UNITED NATIONS POPULATION FUND

SITUATION REPORT

Sudan

1 — 31 August, 2025

Highlights

- El Fasher in North Darfur, along with Kadugli and Delling in South Kordofan, remain under siege with no access to humanitarian supplies. In El Fasher, the maternity hospital, the only remaining functioning hospital in the city, is running critically low on medical supplies and risks complete shutdown.
- Thousands of people, primarily women and children, displaced from North Darfur have arrived in El Dabba, Northern State, where they face dire living conditions. Many are without shelter and urgently require humanitarian support, including protection.
- To support maternal and reproductive health services, 71 reproductive health kits were distributed to service delivery points in Blue Nile, Northern, Central Darfur, and West Darfur states. These kits are expected to meet the needs of over 8,000 women and girls, including those requiring normal deliveries, caesarean sections, and care for other obstetric complications.

30,400,000
Total people in need [1]

7,296,000
Women of reproductive age in need [2]

726,500
Pregnant women in need [2]

902,400
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

As of 26 August 2025, an estimated 9.8 million people were internally displaced across the country. This represents a reduction of 1.7 million individuals compared to the peak displacement figure of 11.5 million, reported by the Displacement Tracking Matrix (DTM) Sudan in January 2025. The decline in overall displacement is largely due to increased return movements, particularly to Khartoum and Al Jazeera. 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 reproductive health and protection services for women and girls.

Women and girls across Sudan continue to be impacted by a lack of access to health care, including emergency obstetric care–over 80 percent of 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 gender-based violence (GBV) and exploitation remain high, and malnutrition is increasing in parts of the country. The onset of the rainy season will compound access constraints and could fuel disease outbreaks, including cholera. In Darfur and Kordofan states, those living in besieged cities and within locations of on-going fighting, are struggling to access basic services, including for reproductive health and protection.

UNFPA Response

Sexual and reproductive health

In August 2025, UNFPA delivered life-saving sexual and reproductive health (SRH) services to more than **70,500 people** across Sudan. Programming focused on three strategic priorities: **service delivery, infrastructure reinforcement, and capacity building**.

UNFPA continued to strengthen the SRH supply chain. 71 **Inter-Agency Reproductive Health (IARH) kits**, including contraceptives, clean delivery kits, and supplies for the **clinical management of rape (CMR)**, were distributed to 29 facilities to cover the needs of over 8,000 women and girls. In parallel, crucial equipment was delivered to reinforce **emergency obstetric and newborn care (EmONC)** services, particularly in support of the safe provision of C-sections.

Fifteen mobile clinics were deployed to nine states, while **27 existing health facilities** received operational support. In addition, the rehabilitation of **five facilities** was finalized, further strengthening the SRH service delivery network. Capacity development was also prioritized, with **46 health staff** trained on SRH protocols and service delivery standards, enhancing the quality and continuity of care.

Community engagement and awareness-raising activities complemented service delivery efforts. During the reporting period, more than **5,200 people** participated in family planning awareness sessions, while over **1,200 women** accessed modern family planning services. Service utilization also remained high across maternal health interventions: **10,200 women** completed at least four antenatal care visits, nearly **7,000 safe deliveries** were supported, more than **5,000 C-sections** were performed, and almost **6,000 women** accessed postnatal care.

Cash & voucher assistance (CVA) supported 555 women to access maternal health services **across five states**. This included **280 normal deliveries, 205 caesarean sections, and 70 obstetric complications**. The intervention ensured timely and life-saving care for these conflict-affected women.

Alongside these efforts, UNFPA continued to integrate **SRH and GBV responses**, ensuring survivors of sexual violence had access to timely and dignified services, including the provision of CMR kits and care from trained providers. Coordination with national authorities, humanitarian actors, and local partners was sustained throughout the month, enabling continuity of services in hard-to-reach and conflict-affected areas.

Gender-based violence

UNFPA and its implementing partners continued to deliver comprehensive GBV prevention, response, and risk mitigation interventions across conflict- and flood-affected areas of Sudan. This includes the deployment of GBV mobile teams and support to 75 women and girls' safe spaces covering Blue Nile, Central Darfur, Gedaref, Kassala, Northern State, River Nile, East Darfur, West Darfur, South Darfur, South Kordofan, Khartoum, White Nile, Al Jazira, and Sennar

In August 2025, over 58,000 women, girls, men and boys were reached with GBV prevention and response interventions across 13 states and 30 localities.

- Awareness and outreach efforts remained strong, with 7 campaigns conducted reaching 18,000 people and reinforced by the dissemination of 600 culturally appropriate information, education and communication (IEC) materials.
- WGSSs continued to function as central hubs for protection and empowerment, with more than 13,500 new women and girls registered.
- 5,700 individuals engaged in life skills and recreational activities, and 1,700 women and girls were supported with start-up kits.
- 4,300 women and girls received sanitary pads and over 13,000 received dignity kits in parallel with information dissemination sessions on GBV, SRH and the prevention of sexual exploitation and abuse (PSEA).
- 5,600 people were provided with psychosocial support, psychological first aid and specialized GBV services. 165 GBV staff were trained on case management and psychosocial support, alongside 140 non-GBV service providers and community members who received training on GBV prevention, risk mitigation, and sign language.
- In August, **3,140** women and girls were supported with CVA across eight states. This included **680 women** and girls at risk of GBV who received emergency cash support to mitigate protection risks; **160 GBV survivors** who accessed critical services through cash assistance; and **2,300 women and girls** of reproductive age who received vouchers for menstrual hygiene items to manage their menstruation and reduce social stigma.

