisis.

The ongoing war has also led to widespread food insecurity, the collapse of essential services, violence against civilians, inadequate access to clean water, and a lack of treatment for malnutrition. Famine was initially declared in August 2024 Zamzam camp, North Darfur in Sudan. In December the Famine Review Committee declared famine and risk of famine in several other parts of the country. Currently a total of 17 spots in Sudan face famine or are at risk of famine, mainly in areas of Darfur and the Kordofans. Numerous reports also detail rape, indiscriminate civilian killings, torture of prisoners of war, obstruction of lifesaving aid, and other violations of International Humanitarian Law (IHL). Although exact figures are difficult to verify, particularly with parts of the country being inaccessible to the international humanitarian community, available data indicates that Sudan is experiencing one of the most severe humanitarian crises in the world today.

After several unsuccessful peace talks, no clear political solution is in sight, and the conflict is unlikely to be resolved soon. Amid resource shortages, organisations in Sudan also face significant barriers as violence and bureaucratic impediments effectively hinder humanitarian organisations from reaching people in need of assistance and protection. While the crucial border crossing at Adre in Chad has remained open since August, the rainy season has reduced

the ability to bring supplies into parts of Darfur, which has been particularly identified as being at risk of famine.

2. Humanitarian needs & affected population

Prior to the ongoing armed conflict, malnutrition, food insecurity, and limited access to safe water and essential services were widespread concerns across the country. The outbreak of conflict has not only intensified these pre-existing humanitarian issues but has also driven a significantly larger portion of the Sudanese population into extreme hardship. For instance, it is estimated that over 25 million people – approximately 50 per cent of the population – are now facing acute hunger. Indiscriminate targeting of civilians has been a defining feature of the war, with reports of systematic killings, sexual violence, ethnically driven violence, forced displacement, and arbitrary arrests.

While humanitarian needs are widespread across Sudan, two main groups face the most severe and extensive challenges: those residing in the areas most affected by conflict and those who have been displaced. First, millions of people trapped in conflict zones or directly impacted by violence face severe threats to their dignity, health, well-being, and lives. These individuals are concentrated in Greater Darfur, Greater Kordofan, Al Jazira and Khartoum – states that have seen the most intense fighting and remain largely inaccessible to the international humanitarian community. In 2024, the frontline has extended to Al Jazira and Sennar states, increasing the number of people in need of assistance and protection in these regions as well. During the last months of 2024, the humanitarian community has been particularly alarmed by the recent violence against civilians in Al Jazira. Second, 4.8 million people have fled to other countries and over close to eight million displaced persons remain within Sudan. Many of these individuals initially fled internal clashes but have been displaced again as frontlines shift. As a result, affected populations have exhausted available coping mechanisms, while access to basic services and humanitarian assistance has been severely disrupted by the conflict itself and impediments imposed by the warring parties.

In 2024, the Integrated Food Security Phase Classification (IPC) reported that food insecurity and malnutrition in Sudan had reached unprecedented levels. An estimated 25.6 million people are experiencing high levels of acute food insecurity, with 755,000 people assessed to be on the verge of famine. The risk of famine has been deemed high in the Greater Darfur, Greater Kordofan, Khartoum, and Al Jazira states. There is a critical need for protection among affected populations, including urgent interventions to prevent and respond to gender-based violence (GBV). Numerous reports of systematic sexual violence have surfaced, while conflict-related restrictions have limited access to lifesaving GBV services.

The conflict has also severely impacted hospitals and health facilities, with many destroyed or forced to suspend operations entirely. Meanwhile, hospitals in less-affected regions are overwhelmed by the influx of internally displaced persons (IDPs). Alarming warnings indicate a potential collapse of the country's healthcare system, with the combined effects of malnutrition

and the ongoing crisis already contributing to thousands of estimated deaths. For example, 2024 saw a spike in reported cholera cases and related deaths.

3. The humanitarian response

In July 2023, as a result of the conflict, a system-wide scale up was initiated and has since been extended at several occasions. The 2025 Humanitarian Needs and Response Plan (HNRP) focuses specifically on the scale-up of integrated response and protection services. In addition to the annual humanitarian response plan, a famine prevention plan was launched in the spring of 2024 in order to mitigate the risk of famine. The plan identifies the most prioritised localities based on the IPC analysis. Food Security and Livelihoods (FSL) is the largest sector in the plan, both in terms of target and actual funding, followed by the Health sector. Contributing with around 49 per cent of all funding registered in FTS in 2024, the US is by far the biggest donor and has focused on food assistance through WFP.

