



UNITED NATIONS POPULATION FUND

SITUATION REPORT

Sudan

1 – 30 November, 2025

Highlights

The situation in El Fasher, North Darfur, remains extremely volatile, with escalating violence, aerial attacks, and mass displacement. Protection concerns, including sexual violence, remain high for women and girls. As of late November, more than 106,000 people had been displaced, prompting UNFPA to support 24/7 basic emergency obstetric and newborn care (BEmONC) services in Tawila—where people are arriving—deploy midwives, establish confidential gender-based violence (GBV) corners, and roll out mobile GBV teams providing psychosocial support (PSS) and safe referrals.

In the Kordofan states, where over 50,000 people are newly displaced, UNFPA strengthened EmONC services at key hospitals, deployed mobile and temporary clinics, provided cash assistance for obstetric referrals, and expanded GBV prevention and response services to ensure continued access to life-saving services for women and girls.



30,400,000

Total people in need ¹



7,296,000

Women of reproductive age in need ²



726,520

Pregnant women in need ²



968,695

Women and girls targeted with SRH services



1.9M

People targeted with GBV programmes

¹[Sudan Displacement Tracking Matrix](#)

² Estimated figures are based on the Minimum Initial Services Package (MISP) for Sexual and Reproductive Health in Humanitarian Settings calculator.

Situation Overview

The humanitarian situation in El Fasher, North Darfur, remains dire, marked by escalating violence, mass displacement, and reports of atrocities, including sexual violence and summary executions. In the Kordofan states, civilians in besieged towns and areas of active fighting are facing severe difficulties accessing essential services, including sexual and reproductive health (SRH) care and protection support.

Between November 2024 and September 2025, an estimated [2.6 million](#) people returned to their areas of origin; approximately 2 million individuals were internally displaced and 523,845 returned from outside Sudan. These return movements present emerging priorities for the humanitarian community, requiring a strengthened focus on supporting returnees and facilitating access to essential services in affected areas, including SRH and protection services for women and girls.

Protection remains a major issue for women and girls across Sudan as systems and networks have collapsed; services remain extremely limited; and sexual violence is being used as a deliberate tactic of war to displace, terrorize, and destroy entire communities in a number of states. Women continue to be impacted by a lack of access to health care, including emergency obstetric care—over [80 percent](#) of health facilities in areas affected by conflict are non-functional. A lack of critical supplies, skilled health care providers, and access is exacerbating the situation. Risks of GBV and exploitation remain high, and malnutrition is increasing in parts of the country.

El Fasher

Tensions in and around El Fasher remain extremely high, with reports of drone strikes, aerial bombardments, and ongoing clashes between the Sudanese Armed Forces (SAF) and the Rapid Support Forces (RSF) across multiple locations in North Darfur.

According to the latest Displacement Tracking Matrix, as of 24 November 2025, an estimated 106,000 individuals have been displaced from El Fasher town and surrounding villages in North Darfur. Al Afad internally displaced persons (IDP) camp, located 25 km east of Al Dabbah town, Northern State, currently hosts an estimated 10,240 IDPs, primarily from North Darfur (Tawila, and El Fasher), with some arrivals from Kordofan. The camp continues to expand rapidly, with growing displacement and gender-specific needs.

UNFPA Response in Tawila and Al Dabbah

In Tawila, UNFPA supports a 24-hour BEmONC facility providing integrated reproductive health and protection services. Between 26 October and 18 November, a total of 2,290 medical consultations were provided, including 405 reproductive health consultations, 90 normal deliveries (50 conducted at the facility), and 10 referrals to comprehensive emergency obstetric and newborn care (CEmONC) facilities.

UNFPA also deployed 10 midwives in Tawila locality, eight in rural El Fasher, and 30 in Melit locality, and established a confidential GBV corner at Tawila Hospital, providing survivors of GBV with safe and discreet access to counselling and clinical services. Additionally, UNFPA supported clinical management of rape (CMR) training for 40 health providers.

