

CRISIS IMPACT OVERVIEW

On 11 April, the Rapid Support Forces (RSF) conducted a three-day assault on Zamzam camp, the largest camp for displaced people in Sudan, located in North Darfur, around 15km south of El Fasher City, resulting in the displacement of at least 406,265 (81%) of the camp's inhabitants to various localities across the Greater Darfur region and hundreds of civilian deaths (IOM 27/04/2025; OHCHR 25/04/2025). As of 27 April, the majority of the IDPs were displaced to Tawila (303,300) and El Fasher (83,890), as well as other localities in North, Central, South, and East Darfur, including Wasat Jabal Marrah, Dar Es Salam, Kutum, Mellit, Kateila, and Shia'ria (IOM 27/04/2025; MSF 18/04/2025; The Guardian 18/04/2025; OCHA 15/04/2025). Between 21 and 29 April, violence was ongoing in El Fasher city, the capital of North Darfur, as the RSF conducted artillery shelling of the city's neighbourhoods, reportedly killing and injuring dozens of residents (AA 29/04/2025; Radio Dabanga 24/04/2025; AJ 21/04/2025).

On 13 April, the RSF declared control of Zamzam camp (AJ 13/04/2025). By 24 April, it was unclear how many people remained in the camp, and RSF-aligned groups were not allowing those remaining to leave, most of whom are young people (OCHA 24/04/2025). There are reports that older people, people with disabilities, people with injuries, and people with chronic illnesses were left behind (MSF 18/04/2025; KII 17/04/2025). Satellite imagery analysis from 16 April revealed that up to 1.7km² of Zamzam camp, including its central market, have been destroyed (HRL 16/04/2025; Radio Dabanga 23/04/2025). The camp originally opened in 2004 to host people affected by the war in Darfur that began in 2003 (UN News 06/03/2025).

Since April 2024, armed conflict in and around El Fasher has escalated, as the RSF and Sudanese Armed Forces (SAF) battle for control, triggering repeated cycles of violence, displacement, and constrained humanitarian access (UN Geneva 18/09/2024; ACLED 17/05/2024; IOM 20/12/2024). The city remains largely inaccessible as a result of continuous RSF siege since May 2024, cutting off supply routes and restricting humanitarian access – see the latest ACAPS Sudan access analysis; STC 12/04/2025; OHCHR 20/12/2024). The fighting around El Fasher has further increased since January 2025, with attacks leading to the displacement of around 3,960 household households between 25 and 27 January in villages across the locality (IOM 28/01/2025). On 14 February, Zamzam camp and market were attacked, resulting in the killing of at least seven civilians and the restriction of escape routes and aid delivery (AJ 03/02/2025 and 16/02/2025).

The rapid arrival of people from Zamzam camp has significantly strained already limited resources in El Fasher, Tawila, and other localities. Those who fled Zamzam camp had their belongings taken and are reaching displacement sites without any supplies (OCHA 15/04/2025). In Tawila, there is an urgent need for medical care, water, food, shelter, and protection for IDPs, many of whom are arriving malnourished or dehydrated (AJ 21/04/2025; MSF 18/04/2025). Access constraints have prevented detailed assessment of IDP needs in El Fasher, but needs are likely high as, including for water, protection, medical care, and food, especially as people in Zamzam camp have been enduring Famine (IPC Phase 5) levels of food insecurity since August 2024 (IPC 24/12/2024). In March 2025, over 698,800 IDPs were already being hosted across El Fasher locality (IOM 17/04/2025).

The surge in displacement and severely limited humanitarian access and operational capacity has led to a rapid rise in the scale of unmet needs. People with the highest needs are likely to be those with injuries, chronic health conditions, mobility issues, and high levels of food insecurity and malnutrition – particularly children under five, older people, and pregnant and lactating women. Women, girls and boys are facing increased protection risks, including gender-based violence (GBV) and abduction (OHCHR 25/04/2025). One key informant reported that young men have been targeted and executed by the RSF during its attacks on Zamzam (KII 17/04/2025). These developments are compounding the severe hardships already experienced by IDPs, exposing them to even greater risks of violence, exploitation, and abuse, particularly in areas where formal protection mechanisms are weak or entirely absent.