Humanitarian access to the hardest hit areas continues to be a major challenge; most humanitarian organisations have had to limit their operations due to the fighting, logistical challenges, bureaucratic impediments, and insecurity. The 2025 HNRP calls for a scale-up in areas where few humanitarian organisations have access due to the fighting, including urban and densely populated areas. Efforts are also being extended in the areas to which people are fleeing, including areas in White Nile, West, South, and North Darfur, North Kordofan, Northern, and Al Jazira. As of March 2025, the border crossing at Adre in Chad will remain open until May 2025. A unique characteristic of the humanitarian response in Sudan has been the so called 'Emergency Response Rooms', a form of informal grassroot networks that have provided the vast majority of the humanitarian aid in the most unreachable areas. Given that access restrictions continue, such networks will continue to play a critical role. It remains a considerable issue that the international humanitarian community lacks the capability to effectively respond to all affected areas of the country. This has resulted in an uneven irregular response, and would require more established presence in all parts of Sudan, in order to ensure a conflict sensitive response.

The global freeze and scale-back of US humanitarian funding announced in January 2025 is having major consequences on aid operations, and the Humanitarian Country Team is adapting the response in light of the new funding landscape. In Sudan the process has concluded with a quite substantial decrease in targeted funding, while not limiting the number of targeted beneficiaries to the same degree. This will, in the HCs word, limit the quality and efficiency of assistance and will most likely lead to additional disease outbreaks or other needs. Priority has been given to areas with inter-sector severity 4/5 and strategic objective 1 (life-saving) and 2 (protection), with an inclusion of certain areas in severity 3 due to specific vulnerabilities.

Since the recent onset of conflict, development interventions have mostly been suspended or redirected into areas less impacted by the conflict. In summary, while attention towards the Sudan crisis has increased and funding levels have somewhat improved, the humanitarian community remains limited and the response has not been able to meet the needs. This is partly because of limited funding and partly because of insecurity and the deliberate obstruction of humanitarian access by the warring parties. Without an end to the conflict, the dire needs among Sudan's population will continue to grow and further outpace available assistance.

4. Sida's humanitarian allocation

Given the complexity of the crisis, the widespread presence of humanitarian needs, and the operational risks for humanitarian organisations, Sida's initial humanitarian allocation in 2025 continues to target a wide set of partners that are able to complement each other. The initial allocation focuses on geographic areas with limited opportunities for other forms of assistance, where humanitarian organisations can add particular value. Therefore, partners with a focus on conflict, disaster, or displacement-affected areas with the most severe humanitarian needs are prioritised. Moreover, Sida also aims to balance support between different types of organisations—both UN agencies and international NGOs—that may offer particular strengths. Projects or programmes with a holistic approach to address malnutrition and food insecurity are prioritised, since different sectors often work in complementarity to enhance the impact of nutrition and food assistance.

The initial allocation also targets the sectors Health and WASH due to the collapse of crucial social services, as well as Protection given the widespread and serious risks to the safety and well-being of vulnerable people. In addition, particular priority was given to partners with a clear ambition to reach hard-to-reach areas and areas with limited presence by other humanitarian organisations. This includes organisations with established partnerships with local responders. Lastly, the Sudan Humanitarian Fund has the ability to swiftly allocate resources to areas that may be inaccessible for other Sida partners, and therefore plays an important role to complement the rest of the portfolio.

| INITIAL ALLO | INITIAL ALLOCATION (SEK) | | | | |
|----------------|---|--------------------|--|--|--|
| PARTNER | SECTOR | INITIAL ALLOCATION | | | |
| AAH | FSL, Health, MPCA, Nutrition, Protection, WASH | 28,000,000 | | | |
| DRC | Protection, MPCA, Shelter, WASH | 28,000,000 | | | |
| ICRC | FSL, Health, Protection, WASH | 32,000,000 | | | |
| IRC | Health, Nutrition, Protection, WASH | 22,000,000 | | | |
| Islamic Relief | Health, Nutrition, FSL, WASH, Protection | 20,000,000 | | | |
| NRC | Education, FSL, ICLA, Protection, Shelter, WASH | 28,000,000 | | | |
| PUI | Health, Nutrition | 8,000,000 | | | |
| SHF | Multisector | 40,000,000 | | | |

| UNICEF | Health, Nutrition, Protection, WASH | 37,000,000 |
|--------|-------------------------------------|-------------|
| WFP | Food security | 18,000,000 |
| TOTAL | | 261,000,000 |

| FLEXIBLE FUNDING & ADDITIONAL ALLOCATIONS | | | | |
|---|-------------------------------|-----------------------|--|--|
| PARTNER | FLEXIBLE FUNDING ¹ | ADDITIONAL ALLOCATION | | |
| FAO | 8,040,201 | - | | |
| MSB | 6,085,000 | | | |
| TOTAL | 14,125,201 | - | | |

ⁱ The 2025 initial allocation of humanitarian funding is based on Sida's humanitarian allocation analysis methodology. The analysis reflects the current humanitarian situation across crises and is being updated continuously with the latest available data. The information in the HCA is based on reports, data, and information from partner organisations and other entities, as well as observations from field visits and dialogue with partners.

¹ Flexible funding includes a mix of allocations such as Rapid Response Mechanism and other flexible funding mechanisms.