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SUDAN Khartoum pre-crisis profile

HOW HAS THE CURRENT CONFLICT AFFECTED KHARTOUM?

On 15 April 2023, the alliance between the Sudan Armed Forces (SAF) and Rapid Support Forces (RSF) collapsed into violence. The conflict that began in Khartoum has spread across the country, causing death, injuries, displacement, and destruction. Since 15 April, 70% of all documented political violence incidents in Sudan have occurred in Khartoum state. As at 23 June, this escalation had resulted in over 270 reported fatalities in Khartoum and more than 2,000 across the country as the two conflicting factions attempted to gain control over strategic locations and supply routes within the capital. The battle to gain the upper hand has intensified, affecting the region and its inhabitants (ACLED 23/06/2023).

As at 15 June, clashes were mostly affecting Khartoum state, but there was also fighting in Darfur and Kordofan. The factions have violated multiple ceasefires, which have done little to stem the conflict (ACLED 23/06/2023; CNN 19/06/2023). During the most recent ceasefire, called at the start of the Eid al-Adha celebrations on 28 June, the SAF conducted air strikes on RSF positions (OCHA 16/04/2023; ECHO 07/06/2023; Sudan Tribune 28/06/2023).

The conflict has resulted in extensive displacement across Khartoum state since erupting in mid-April. As at 7 June, fighting in the capital continued to affect other communities, resulting in displacement within Bahri, Jebel Awlia, Karrari, Khartoum, Sharg An Neel, Um Bada, and Omdurman localities within Khartoum state. As at 27 June, an estimated 2,152,800 individuals (431,031 households) across Sudan were recently displaced, and more than 644,800 had crossed the border into neighbouring countries, including Central African Republic, Chad, Egypt, Ethiopia, Libya, and South Sudan.

Nearly 67% of the IDPs were from Khartoum state. Only 1.7% of those displaced from Khartoum city had settled in other locations within the state, while over 98% had moved to other states and neighbouring countries (IOM 27/06/2023). IDP households in Khartoum state are sheltering with relatives in the host community (57.3%) or in rented accommodation (43.3%), with food and water being their priority needs (IOM 06/06/2023 and 27/06/2023; Radio Dabanga 06/06/2023).

Displacement across Sudan and into neighbouring countries from 15 April to 27 June



Source: IOM (27/06/2023)

INFORMATION GAPS

- Up-to-date information on baseline indicators is not available. The last available baseline data was gathered in 2014 (see the Multiple Indicator Cluster Survey 2014).
- There is currently limited information about accessible areas for humanitarian responders and the response capacity in Khartoum state.
- There is limited information on gender-based violence (GBV), including sexual violence, focusing on Khartoum state.
- Forecasts indicate that Khartoum will have below-average rains in 2023, but there is a lack of information on the impact of drought-like and dry conditions in the state (ICPAC accessed 04/07/2023).

O KEY FIGURES

+937,000 DISPLACED FROM KHARTOUM STATE

+19,000

IDPS WITHIN KHARTOUM STATE

7

LOCALITIES IN KHARTOUM HOSTING IDPS

13

STATES ACROSS SUDAN HOSTING IDPS FROM KHARTOUM STATE

PRIORITY NEEDS INCLUDE FOOD, EMERGENCY SHELTER AND HEALTH

acaps () Thematic report 11 July 2023

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Localities hosting IDP communities in Khartoum state as at 27 June



Source: IOM (27/06/2023)

Attacks on civilians

Civilians have borne the brunt of the current conflict, which involves heavy artillery and air strikes. In Khartoum state, civilians have been caught in the crossfire, with both sides of the conflict actively targeting them. As at 16 June, the conflict had killed at least 2,000 people across Sudan. Out of at least 260 incidents of political violence reported across Sudan as at 23 June, 70% occurred in Khartoum state (ACLED 23/06/2023). A recent attack on 30 May involved the shelling of an open-air market in Mayo, a poor neighbourhood in the south of Khartoum city, killing 27 people and injuring 106 (The Guardian 01/06/2023). On 29 April, the SAF deployed the Central Reserve Police (Abu Tira Forces) to maintain safety and security on Khartoum streets. There have been widespread accusations of human rights violations against the Central Reserve Police, and their deployment has led to concerns of the increased targeting of civilians (The Conversation 03/05/2023; US DoS 21/03/2022).

The civilian population's safety and security have deteriorated as a result of the breakdown of law and order and the resulting widespread surge in criminality because of the absence of police in the capital. Prison breaks and a lack of law enforcement agents have led to attacks, robberies, and other violent actions against people seeking assistance and families on the move to safer areas (UNHCR 04/06/2023; Sudan Transparency 12/06/2023).