ANTICIPATED SCOPE AND SCALE

- The RSF's continued shelling of El Fasher is likely to result in further displacement across North Darfur. Retaliatory SAF attacks are also likely, leading to the area's further destabilisation. As a result, the likelihood of return for thousands of IDPs in the short term remains low. Needs, especially food insecurity and heightened protection risks – including exploitation, GBV, and family separation – are expected to worsen, likely resulting in increased mortality among IDPs, particularly pregnant and lactating women and children facing Famine (IPC Phase 5) conditions.
- The upcoming rainy season is expected to further aggravate already fragile conditions across displacement sites and conflict-affected areas. With rains anticipated to begin in June, the combination of overcrowded living conditions and insufficient WASH and health services is likely to heighten the risk of waterborne disease outbreaks, including cholera and acute watery diarrhoea. Seasonal flooding may also worsen access constraints, disrupt aid delivery, and increase the isolation of communities (UNHCR 09/08/2024).

HUMANITARIAN CONSTRAINTS

- Continued violence, communications blackout, fuel shortages, and deterioration of security in El Fasher has significantly constrained access (OCHA/UN RC/HC Sudan 20/04/2025; OCHA 15/04/2025). While the multiple crises in North Darfur mean that humanitarian needs continue to grow, the pace of humanitarian intervention has greatly reduced as a result of physical limitations to accessing people in need. Since May 2024, sustained access restrictions imposed by the RSF and Sudan Liberation Movement/Abdul Wahid Al Nur have severely obstructed the delivery of humanitarian assistance to El Fasher and surrounding areas. These restrictions have created a de facto blockade, cutting off hundreds of thousands of civilians, mostly children, from lifesaving aid, including food, water, and medical supplies (Sudan Tribune 21/04/2025; AJ 21/04/2025; SAPA 15/04/2025). Satellite images from 19 April revealed checkpoints encircling Zamzam camp, with testimonies highlighting the RSF's denial of exit from the camp (Reuters 19/04/2025). The deliberate denial of access not only hampers immediate relief efforts but also prevents humanitarian responders from assessing needs, prepositioning supplies, and planning safe delivery routes amid rising displacement and famine conditions.
- The conflict in and around El Fasher continues to pose severe security risks to humanitarian personnel and operations. By 18 April, at least 11 aid workers had been killed in Zamzam since 17 February, including nine in the most recent attacks (RI 13/04/2025; STC 17/02/2025). In late February, in response to escalating insecurity and active hostilities, both Médecins Sans Frontières and the World Food Program were forced to suspend activities in Zamzam camp, affecting a large population in need of lifesaving assistance (WFP 26/02/2025; MSF 24/02/2025). These suspensions have had significant impact on the delivery of essential services, including medical care and food assistance, at a time when needs are rapidly rising (Sudan INGO 17/02/2025; Radio Dabanga 23/04/2025).
- Insecurity and the presence of armed groups have made direct access to affected communities impossible, preventing independent verification of humanitarian needs, displacement patterns, and protection concerns. As a result of continued access constraints, humanitarian and monitoring organisations have been forced to rely heavily on remote interviews with key informants to gather information on the situation in and around El Fasher. This reliance on second-hand information limits the accuracy and timeliness of assessments, further delaying humanitarian response (SAPA 15/04/2025; MSF 15/04/2025; IOM 13/04/2025; RI 12/04/2025).

CRISIS IMPACTS

Food insecurity

There is a need for food assistance for the people newly displaced to Tawila and El Fasher and other localities (OCHA 24/04/2025; MSF 18/04/2025). Many are severely malnourished, underscoring the sharp deterioration in humanitarian conditions in North Darfur (STC 16/04/2025; Sudan Tribune 16/04/2025). The attacks compound an already dire food security situation in the region. Since August 2024, famine-like conditions were reported in Zamzam camp, yet since then lifesaving food assistance has been difficult to provide due to ongoing insecurity, access restrictions imposed by RSF, and the rainy season (WFP 26/02/2025; AP 25/02/2025; IPC 24/12/2024). The relocation of IDPS from Zamzam camp to areas where humanitarian access and aid delivery may be even more limited is likely to worsen food insecurity.

Even prior to the recent wave of violence, North Darfur was experiencing critical levels of food insecurity as a result of siege-like conditions restricting the movement of goods. Between October–November 2024, 1.9 million people, equivalent to 70% of North Darfur's population, were classified as facing Crisis (IPC Phase 3) and above levels of food insecurity, including more than 209,000 (8%) experiencing Catastrophe (IPC Phase 5) levels, the most severe classification on the IPC scale. Projections for May 2025 suggest a further deterioration, with at least 2.02 million (74%) of people expected to remain in IPC 3 or higher, including over 321,000 (12%) in Catastrophe (IPC Phase 5) (IPC 24/12/2024; OCHA 10/04/2025).

