Humanitarian Crisis Analysis 2025

Sudan

30 September 2025

1. Crisis overview[i]

4.7 / 5	30.4 million	20.9 million	$4.2 billion	25%
Inform severity index	People in need of humanitarian aid (HNRP 2025)	People targeted in the response plan (HNRP 2025)	Required to reach the target (HNRP 2025)	Of the required funding secured (HRP 2025)

261 MSEK	103 MSEK	43.4 MSEK	407.4 MSEK
Initial allocation	Additional allocation	Flexible funding	Total Sida funding 2025

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 2023, the rainy season hampers the ability to bring supplies into parts of Darfur, which are 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. Numerous reports of systematic sexual violence have surfaced, while conflict-related restrictions have limited access to lifesaving GBV services.

While humanitarian needs are widespread across Sudan, three main groups face the most severe and extensive challenges: those residing in the areas most affected by conflict, those who have been displaced, and returnees to retaken areas. 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 currently concentrated in Greater Darfur and Greater Kordofan. 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 hosting in areas with already scarce access to basic social services. Thirdly, during 2025 more than 2,2 million people have been recorded as returnees, mainly in Khartoum and Al-Jazira where SAF resumed control during the first part of 2025. The areas of return are severely impacted by conflict and lack all social services as well as is heavily contaminated by explosive remnants of war.

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. While there has been no new IPC since December due to Sudan withdrawing from the organization, all indicators point to a worsening food security situation.

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. During 2025 cholera has spread in several parts of the country, including Khartoum, Darfur and Kordofan.

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. The closing of USAID has also affected humanitarian assistance in Sudan, especially in the Health sector with a majority of health clinics having to shut down. However, as of September the US remain the largest bilateral donor to Sudan.

Humanitarian access to the hardest hit areas continues to be a major challenge; most humanitarian organisations have had to limit their operations due to 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 areas to which people are fleeing, including in White Nile, West, South, and North Darfur, North Kordofan, Northern, and Al Jazira. As of September 2025, the border crossing at Adre in Chad will remain open until December 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 and irregular response. In order to ensure a conflict sensitive response, continuous humanitarian presence in all parts of Sudan is required, including by the UN.

The global freeze and scale-back of US humanitarian funding 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 substantial decrease in targeted funding, while not limiting the number of targeted beneficiaries to the same degree. This will, in the HC's words, 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.

In summary, 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 continued to target a wide set of partners that are able to complement each other. The initial allocation focused 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 were prioritised. Moreover, Sida also aimed 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 targeted the Health and WASH sectors 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.

In September, Sida made an end of year allocation focused specifically on crises with very acute needs and severe underfunding. In this allocation, an additional 103 MSEK was allocated to Sudan. This funding has been directed towards responding to the food security and health crises, mainly targeting the FSL, WASH, Nutrition and Health sectors while choosing partners with a proven capacity to mainstream protection.

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 2025 (SEK)		
PARTNER	FLEXIBLE FUNDING[1]	ADDITIONAL ALLOCATION
FAO	8,000.000	-
MSB	11.053.000	-
OCHA	8,600,000	-
AAH	3,000,000	-
IRC	7,892,430	-
Islamic Relief	4,900,000	-
AAH	-	5,000,000
ICRC	-	15,000,000
SHF	-	33,000,000
UNICEF	-	30,000,000
WFP	-	20,000,000
TOTAL	**43,445,430**	**103,000,000**

[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.