Gender-based violence, including sexual violence, and conflict-related sexual violence (CRSV)

There have been increased reports of the warring parties committing GBV, including sexual violence, and CRSV against women and children since the conflict started in Khartoum (Daily Sabah 01/06/2023; UN Women 21/04/2023). As at 9 June, OHCHR confirmed at least 12 incidents of sexual violence against 37 women in Khartoum; the actual number is most likely higher (OHCHR 09/06/2023). As the conflict continues, vulnerable populations such as children and elderly are at risk of increased exposure to GBV and CRSV with limited access to and availability of medical care, psychosocial support, and other specialised protection services, including cash and dignity kits (REACH 23/05/2023; UNHCR 04/06/2023).

Negative coping mechanisms

Communities in Khartoum are experiencing extreme deprivation and poverty, poor economic conditions, and a lack of services and access to money. This situation has compelled people to use harmful strategies to cope with their circumstances. These strategies include selling assets and property; engaging in exploitative labour, such as child labour and prostitution; and exposing themselves to increased protection risks. The intensity of the conflict in Khartoum has severely disrupted the operations of the government organisations that manage national protection and aid systems. As conditions in Khartoum deteriorate, those

who have fled find themselves in precarious displacement situations in areas with limited protection services. Even when the security situation allows people to relocate to safer areas within Sudan or neighbouring countries, their arrival places an overwhelming burden on aid and services in those destinations, worsening the already severe humanitarian needs in these host communities (UNHCR 04/06/2023; EC accessed 08/06/2023).

Attacks on civilian infrastructure

The warring forces have used heavy artillery weapons in urban areas, damaging critical infrastructure and leaving millions without access to necessities, including power, water, health, and communication. As at 1 June, entire districts of Khartoum state no longer had running water, and electricity was only available for a few hours per week. Three-quarters of hospitals in combat zones were not functioning (Daily Sabah 01/06/2023). On the first day of fighting in April, fire shut down the city's water treatment facility, cutting off safe water supply in parts of Bahri, a city north of the capital. Safety and security issues hamper water authorities' efforts to repair the damaged facilities (HRW 04/05/2023). As at 7 June, the RSF had also seized four major water stations in Khartoum, and the lack of water forced residents to move. On 5 June, the RSF detained the workers at Soba water station, south of Khartoum. Soba water station is a major water station for the capital and supplies 200,000m3 of water daily (Radio Dabanga 06/06/2023). Heavy artillery weapons have also caused severe destruction to commercial and residential buildings (WE Forum 26/05/2023).

Healthcare has been one of the most affected sectors across Sudan, especially in Khartoum state (WH0 14/06/2023; MSF 20/04/2023). As at 13 June, the conflict had destroyed 60 of the capital's 89 hospitals, and a lack of supplies and personnel put the remaining operational hospitals at risk of closure (0CHA 13/06/2023). In Khartoum, hospitals are overstretched and face interruptions to the supply of water, electricity, and fuel for generators. Personnel in these facilities have been working nonstop since the violence erupted and have been on duty for many hours, providing lifesaving care in extremely difficult circumstances (MSF 20/04/2023; Sudan Medical Association Facebook 19/04/2023). As at 31 May, WHO confirmed 45 attacks on health facilities, with approximately 75% of health facilities in Khartoum state reported as non-functional since the start of the conflict. The situation in Khartoum has severely affected health services across the country, resulting in supply chain disruptions and the discontinuation of several critical programmes (ABC 04/06/2023; Health Cluster 05/06/2023). As at 18 May, the main cold chain storage facility in Khartoum, housing the bulk of the nations' vaccines, was no longer accessible (FSC 18/05/2023).

Northern River Nile 91,786 Abyei PCA 94,000 West Kordofar 319.448 Red Sea 319,978 East Darfur 344.098 Red Sea Blue Nile 346.510 424,855 ennar Northern North Kordofan 432,828 Gedaref 445,614 West Darfur 477,558 Central Darfur 503.063 River White Nile 518.297 Nile North Darfur Kassala 593.035 South Kordofar 603.828 North Darfur 674,266 Aj Jazirah 707.00 South Darfur 1.060,784 North Khartoum 2.104.05 Kordofa Total 10.088.298 Aj Jazirah West Darfu West National Boundary Kordofar State Boundary Central Darfu PiN distribution by locality <29,000 South 29,001 - 45,000 Darfu Fast South Abye PCA 45.001 - 80.000 Darfur Kordofan 100 200 km >80,000 ite of Production: May 11, 2023 purces: Sudan Health Cluster, WHO, HDX, UNOCHA

Sudan health cluster's people-in-need review by state as at 11 May

Source: Health Cluster (05/06/2023)

As at 11 May, Sudan's health cluster found that there were over 2.1 million people in Khartoum state (21% of the country's population) requiring healthcare because of the current conflict. Key priorities of the health cluster include addressing trauma and emergency care needs, reactivating the delivery of integrated health services, and restarting epidemiological surveillance and early warning systems (Health Cluster 05/06/2023).