Distribution of post-exposure prophylaxis (PEP) kits has commenced in coordination with the Tawila health authorities, with six facilities now providing CMR services. UNFPA has deployed four GBV mobile teams in Tawila and Al Dabbah to reach newly displaced populations in remote areas. These teams provide psychological first aid, PSS, and safe referrals, ensuring survivor-centred and holistic care. In total, about 800 women and girls, including GBV survivors, received specialized case management and PSS, while more than 600 women and girls received dignity kits, accompanied by information sessions on available services, referral pathways, and the importance of seeking medical care and reporting sexual violence within the critical 72-hour window.

In Tawila, 260 women and girls received cash and voucher assistance (CVA). Of these, 180 received emergency cash support to address immediate protection risks and reduce exposure to GBV; 30 GBV survivors received cash assistance to access critical services; and 45 pregnant women received financial support to manage delivery and obstetric complications.

In Northern State, UNFPA supports Al Dabbah Maternity Hospital—including strengthening the capacity of the hospital’s CEmONC services through staffing and operational support—which provided more than 500 reproductive health services, including safe deliveries, to women and girls displaced from El Fasher between 26 October and 18 November. Additional interventions include the deployment of seven roving midwife teams, supervision and in-service training for 20 community midwives, CMR training for healthcare providers, and CVA for displaced women requiring emergency obstetric care.

The UNFPA-supported health clinic in Al Afad Camp provided basic health services, including antenatal care, postnatal care, delivery services, and comprehensive family planning, reaching a total of 1,320 women and girls.

In South Darfur and Chad, UNFPA has prepositioned reproductive health and dignity kits sufficient to support 300,000 people, including supplies for 800 safe deliveries and PEP for rape survivors, ready for deployment once humanitarian access is secured.

Funding Requirements (El Fasher Response)

Response	Funding Required (USD)	% Funded
Sexual and Reproductive Health	2,880,000	29%
Gender-Based Violence	1,920,000	24%
Total	4,800,000	27%

“Three soldiers separated me from the group and asked if I was a virgin. When I said yes, they took me to their office and raped me before allowing me to continue walking.”

— Salam (named changed) received clinical management of rape and psychosocial support services at a UNFPA supported facility in Tawila.

Kordofan

According to the [latest DTM there are more than 50,000 people](#) internally displaced within North and South Kordofan states as of the beginning of December 2025. UNFPA has deployed 44 healthcare providers to Al Fula Hospital, West Kordofan, to support the provision of EmONC services. UNFPA has also provided CVA to 40 women and girls to cover referral costs, including 15 normal deliveries and 25 caesarean sections. In addition, UNFPA is supporting GBV case management services through a women and girls' safe space, including the provision of PSS to GBV survivors. Awareness-raising sessions on GBV and female genital mutilation (FGM), including youth-focused sessions, have been conducted, alongside GBV-related trainings targeting service providers, community leaders, and line ministry representatives.

In South Kordofan, UNFPA's support includes renovating and operationalizing the EmONC facility at Kadugli Hospital, deploying mobile and temporary clinics, and establishing confidential corners. UNFPA is also supporting access to EmONC services, providing assistance to survivors of sexual violence, and facilitating referrals for obstetric emergencies. Midwives operating in safe spaces remain active, providing antenatal care, postnatal care, and family planning services. The CMR roving team documented 10 cases, all female survivors, including four adults and six children. Furthermore, around 900 women and girls benefited from GBV awareness and PSS services.

In North Kordofan, UNFPA's response focuses on the deployment of temporary and mobile clinics to deliver integrated SRH and GBV services in areas with limited service coverage. UNFPA is also supporting the operation of EmONC services at El Obeid Hospital through the deployment of healthcare providers, and provides CVA to cover referral costs, including facility-based deliveries and caesarean sections. During the reporting period, 25 women and girls received CVA to access SRH services. The facility reported 320 caesarean sections and 375 normal deliveries.