UNFPA continues to support new arrivals to the northern states of Aldabba locality from north Darfur and Kordofan states with GBV response services, the provision of hygiene supplies, and risk mitigation interventions, both at transit and internally displaced persons (IDPs) gathering sites.

Results Snapshot Jan-Aug 2025

258,555
People reached with **SRH services**
95% female, 5% male

47
Health facilities supported [3]

328,220
People reached with **GBV prevention, mitigation and response** activities
93% female, 7% male

75
Safe spaces for women and girls supported

NFI **148,785** Non-food items (such as dignity kits & sanitary napkins) distributed to individuals

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

12,170 People reached with humanitarian cash & voucher assistance for GBV and SRH
100% Female

Coordination Mechanisms

SRH Working Group (August update)

Key technical discussions and updates:

- **MISP & EmONC Assessment**: UNFPA and the Federal Ministry of Health (FMoH) have begun preparations to assess health facilities' capacity to deliver life-saving SRH and maternal care in emergencies. The assessment will identify gaps and generate data to improve services and strengthen the EmONC network.
- **Family Planning (FP) Strategy**: Sudan's new FP Strategy, developed with UNFPA and FMoH, promotes equitable access through policy reform, sustainable funding, community engagement, improved services, and strong monitoring.
- **FP Taskforce**: A new UNFPA-led taskforce will coordinate FP efforts, advocate for resources, provide technical support, and monitor integration, especially in emergencies.

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

Gender-Based Violence

GBV Area of Responsibility (AoR)

Nearly 63,000 people were reached through multiple GBV prevention and response initiatives with more than 35,300 people reached via community-based awareness sessions across multiple states and localities, reflecting strong engagement on GBV prevention and risk mitigation. In addition, nine WGSSs were established in five states and eight localities, with seven centers supported and two rehabilitated, providing safe and accessible hubs for women and girls. Some 16,000 women and girls were provided with a dignity kit, and 4,300 received sanitary pads, addressing urgent protection and hygiene needs.

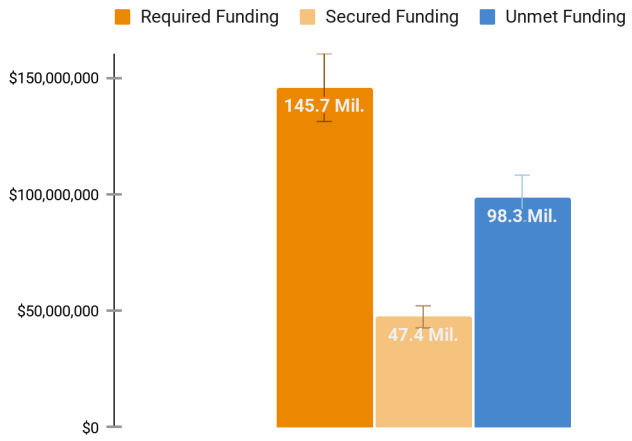
Specialized GBV services were prioritized, with nearly 11,500 people benefiting from tailored support including psychosocial support services, while 1,400 individuals participated in recreational activities that fostered psychosocial well-being and resilience. Capacity building remained central to the response, with 825 GBV and non-GBV service providers, community members, and volunteers trained on GBV prevention, risk mitigation, and response. Additionally, 270 people were trained or supported with start-up capital, strengthening livelihoods and contributing to risk reduction through empowerment-based interventions.

Despite these achievements, GBV programming continues to face serious challenges, including restricted access due to insecurity, difficult terrain, and seasonal road blockages, as well as shortages of fuel, medicines, and dignity kits that disrupt WGSS operations. High market costs, procurement delays, capacity gaps among frontline staff, and overstretched safe spaces further hinder service delivery. Moreover, bureaucratic clearance processes and rising food insecurity linked to displacement exacerbate GBV risks, driving harmful coping mechanisms such as early and forced marriage. These constraints underscore the urgent need for flexible funding, timely reprogramming, and sustained investment to ensure safe, survivor-centered, and effective GBV responses.

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 33% of this funding has been provided, leaving a US$98.3 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: Canada, the Central Emergency Response Fund (CERF), the European Commission, the Global Fund, Japan, JICA, Norway, the Republic of Korea, Sweden, the Sudan Humanitarian Fund (SHF), the United Kingdom, UN Action Against Sexual Violence in Conflict, and UNISFA. UNFPA Sudan is also a recipient of the UNFPA Humanitarian Thematic Fund.



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.

"We don't stop for war, rain, or hardship — we keep going. What makes me proud is simple: every time, I have the chance to save two lives — a mother and her baby."

— Midwife Suad from Blue Nile State

Current Donors

UNFPA Humanitarian Thematic Fund; Canada; CERF; European Commission; The Global Fund; Japan; JICA; Norway; The Republic of Korea; Sweden; SHF; United Kingdom; UN Action Against Sexual Violence in Conflict; UNISFA.

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