Economy and livelihoods

- Inflation rates over 160% •
- Fuel prices increasing by 1,000%

Source: Mercy Corps (08/05/2023)

Since the start of the conflict, economic activity has been severely affected in Khartoum state. The intense fighting has damaged shops and offices, and insecurity has prevented people from accessing their usual employment (Sudan Transparency 12/06/2023; Al Jazeera 03/06/2023). Most markets are operating, but several neighbourhood shops have closed owing to fear or a shortage of supplies. Prices for staple commodities have increased because of import shortages. In Khartoum, inflation rates of more than 160% have been observed on basic items (Mercy Corps 08/05/2023; FSC 18/05/2023). There have also been several reported attacks in markets and other places of work across the capital since the conflict started (Mercy Corps 08/05/2023; The Guardian 01/06/2023). As at 12 May, there were limited available sources of income, and some residents had resorted to borrowing from shops and attempting to find work to obtain cash, such as transporting other people in their vehicles and rickshaws in safe areas (Radio Dabanga 12/05/2023). Fuel shortages have led to fuel price increases of up to 1,000%, limiting transportation (FSC 18/05/2023). As at 8 May, banks in Khartoum were closed, and the conflict had destroyed some. There is a severe cash shortage, worsening the crisis. Particularly in Khartoum, the scarcity of cash and the depletion of food reserves pose a grave risk of starvation for the population (Mercy Corps 08/05/2023; Sudan Transparency 12/06/2023).

The conflict has disrupted economic activity throughout Khartoum. Fighting has damaged shops and offices, and insecurity has prevented people from accessing their usual employment. People have also had significant difficulties accessing cash as banks are closed, and network interruptions render mobile money platforms inaccessible (Mercy Corps 08/05/2023). Limited supplies and interrupted transportation networks have caused concerns about resupplying commodities as local inventories are depleted (FSC 18/05/2023). Since the conflict started, there have been several reports of attacks on markets and other workplaces across Khartoum (Mercy Corps 08/05/2023; The Guardian 01/06/2023). As the conflict continues, critical fuel shortages have resulted in excessive fuel costs, severely limiting transportation availability. These shortages further impose a heavy burden on the accessibility and affordability of transportation services, intensifying the population's difficulties in their daily routines. This escalating fuel crisis has further worsened the consequences of the conflict, resulting in widespread disruptions and hardships for the affected communities (FSC 18/05/2023).

Humanitarian operation and access

The conflict in Khartoum has affected the entire country, resulting in the paralysis of the federal administration. States relied heavily on Khartoum for administrative and budgetary operations, including distributing funds for salaries. The Federal Government has been struggling to operate effectively since the coup in October 2021, when the SAF-RSF alliance assumed power. Following the outbreak of conflict in April 2023, the public sector experienced a significant breakdown, as it was primarily centralised around the already weakened federal



administration. Most senior civil servants have not been seen in public, although the ministers of finance, health, and social development have relocated to Port Sudan and mostly work to coordinate aid deliveries. Public sector employees have not received salaries since March (Sudan Transparency 12/06/2023).

The conflict has severely interrupted humanitarian operations in Khartoum, and needs have increased by more than 40% (FSC 18/05/2023). Khartoum has historically been the centre of operations for most humanitarian organisations in Sudan, but since the eruption of the recent conflict, humanitarian coordination structures have relocated to Port Sudan along with most of the Khartoum-based international organisations. There have been attacks and looting on aid assets and offices. As at 24 May, only a handful of humanitarian responders were operational in Khartoum, with most organisations having evacuated their staff as conflict continued (Sudan Tribune 24/05/2023; Radio Dabanga 29/05/2023; Al Jazeera 25/04/2023). Access within Khartoum remains a significant challenge for the humanitarian response, and only local NGOs and volunteer organisations can access some of the most affected hotspot areas to supply lifesaving operations in Khartoum (FSC 18/05/2023; TNH 02/06/2023). Resistance committees, formed during the 2019 revolution, operate emergency services and coordinate localised responses to repair damaged infrastructure and sustain health services (TNH 02/06/2023; Al Jazeera 22/04/2023).

Delays with the issuance of staff visas, bureaucratic delays related to moving aid from Port Sudan, and insecurity prevent a robust response in Khartoum (Logistics Cluster 06/06/2023). As at 31 May, entry visa issuance delays to returning aid workers severely affected the already collapsing medical sector, causing additional burdens on medical staff attending to affected individuals in Khartoum (TNH 02/06/2023; Radio Dabanga 31/05/2023).