The RSF-imposed siege has severely disrupted market supply chains across North Darfur, with particularly acute impacts in and around Zamzam camp. This has contributed to a steep rise in food prices, further straining displaced populations' ability to meet basic needs (OHCHR 20/12/2024; DNHR 26/02/2025). The blockade is maintained by a combination of interconnected tactics, including military encirclement, road closures, the suspension of digital banking services, and communication blackouts. Together, these measures have effectively cut off access to markets, remittance flows, and humanitarian assistance. The cumulative effect of these restrictions has been a key driver of the area's descent into IPC 5 famine conditions (AJ 13/04/2025; IPC 24/12/2024). Following the RSF attack on Zamzam, the price of a kilogram of wheat rose significantly, from SDG 3,000 (approximately USD 5) to SDG 15,000 (USD 25) when purchased with cash, and up to SDG 22,000 (USD 37) when paid via mobile banking (The Guardian 18/04/2025). Additionally, the cost of a litre of diesel went up to SDG 34,000 (USD 56) from SDG 6,800 (USD 11) over the course of three months (OCHA 24/04/2025). The significantly higher cost of essential products and services such as fuel and food poses a strain to existing market functionalities as well as humanitarian programming (OCHA 24/04/2025; The Guardian 18/04/2025).

Alongside rising food prices, widespread displacement has resulted in the loss of livelihoods, crops, and livestock across North Darfur. Farming and pastoralist activities, central to household income and food production in North Darfur, have been severely disrupted by continued violence and insecurity, leaving families with limited or no access to their primary means of sustenance. This has depleted financial reserves and diminished traditional coping mechanisms, further deepening resilience gaps to prolonged crisis and the limited capacity to recover without sustained support (UNICEF 24/12/2024; FAO 15/04/2025).

Protection

Although information remains limited, there are reports that people have experienced a range of protection risks from the attacks on Zamzam camp, including ethnically motivated violence, attacks on civilians, sexual violence, movement restrictions, theft/destruction of personal property, abductions, and child and forced family separation (OHCHR 25/04/2025; MSF 18/04/2025; OCHA 15/04/2025). There is a need for mental health and psychosocial support for those that have endured the attacks (STC 16/04/2025). Families have been forced to flee, often becoming separated and by 21 April, at least 123 children had been reported missing (3ayin 21/04/2025; Sudan Tribune 16/04/2025). The RSF has also taken an unknown number of people hostage, including young women and girls abducted from Zamzam camp (OHCHR 25/04/2025; KII, 17/04/2025). In some cases, RSF forces have prevented displaced people from fleeing and strategically placed them in areas of active combat, raising serious concerns about the violation of their right to protection during conflict (Reuters 19/04/2025; The Guardian 18/04/2025). RSF members have warned displaced people not to return to Zamzam camp, reinforcing the perception of continued insecurity and targeted reprisals (3ayin 21/04/2025)..

Shelter

In March 2025, there were around 698,865 IDPs hosted across El Fasher locality and the mass displacement triggered by the attacks of Zamzam has significantly raised the need for emergency shelter (OCHA 25/04/2025; IOM 17/04/2025). The exact shelter conditions remain unclear, but high levels of displacement have undoubtedly placed immense pressure on already limited resources and infrastructure. In Central Darfur, 3,500 IDPs have arrived in Golo and Rokero facing minimal shelter options and settling instead in open areas (OCHA 25/04/2025). As of 16 April, thousands of displaced families in Tawila were living in open spaces, under trees, or crowding into schools and makeshift shelters (Sudan Tribune 16/04/2025). Without sufficient capacity to safely accommodate such large numbers, the situation poses significant risks to health, safety, and overall wellbeing. Overcrowding in available facilities also limits access to basic services such as water, sanitation, and healthcare, while increasing the likelihood of communicable disease outbreaks and protection concerns.

Health

Health needs are high for those displaced by the attack on Zamzam camp, especially as healthcare services in El Fasher are close to collapse, forcing people to rely on pharmacies that are nearly empty and traditional medicine (SAPA 15/04/2025). Since 24 February, escalating violence has forced the only health facility in Zamzam camp to close, leaving the displaced population without access to medical care. As of 16 April, Al Saudi Hospital in El Fasher remained the sole functioning hospital in the city and has been operating under extremely challenging conditions, including regular aerial bombardment (SAPA 15/04/2025). Firsthand testimonies reveal that many injured people have received makeshift treatment for conflict-related injuries, such as cauterisation using fire, as there is a lack of medical supplies and professional care as a result of the siege (The Guardian 18/04/2025).