UNFPA Response (November 2025)

Sexual and Reproductive Health

Service Delivery: UNFPA provided sustained SRH support across Northern State, Kassala, North Darfur, South Darfur, West Darfur, Red Sea, River Nile, Blue Nile, and Khartoum through the delivery of life-saving services, essential supplies, mobile outreach, capacity-building initiatives, and the deployment

of skilled health personnel. This support covered 14 BEmONC centres, including two in Tawila (North Darfur), one in North Kordofan, and five in Red Sea State, as well as six CEmONC facilities in Northern State, North Kordofan, River Nile, Red Sea, West Darfur, and Blue Nile. In addition, eight mobile clinics were deployed across Northern State, Red Sea, River Nile, North Darfur, and West Darfur.

During the reporting period, more than 19,000 SRH consultations were recorded across the supported states. Services included 465 normal deliveries and 330 caesarean sections conducted at referral facilities. Antenatal care was provided to 2,360 women. A total of 460 obstetric emergency cases were successfully referred to tertiary hospitals for further management.

Within health facilities, UNFPA reached 2,625 individuals through GBV awareness activities, primarily in Northern State, and provided individual GBV counselling and support to 1,830 women and girls through integrated service delivery platforms. Additionally, 1,030 new contraceptive users were registered, and 2,550 women received family planning counselling. At the community level, 3,010 individuals were reached with SRH awareness messages.

Capacity Building: Seventy service providers received CMR training, and 115 midwives completed in-service training, strengthening frontline response capacity. Deployed midwives continued delivering SRH services in IDP-affected areas across Kassala, Red Sea, Khartoum, North Darfur, South Darfur, and Blue Nile.

Supplies: A total of 14 SRH kits and essential medical equipment were distributed to EmONC facilities in North Darfur (Tawila), supporting service continuity and operational readiness for approximately 150,000 people, with 1,265 individuals directly benefiting from the services.

Cash and Voucher Assistance: In November, 260 pregnant women received cash assistance to support safe deliveries and manage obstetric complications, including 125 for normal deliveries, 110 for caesarean sections, and 25 for other obstetric complications.

Gender-Based Violence

Service Delivery: In November 2025, UNFPA reached over 114,000 individuals across Sudan with critical GBV response and risk-mitigation interventions. Services included GBV case management, PSS, comprehensive awareness and outreach activities, and community engagement to strengthen community-based protection mechanisms.

Women and Girls' Safe Spaces (WGSSs): UNFPA continues to operate 75 WGSSs across 18 states in Sudan, providing essential GBV prevention and response services. These spaces offer women and girls a safe, supportive environment to access information, PSS, and empowerment activities. In November 2025, an estimated 44,000 women and girls visited these spaces, including nearly 30,000 first-time visitors — a more than 50% increase compared to October — demonstrating growing trust and reliance on WGSSs as critical community protection points.

Confidential Corners: Eighteen UNFPA-supported confidential corners within health facilities provided survivors of violence with compassionate, confidential, and survivor-centred care, including CMR, GBV case management, PSS, and safe referrals to essential multisectoral services such as legal aid and other

protection services. During November 2025, approximately 2,185 women and girls, including GBV survivors, accessed these specialized services, while 8,090 women and girls benefited from group recreational and skills-building activities at WGSSs, fostering social connectedness and empowerment among crisis-affected communities.

Community-Based Protection Networks (CBPNs): A total of 92 CBPNs remained operational across Sudan. Members of these networks played a crucial role in disseminating key GBV and health-related messages, including information on available health and GBV services, referral mechanisms, menstrual hygiene management, and the importance of reporting sexual violence within 72 hours to ensure timely access to medical and psychosocial care.

Protection Supplies: During the reporting month, UNFPA supported the distribution of protection and hygiene supplies to approximately 2,265 women and girls across Sudan. Compared to October, the distribution of dignity kits decreased by 50%, mainly due to delays in approval for dispatch to respective states. In November, distributions only took place in Gedaref, Kassala, North Darfur, East Darfur, and South Darfur. Distributed items included dignity kits, sanitary pads, underwear, soap, and solar lamps.