As at 12 June, only USD 401.5 million (15.7%) of the USD 2.6 billion required for the humanitarian response had been received. As a result of the conflict, the required amount for humanitarian response increased by 46% from USD 1.7 billion to USD 2.6 billion from December 2022 (0CHA 13/06/2023; FSC 18/05/2023).

WHICH STAKEHOLDERS AND ALLIANCES ARE AFFECTING OR DETERMINING THE SITUATION?

The primary conflicting parties, the SAF and the RSF, largely determine the violence levels and access to conflict-affected populations in Khartoum. From the coup in October 2021 until the current conflict in April 2023, the SAF and the RSF jointly ruled Sudan in an unstable alliance. The SAF has long been the dominant force in the Sudanese military, political, and economic life. The RSF has risen from a local militia to a national power broker threatening the SAF's pre-eminence. The SAF and RSF have made rebel leaders controlling various states instrumental in consolidating power without addressing these states' existing socioeconomic and political issues (France 24 17/04/2023).

Sudanese Armed Forces: Sudan has been under military rule for over 55 of its postindependence years, which it gained in 1956. General Abdel Fattah al-Burhan leads the SAF. The SAF's leadership is mainly from central Sudan. The institution remains tied to the pre-revolutionary National Congress Party constituencies that dominated the previous regime. The SAF has many business interests, including large-scale agricultural, weapon, and ammunition production and banking. The SAF has strong ties with Egypt. Government officials in Port Sudan have mediated humanitarian access, with the Humanitarian Aid Commission, General Intelligence Service, and SAF controlling the movement of all aid assets and staff (C4ADS 29/06/2022; RVI/Xcept 10/05/2023; Logistics Cluster 06/06/2023). The SAF's incapacity or reluctance to maintain law and order has resulted in the worsening security situation in several states and the current problem of trust between the SAF and other parties, worsening the conflict (Al Jazeera 18/05/2023).

Rapid Support Forces: the RSF is a paramilitary force that sprang from the Sudanese Government's Janjaweed militias during the Darfur War. The Janjaweed militias mostly comprised pastoralist Arab tribes from western Sudan and Chad. General Mohamed Hamdan Dagalo leads the RSF, which has functioned as a parallel force under the leadership of the National Intelligence Security Services or the SAF since its creation in 2013. Because of the impromptu nature of their creation and their ambiguous legal status, their specific location in the chain of command is unclear and fluctuating, rendering them semi-independent. This independence has expanded as a result of major private sector investments, mainly through Al-Junaid, and international contracts with the EU (TWP 15/04/2023; LRB 18/05/2023).

There have been accusations against the RSF and the Janjaweed militias of war crimes in Darfur. They have also been accused of using violence against demonstrators during the 2019 Qiyada massacre and during the political shift in October 2021. There have recently been several allegations of people wearing RSF uniforms or driving RSF vehicles participating in intercommunal violence in Greater Darfur. The RSF and its leadership hold substantial financial and military power but lack social and political support outside of limited tribal allegiance (Reuters 15/04/2023; PHR 05/03/2020).

Resistance committees: resistance committees are the organised units that enabled the successful revolution in 2019 and continued protesting the October 2021 coup, especially in Khartoum. These citizen movements express civic opposition to military rule in Sudan, and many consider them to be the groups most representative of the population. Since April 2023, these groups have been essential in coordinating protection, sharing information, and sustaining service delivery in Khartoum. Resistance committees tend to be politically neutral without alliance to the SAF or the RSF, both of whom have staged security operations against civilians in 2019, 2021, and the current war (AI Jazeera 22/04/2023; New Internationalist 23/05/2023; CMI 2021).

Since the start of the current conflict, a few resistance committees have reopened hospitals that air strikes had damaged or that medical staff had left. Resistance committees have also procured essential supplies and contacted healthcare professionals, urging them to volunteer their services to the injured and chronically ill, providing a vital lifeline to those needing medical assistance (TNH 02/06/2023).

Pre-crisis context

Khartoum state



Source: OCHA (28/06/2021)

Demographics

Khartoum state, Sudan's smallest state by area (22,142km2), hosts the national capital, Khartoum. The tripartite metropolis of Khartoum comprises three cities, Bahri (or Khartoum North), Khartoum, and Omdurman, divided by the natural borders of the convergence of the Blue and White Nile Rivers and surrounded by arid plains (ACRC 06/2021). The capital city hosts the State, governmental and non-governmental organisations, and the country's main airport, Khartoum International Airport. Khartoum state borders the states of Aj Jazira, Gedaref, Kassala, Northern, North Kordofan, River Nile, and White Nile (0CHA 29/03/2023).