Sudan's healthcare system has been under severe strain since the onset of the war in April 2023, which has significantly disrupted health service delivery across the country as facilities are under-resourced and critically understaffed. Between April 2023 and 14 February 2025, there were 575 documented attacks on the health system nationwide. These incidents resulted in the deaths of 127 health workers and a further 96 injuries and 73 arrests (Insecurity Insight 09/04/2025). The targeting of healthcare personnel and infrastructure has not only reduced the availability of essential medical services but also created an environment of fear and insecurity for those delivering care.

Current health risks are compounded by the displacement crisis, which is forcing thousands of people into overcrowded spaces without adequate access to clean water, sanitation, or hygiene facilities. These conditions create an environment conducive to the rapid spread of communicable diseases. As of 28 April, over 60,200 cholera cases had been recorded across the country, largely driven by earlier flooding combined with inadequate sanitation, and overcrowded conditions (GDHEEC accessed 28/04/2025; IFRC 15/04/2025). In North Darfur, the combination of mass displacement, inadequate shelter, and the collapse of health services significantly heightens the risk of cholera outbreaks and other waterborne diseases. The lack of effective surveillance mechanisms further aggravates this risk, creating not only the risk of localised outbreaks but also the potential for a broader regional public health emergency. Without adequate monitoring and response systems in place, these health risks are likely to escalate, further straining already overwhelmed communities and humanitarian efforts.

WASH

The mass displacement triggered by the attacks on Zamzam camp have forced people to flee in extreme environmental conditions, as temperatures exceed 35° C and there is a severe shortage of safe drinking water. Médecins Sans Frontières reported that, by 18 April 2025, at least 1,600 patients needed emergency outpatient care, primarily for acute dehydration. Infants, young children, lactating mothers, and older people are particularly vulnerable to the effects of extreme heat and dehydration as a result of their heightened physiological needs, increasing their risk of life-threatening complications in the absence of adequate medical care and hydration support (MSF 18/04/2025). As of 15 April, an increase in diesel prices and fuel shortages were restricting water trucking services and reducing the availability of safe drinking water (OCHA 15/04/2025).

Prior to 11 April, access to safe drinking water was already severely constrained. Fuel shortages resulting from the siege aggravated this as reports from Zamzam camp indicated that residents faced delays of up to two days to obtain a single jerrycan of water (OCHA 10/04/2025). Although specific data on current needs in temporary shelters remains unavailable, WASH needs are expected to be critical as a result of limited water availability and inadequate sanitation facilities. These conditions not only heighten the risk of dehydration-related illness, particularly among more susceptible groups, but also undermine basic dignity and safety. In overcrowded IDP sites, the lack of adequate WASH services poses a serious barrier to both health and protection, weakening the overall effectiveness of humanitarian efforts and aggravating the already severe impacts of displacement.

DRIVERS OF THE CRISIS

Internal conflict

Since the outbreak of war between the SAF and RSF in 2023, various armed groups aligned to either party have become involved, resulting in heightened humanitarian needs across Sudan. El Fasher, the capital of North Darfur, was the last major city in the Greater Darfur region under SAF control. It is strategically positioned in southwestern North Darfur, close to the borders with Chad and South Sudan (Bellingcat 12/06/2024). El Fasher also connects Greater Darfur to the northern part of Sudan and, up until 2023, was the hub for all humanitarian aid coming through Port Sudan (Sudan Reeves 27/06/2025). Since May 2024, El Fasher has been under siege, with RSF attacks on the city escalating significantly between May–November (OHCHR 20/12/2024). Escalating confrontations between the parties have been marked by the increasing use of explosives, including indiscriminate shelling and bombardments (SAPA 15/04/2025).

RSF has historically perpetrated ethnically motivated violence against non-Arab groups, including the Masalit, Fur, and Zaghawa peoples in Darfur since the conflict in 2003 (AJ 30/06/2023; HRW 06/05/2004). This has continued during the war that broke out in April 2023, including between April–November 2023, when thousands of Masalit were killed in El Geneina, West Darfur, by the RSF and allied militias (HRW 09/05/2024; OHCHR 17/11/2023). Zamzam camp was established in 2004 and had hosted 120,000 displaced people that escaped the violence of Arab armed groups amid the Darfur conflict of the early 2000s (EEAS 07/03/2020). Since the start of the war in 2023, Zamzam camp has hosted millions of displaced civilians fleeing other parts of Greater Darfur, including Abu Shouk, Al Salam, and Dinka camps, El Fasher, Tawila, and West, Central, and South Darfur (OCHA 18/09/2024).