Awareness Raising: Through community engagement activities, more than 27,500 people across all states were reached with GBV awareness messaging, promoting risk mitigation and knowledge of available services and referral pathways. These awareness-raising activities were conducted by CBPN members through community outreach, as well as GBV staff deployed at WGSSs. During the launch of the 16 Days of Activism campaign, approximately 5,500 people were reached through various activities across Sudan.

Capacity Building: During the reporting month, 240 people were trained on GBV prevention, risk mitigation, and response services, representing a more than 55% increase compared to October. This included 15 community members and non-GBV service providers, and 225 GBV service providers, including social workers and CBPN members.

Cash and Voucher Assistance (CVA): UNFPA provided CVA to 1,595 women and girls under the GBV programme to support access to critical, life-saving services and address urgent protection needs. Of these, 250 women received emergency cash assistance to reduce immediate exposure to GBV risks and ensure their safety; 155 survivors received cash transfers to facilitate access to essential services; and 1,190 women and girls received vouchers to obtain menstrual hygiene items.

Just Ask! As of November 2025, 2,270 individuals accessed the UNFPA “Just Ask!” platform via hotline and WhatsApp, receiving confidential and life-saving information on SRH, GBV, FGM, and the prevention of sexual exploitation and abuse (PSEA). The platform continues to serve as a vital and safe entry point for women, girls, and young people seeking trusted guidance and support during the crisis.

Promoting Positive Social Norms to Preventing FGM and Child Marriage: More than 10,000 people were reached through awareness-raising activities, dialogue, and campaigns in November 2025. These sessions took place through supported WGSSs and established youth and girls clubs in Blue Nile, Sennar, Gedaref, Kassala, Northern state and River Nile. They provided safe spaces for dialogue and learning, focusing on key issues such as FGM and child marriage, emphasizing increasing risks in the current volatile context.

Since January, engagement activities have been conducted in Gedaref, Kassala, Blue Nile, Sennar, West Kordofan, Northern State, River Nile, Khartoum, and Red Sea, reaching over 50 new communities. Religious leaders actively facilitated sessions advocating against social norms that continue to drive violence against women and girls, while over 100 community members, religious leaders, and teachers were trained on GBV and FGM. Adolescents and youth were engaged as agents of change. By November 2025, new boys’ and girls’ clubs were established across Kassala, River Nile, Blue Nile, Gedaref, and

Northern State, reaching girls and boys through peer education, dialogue, and capacity-building on GBV, FGM, and child marriage. Initiatives included peer-to-peer education, a Poetry Club, three libraries in WGSSs, and training of 13 youth groups to lead community mobilization. In November 2025, UNFPA also supported a podcast production and hate-speech prevention workshop in Port Sudan, engaging 25 adolescents and youth to promote respectful dialogue on social and gender issues.

Results Snapshot Jan-Nov 2025



342,940

People reached with SRH services
95% female, 5% male



47

Health facilities supported ³



572,760

People reached with
GBV prevention, mitigation and response
activities
93% female, 7% male



76

Safe spaces for women
and girls supported



183,305

Non-food items (such as dignity
kits & sanitary napkins)
distributed to individuals



220

Reproductive health kits were
provided to service delivery
points to meet the needs of
34,020 people



13,985

People reached with
humanitarian cash & voucher
assistance for GBV and SRH
100% Female

Coordination Mechanisms

SRH Working Group

The minimum initial service package (MISP)/EmONC assessment was launched nationwide, with data collection completed in 30% of targeted facilities. SRH Technical Working Groups remained functional and aligned with the Health Cluster, supporting coordination across SRH, GBV, CMR, and facility readiness mapping. Additionally, a CMR Taskforce meeting was convened to review assessment findings, identify service gaps, and strengthen survivor-entered response and facility readiness.

GBV Area of Responsibility (AoR)

³ At the beginning of 2025, UNFPA was supporting 90 health facilities. Due to funding cuts UNFPA is now only supporting 47.