Population

Metropolitan Khartoum is one of the most populated cities on the African continent. As at December 2022, the Central Bureau of Statistics estimated that Khartoum hosted almost 20% (4.97 million) of Sudan's total population (0CHA 29/03/2023).

People on the move

Conflict, civil wars, drought, flooding, and other natural hazards have caused mass internal displacement. Besides dealing with internal displacement, Sudan receives a lot of migrants from other countries, many of whom end up settling in Khartoum state. As at December 2022, Khartoum hosted 309,000 refugees and asylum seekers (27% of the total 1.14 million refugees and asylum seekers in Sudan), including close to 120,000 from South Sudan. Only 39% of the refugees in Sudan live in camps; many others live in settlements in the outskirts of Khartoum (UNHCR 23/03/2023).

Languages

The official languages used in Khartoum are Arabic (Khartoum Arabic) and English. Because of the metropolitan nature of the state, people also speak other minority languages (University of Leeds accessed 06/06/2023).

Politics

Throughout Sudan's history, Khartoum has served as the epicentre of wealth and power accumulation, a legacy that dates back to colonial times. This centralisation of influence has persisted through various civilian governments and military regimes in Sudan. The growth and development of the capital have come at a cost, as other regions in Sudan have been deprived of development. This concentration of resources and opportunities in Khartoum has perpetuated regional disparities, leaving other areas of the country disadvantaged.

The consequences of this imbalanced distribution have hindered the development and prosperity of Sudan as a whole (CMI 05/2023).

Since 2018, Sudan has been experiencing waves of political change that have affected governance and the economy. In August 2018, Sudan's former long-time ruler, Omar al-Bashir, announced running for a third term, dividing the ruling coalition as doing so would require a constitutional amendment. In December 2018, mass protests against rising food prices broke out in several cities, killing dozens of people. In January 2019, hundreds of civic and political organisations formed the Forces of Freedom and Change, a committee that coordinated the subsequent non-violent resistance movement that eventually led to the President's removal. In April 2019, the city residents conducted sit-in protests at army headquarters calling for a leadership change and a transition to civilian rule. These protests resulted in the removal of President Omar al-Bashir and killed 100 people. Although the overthrowing of the President was perceived as a new dawn in civilian leadership, the transition to civilian rule was short-lived, and the country returned to army rule (Freedom House 30/11/2022; ICG 21/10/2019). In June 2019, civilian groups backing the uprising signed a deal to share power with the military, leading to the appointment of Abdalla Hamdok as president (Reuters 16/04/2023).

In October 2021, the army, under the leadership of General Abdel Fattah al-Burhan (current leader of the SAF), dissolved the civilian Government in a coup. In October 2022, anti-military demonstrations in Khartoum calling for a return to civilian rule killed one civilian. After decades of Sudan's leaders settling scores in peripheral states outside Khartoum, conflict finally erupted between the SAF and the RSF in Khartoum in mid-April, leading to a total shutdown of the state and the entire country (CEIP 03/05/2023).

Economy

Sudan has faced significant economic instability for an extended period, partially attributed to the US imposing financial sanctions in 1997. These sanctions were a response to severe human rights abuses and the Sudanese Government's alleged support for international terrorism (TNH 06/10/2017). The secession of South Sudan in 2011 significantly affected Sudan's economy, as it resulted in the loss of 75% of its oil production fields, which served as its primary revenue source. This loss led to a drastic decline in the country's GDP, which the 2019 coup further worsened (IGC 12/2020; UN 10/2019).

GDP growth (%) of Sudan, 2015–2020



Source: IGC (12/2020)

Although international human rights groups criticised the move, the US lifted its sanctions in October 2017. This change was to incentivise the Sudanese Government to address human rights violations while maintaining a partnership with Sudan because of its significant geopolitical and security role in the region. Despite the removal of sanctions, Sudan's economy remained fragile (FP 03/07/2018). Sudan's economy shrank significantly between 2018–2020 as a result of IMF-recommended economic reforms, which aimed to increase the country's access to foreign exchange. The Government cut wheat and fuel subsidies and devalued the Sudanese pound, resulting in foreign currency shortages and an inflation rate increase of 72% at the end of 2018 (ENCA 08/10/2018; FEWS NET 22/12/2018; ICG 14/01/2019).

Sudan's economy grew by 0.5% and 0.3% in 2021 and 2022, respectively, but the country has been experiencing an inflation rate upwards of 400% since 2017. The coup led to inflation rates peaking in 2021, but an unexpectedly low harvest and the effects of the IMF reforms have still resulted in inflation rates above 100% at the end of 2022 (0CHA 07/11/2022). The Government removed all fuel and wheat subsidies as part of the IMF reforms, raising the inflation rate to levels the country had not previously seen (Reuters 09/06/2021).