COMPOUNDING/AGGRAVATING FACTORS

Rainy season

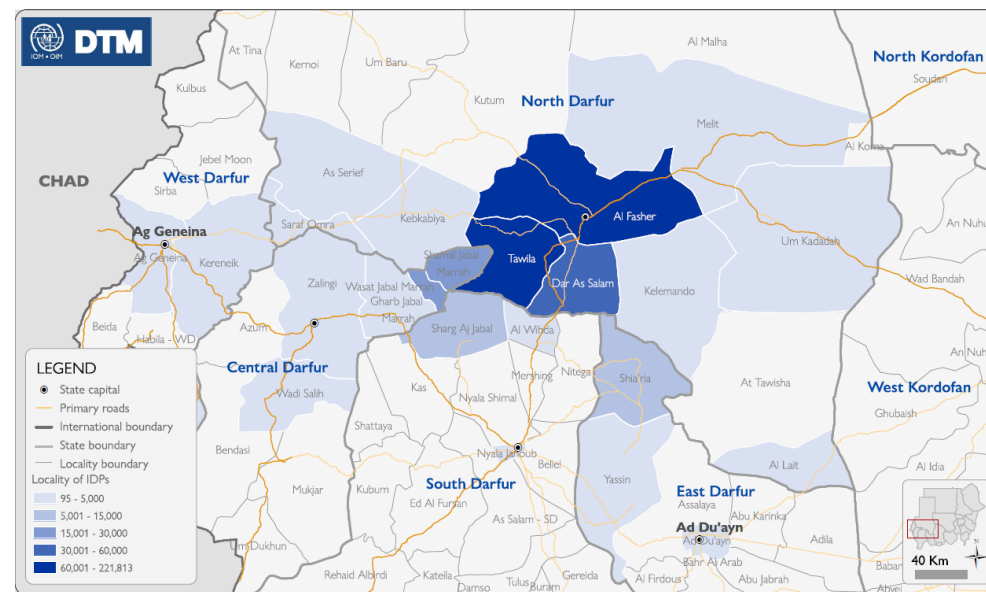
The rainy season in Sudan typically spans March–October, with the heaviest rainfall occurring from June–October and resulting in worsening humanitarian needs and conditions. In 2024, heavy rains and resultant flooding led to widespread displacement, destruction of civilian infrastructure (such as roads and bridges), and reduced humanitarian access (Radio Dabanga 27/08/2024). This seasonal pattern has a particularly devastating impact on IDPs. In August 2024, the severity of these conditions was underscored by the collapse of at least 3,000 shelters in the Abu Shouk IDP camp in northern El Fasher, confirming the structural fragility of temporary settlements at IDP sites (Radio Dabanga 30/08/2024; UNHCR 09/08/2024). In 2025, the rainy season is likely to aggravate the needs of displaced people in temporary shelters or staying in open areas, increasing their risk of waterborne and respiratory diseases. This increased risk is the result of several factors, including flooding, which contaminates water sources, and poor sanitation infrastructure.

FUNDING AND RESPONSE CAPACITY

Humanitarian responders have reported being overstretched, lacking the funding and capacity to respond to the emergency (OCHA/UN RC/HC Sudan 20/04/2025). On the local level, Tawila Emergency Response Room hosts soup kitchens targeting between 150–300 households at a time, still short of meeting the scale of need (Tawila ERR accessed 23/04/2025). In Zamzam, people were cut off from one of the camp's largest local food access points when the Sudanese American Physicians Association's aid kitchen, which operated eight community kitchens that fed at least 10,000 people two meals per day, was struck and burnt by the RSF amid shelling, resulting in the complete suspension of the association's operations in the camp (HRL 16/04/2025; SAPA 15/04/2025; ICRC 19/11/2024). The RSF has besieged El Fasher since May 2024, tightening the blockade since January 2025 in recent months and preventing goods and relief supplies from entering (AJ 21/04/2025; Sudan Tribune 21/04/2025). This is likely to continue affecting the movement of humanitarian teams into and around El Fasher.

The suspension of US foreign aid in January has had severe repercussions for humanitarian operations in Sudan (WH 20/01/2025). In 2024, the US was Sudan's largest humanitarian donor, providing nearly 44% of all humanitarian funding, including support for food security, nutrition, multisector responses, health, and WASH programmes (OCHA accessed 24/04/2025). Subsequent funding reductions have significantly diminished the response capacity of UN organisations, international and national NGOs, community responders, and civil society groups, including Emergency Response Rooms. These measures have forced organisations to suspend activities, downsize operations, and curtail programmes. The impact extends beyond US-funded initiatives, affecting cross-grant support costs and services critical to programmes funded by other donors, as well as the loss of pulled resources (ACAPS 13/03/2025). This is likely to affect the response by humanitarians already facing movement restrictions and insecurity.

Map 1. Displacement from Zamzam camp by 27 April



Source: IOM (28/04/2025)