In November, 31 GBV AoR partners continued to scale up life-saving interventions across affected areas, with a strong focus on service delivery, community engagement, and capacity strengthening. However, these figures do not fully capture the entirety of the response, as underreporting and limited access continue to affect the visibility of ongoing efforts.

Life-saving GBV Services

- 15,200 (76% female and 24% Male (20% boys & 4% men)) survivors and individuals at risk accessed specialized GBV services, including case management, PSS, and safe referrals.
- 2,020 women and girls received dignity kits and information on menstrual hygiene, GBV, and SRH.
- 42,990 (98% female and 2% male) individuals participated in recreational and group activities at GBV service points.
- 33 service centres delivered GBV services, with seven rehabilitated to enhance privacy, safety, and overall quality of care.

Advocacy and Community Engagement

- 46,005 individuals reached through community-based awareness sessions on GBV prevention, risk mitigation, available services, and safe referral pathways (90% women and girls; 10% men and boys).
- 33 CBPNs supported, strengthening local mechanisms for identification, referral, and community awareness.
- Sudan actively participated in the Call to Action Annual Partners Meeting, strengthening high-level advocacy on protection from GBV in emergencies and reaffirming commitments to prioritize survivor-centred, life-saving GBV prevention and response within humanitarian action, even amid escalating conflict and displacement.
- Over 260 GBV-related activities, including community awareness sessions were implemented nationwide, ensuring continued community awareness and that the voices of women and girls remain heard despite a deteriorating protection environment marked by displacement and escalating violations.

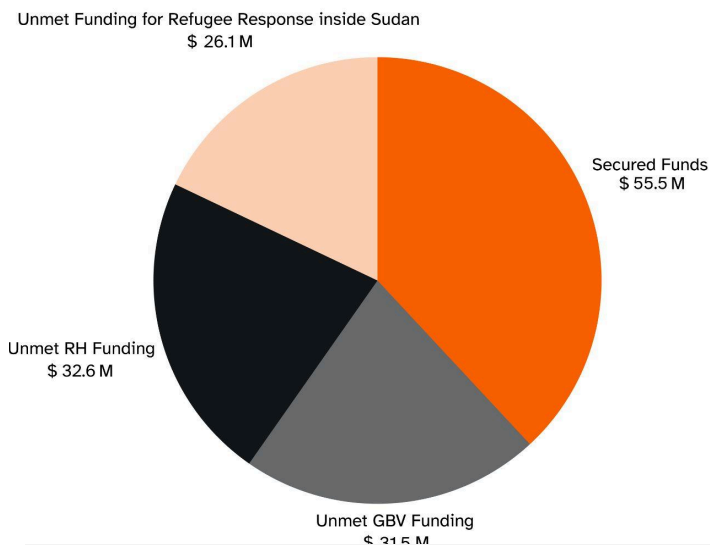
Capacity Strengthening and Economic Resilience

- 1,600 (72% female and 28% male) service providers and community actors were trained on GBV prevention, risk mitigation, response, and referral systems.
- 1,110 (100% female) individuals received vocational training or start-up capital, improving economic resilience and reducing exposure to negative coping strategies.

Funding Status

In 2025, UNFPA is appealing for US\$145.7 million to respond to critical SRH and GBV needs in Sudan. To date, only around 38% of this funding has been provided, leaving a US\$90.2 million funding gap. UNFPA continues to call for urgent financial support to address the growing needs of women and girls in Sudan.

UNFPA is deeply grateful to our donors, whose financial support and advocacy has made it possible to provide vital assistance in 2025.



Disclaimer: Funding available is based on cash received during the current year as well as funding rolled over from previous years, and transfers from/to other UNFPA departments. It does not include funds from agreements that have been signed but not yet received.

Current Donors

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For more information

Fabrizia Falcione
Representative
falcione@unfpa.org

Sufian Abdulmouty (Media Enquiries)
Communications Specialist
abdul-mouty@unfpa.org