Inflation rate in Sudan, 2017–2022



Source: OCHA (07/11/2022)

Corruption

In 2022, Sudan was perceived as one of the most corrupt countries in the world (ranking 162nd out of 180 in the Corruption Perceptions Index) (TI accessed 21/06/2023). Public servants have been observed demanding additional facilitation payments for services that individuals or companies are entitled to, creating a system where government officials have personal and indirect interests in various enterprises. This corruption puts foreign firms without political connections at a disadvantage. Corruption has also hindered the administration of justice and law enforcement in the country (GI 05/11/2020: CMI 31/03/2017; U4/TI 22/01/2020).

Infrastructure

Infrastructure in Sudan is largely based around the capital Khartoum. The country's main international airport, Khartoum International Airport, and most paved roads are in Khartoum. The urban population in Khartoum largely depends on public infrastructure (Zumrawi 03/2021). Only about one-third of Sudan's 45 million population had electricity access as at July 2022.

Hydroelectric dams and oil generators are the main supporters of the electricity grid, which experiences an average daily deficit of 1,000 megawatts. In Khartoum and other large cities, blackouts of 8 to 12 hours per day are typical during the hot summer months, when electricity demand rises (ITA 30/07/2022).

PRE-CRISIS LIVING CONDITIONS

Poverty

The poverty rate in Sudan experienced a significant increase, from 36.5% in 2015 to 55.4% in 2020, and it further rose to 55.9% in 2021. Multiple factors are behind the rise in poverty, including political instability, hyperinflation, and the impact of the COVID-19 pandemic. These challenges have disproportionately affected the population, leading to more people living in poverty and struggling to meet their basic needs (AfDB 13/05/2022). In 2014, poverty in rural areas was higher than in urban areas, at 57.6% and 26.5%, respectively (CBS et al. 02/2016). As mentioned previously, Sudan has been subject to major economic impacts mostly related to conflict since independence, which the COVID-19 pandemic compounded. The economy is centred around Khartoum and the nearby riverine states, leading to high levels of inequality. The current poverty incidence in Sudan is unknown, as available baseline information is outdated, with the latest National Household Budget and Poverty Survey dating back to 2014/2015. Urban poverty is concentrated in Khartoum; in 2014, 41% of the urban poor lived in Khartoum, up from 23% in 2009. This figure may have changed (CBS et al. 02/2016;;; UNDP 05/08/2020).

Livelihoods and employment

In Sudan, 40% of the youth in urban areas were unemployed as at 2014, and there were even higher rates among young women. Women are generally significantly marginalised from the employment market. In 2014, 76% of men and 33% of women participated in Sudan's labour force, and overall, women were more than twice as likely to be unemployed as men. Khartoum's unemployment rate increased from 8.8% in 2009 to 16.6% in 2014. This tendency appears to be linked to increased migration to urban centres, at least in part in search of employment and other income sources (CBS et al. 02/2016).

Health

Almost 80% of Sudan's healthcare services are in Khartoum (ABC 04/06/2023). As at June 2021, there were 31 public healthcare facilities in Khartoum, of which 15 were referral health centres and 16 primary healthcare units. There were 14 secondary and tertiary hospitals, 10 NGO health centres, and 60 private health facilities (Noory et al. 17/06/2021). In 2023, under-five mortality rate in Khartoum state was 50%, below the national level of 68% (OCHA 29/03/2023). The higher availability of health facilities, resulting from the concentration of primary and specialised healthcare facilities, means that Khartoum state has the highest vaccination levels in the country. In 2014, around 90% of all children in the state had been vaccinated (DPT-3), well above the national average of 74% (CBS et al. 02/2016). Between 2017–2021, Sudan's physician average per 10,000 people was 2.7, below Africa's average of 3.3 over the same period. This average is attributed to healthcare personnel seeking better opportunities abroad (WH0 2022; WH0 accessed 04/07/2023).

Diseases

Dengue fever is endemic in Sudan, and cases of dengue fever and malaria usually increase in the country after floods. Although outbreaks had previously been recorded in peripheral states, an outbreak of dengue fever was reported in Khartoum state for the first time in April 2023, before the start of the conflict. As at 29 March, Khartoum state had recorded 1,344 confirmed cases and 2,482 suspected cases of dengue fever (Radio Dabanga 29/03/2023).

WASH

The Khartoum State Water Corporation manages WASH in Khartoum state and is responsible for provision, development, expansion, and sanitation management. As at June 2019, the corporation only covered 7% of the state population (National Audit Chamber 30/06/2019).

Although water-related health statistics are scarce, there is evidence of critical water-related health effects in Sudan, both in high-density urban and rural areas but particularly in high-density urban areas such as Khartoum, where drinking water and wastewater treatment are poorly developed and maintained. The health impacts are serious, evidenced by outbreaks of cholera and diarrhoeal diseases (MWRI 12/2011). Sudan's 2014 Multiple Indicator Cluster Survey showed that Khartoum state had better access to WASH than any other state, scoring higher than the national average in all indicators. This score resulted from the state being the seat of government and historical infrastructure development, focusing more on Khartoum than peripheral states.

WASH in Sudan, 2014

INDICATORS	KHARTOUM	NATIONAL	URABN	RURAL
Use of improved drinking water sources (%)	86.9	68	78.3	63.5
Water treatment (%)	1.1	4.1	3.7	4.2
Use of improved sanitation (%)	66.4	32.9	57	22.1
Place for handwashing (%)	42.1	25.8	34	21.8
Availability of soap or other cleansing agent (%)	81.9	55.4	67.9	50.1

Source: CBS et al. (20/07/2016)

Protection concerns

Attacks on civilians and other unlawful killings

Since December 2018, protests against bread price increases and calls for a transition to civilian rule have been met with disproportionate and excessive force from the Sudanese army. Protests calling for President al-Bashir to step down have been dispersed using live ammunition, tear gas, and rubber bullets, running over protesters with vehicles, and attacks on medical facilities. Physicians for Human Rights reported that between 19 December 2018 and 17 March 2019, the forces attacked seven healthcare facilities, arresting 136 healthcare personnel and firing at hospitals with tear gas and bullets (HRW 17/11/2019;Radio Dabanga 10/01/2019;Global Protection Cluster 23/12/2022). In June 2019, civilians conducted a sit-in protest near the army headquarters, calling for a return to civilian rule. The army used excessive force to disperse citizens, leading to the deaths of 52 people (HRW 17/11/2019; PHR 05/03/2020).

Early and underage marriage

Cases of early and underage marriage remains significantly high in the country, and in 2016 an estimated 34.2% of young women aged 20–24 had been married by 18. Child marriage is defined as marriage under the age of 15 and is still being practised in the country, although it is declining. According to the OHCHR, 12% of children aged between 15–19 in Khartoum state were married in 2018 (UN Women accessed 18/05/2023). Funding shortages and a lack of technical capacity and coordination at the national level have prevented humanitarian responders from effectively addressing child marriage. As at 2017, the Ministry of Justice was working to revise the 1991 Personal Status Law of Muslims, which legalises child marriage in Sudan. They had proposed changing the minimum age for marriage for girls from 16 to 18 (UNICEF 2017).

Percentage of married young women in Khartoum state and Sudan

INDICATORS	KHARTOUM STATE	SUDAN
% of women (aged 15–49) married before 15	6.9	11.9
% of women (aged 20–49) married before 18	26.5	38
% of women (aged 15–19) married as at 2018	12	21.2

Source: Gindeel and Etim (09/2019)

Sexual and gender-based violence

GBV, which has disproportionately affected women and children and some men and boys, continues to be one of the principal protections concerns for refugees and asylum seekers in Sudan. Because of the stigma and fear of retaliation, GBV is largely underreported. Anecdotal data from offline trackers and service use reports show that the main types and forms of GBV are rape, intimate partner violence, sexual and physical assault, forced marriage, child marriage, economic and emotional abuse, female genital mutilation, and forced sex labour. Poor lighting, restricted energy availability, and the long distances that women and girls must walk to obtain water and gather firewood worsen GBV risks in camps and settlements. Women have mentioned being exposed to GBV when looking for informal labour in participative assessments. Funding levels for GBV programmes have generally fallen short of demands, which has also affected the effectiveness of initiatives for GBV services, including the clinical management of rape, psychosocial support, legal aid, case management, and referral mechanisms, are unavailable in more than 61% of Sudan's localities (0CHA 07/11/2022).

Education

Khartoum state is the centre for education in Sudan, with the majority of primary, secondary, and tertiary education institutions being in Khartoum. As at December 2022, 92.6% of children in Khartoum who completed primary school continued to secondary school, above the national average of 90.7%. Literacy for women is also higher than in other states. As at December 2022, 82.6% of young women (15–24 years) were literate, compared to only 59.8% nationally (0CHA 29/03/2023).

PRE-CRISIS HUMANITARIAN CONCERNS AND CAPACITIES

Existing displacement and refugees

Sudan hosted 1.14 million refugees as at September 2022; the majority were from South Sudan (814,000), and others were from Eritrea (133,000), Syria (93,000), Ethiopia (73,000), Central African Republic (24,000), Chad (4,000), and Yemen (2,000) (0CHA 07/11/2022). Children comprised 43% of Sudan's registered refugee and asylum-seeker population, with 11% being unaccompanied and separated children (UNHCR 23/03/2023 and 30/01/2023).

As at 28 February, Khartoum hosted the largest proportion (38%) of refugees in Sudan. The city hosted an estimated 309,000 refugees and asylum seekers (UNHCR 23/03/2023 and 30/01/2023). Before the conflict, Sudan hosted more than 800,000 South Sudanese refugees, with at least 100,000 settled in makeshift camps in and around the capital without much humanitarian support (Reuters 25/08/2022).

Food security and nutrition

Successive years of economic upheavals, conflict, poor harvest, and climatic shocks have raised acute food insecurity to immeasurable levels in Sudan (0CHA 14/12/2022). The latest IPC analysis for Sudan was from June 2022, where it was predicted that over 1,193,500 people (13% of Khartoum's population) would face acute food insecurity – Crisis (IPC Phase 3) or worse levels – from October 2022 to February 2023. This prediction was a slight reduction from the 14% who estimated to be in this situation between April–May 2022 (IPC 21/06/2022). As at March 2023, the prevalence of global acute malnutrition among children under-five in Khartoum was 14.5%, slightly lower than the national value of 16.3%. The prevalence of chronic malnutrition (including severe and moderate) among children under five was 21.9%, significantly below the national value of 38.2% (0CHA 29/03/2023).

Climate-related hazards

Sudan ranks among the world's most vulnerable nations to climate variability and change. In recent decades, it has experienced a rise in the frequency of droughts, resulting in food insecurity and significant fluctuations in rainfall patterns that have led to floods. These changes have already imposed considerable strain on rain-dependent agriculture and pastoralism, which are the primary livelihoods in the country, especially in rural areas.

Floods

The rainy season in Sudan typically occurs annually between June–September, with the greatest concentration of rain resulting in flooding between August–September (0CHA 08/12/2022). As a riverine area, extensive floods have affected Khartoum state over recent years. In August–September 2022, the greater Khartoum area experienced heavy rains and flash floods that affected urban neighbourhoods, affecting about 2,700 people in five localities (Omdurman: 1,276; Jebel Awlia: 1,025; Khartoum: 260; Um Bada: 100; Bahri: 80). The floods also damaged and destroyed 377 houses across the state (0CHA 02/10/2022). In 2020, floods affected at least 100,000 people (23,000 households) in Khartoum and damaged and destroyed more than 20,000 houses (IOM 23/09/2020).

Drought

Predictions indicate that Khartoum state will receive 40% below-average rainfall between June–September, recording a seventh consecutive failed rainy season and severely affecting the rain-dependent agriculture. This lack of rainfall will lead to losses in harvest, livestock, and income (ICPAC accessed 05/07/2023). Information on past drought impacts in Khartoum is currently limited.

PRE-CRISIS RESPONSE CAPACITY

In 2022, there were around 9.6 million humanitarian workers across Sudan, of whom an estimated 306,000 were in Khartoum state (0CHA 14/12/2022). OCHA reported that Sudan received 54% (USD 1.05 million) of its USD 1.94 billion requirement in 2022 (0CHA accessed 12/05/2023).

While many international and national humanitarian organisations had offices in Khartoum, there were only 12 providing services in the health, nutrition, protection, WASH, shelter and NFI, and education sectors. The large organised civic movements that characterised the revolutionary period continued to function in various capacities after the coup in 2019. This movement monitored flour deliveries to ensure an adequate supply of bread and mobilised to press for a transition to civilian rule (CMI 2021). As part of the Forces of Freedom and Change, the Sudan Medical Doctor's Association had been negotiating for democracy since before the 2019 coup (OCHA 14/12/2022; RCF et al. 20/09/2022; HumAngle 06/02/2023).

PRE-CRISIS HUMANITARIAN ACCESS CONSTRAINTS

Before the current war, there had not been any conflict in Khartoum state in recent years, but there had been protracted protests because of inflation and political change since 2018. These protests had hampered the humanitarian response to communities in need (Defend Defenders 12/21; US DoS accessed 26/06/2023). Bureaucratic and administrative challenges have also hampered humanitarian operations in Sudan. Before travelling outside their operational base, international humanitarian professionals must acquire a Travel Notification authorisation from authorities via the Humanitarian Aid Commission. Many humanitarian organisations have complained about the impediments to normal operation brought about by the Humanitarian Aid Commission's bureaucratic processes and government control, which was shrinking the civic space in Sudan by unlawfully dissolving consumers' societies and associations (ACJPS 16/02/2023 and 02/11/2022). Delays in the approval procedure have affected how programmes are implemented. For each project with the Government, INGOs also had to sign a technical agreement that lasted for one year. Bureaucratic delays in approval of the technical agreement may occasionally hamper the delivery of programmes (0CHA 21/09/2022).