

# International Development Committee

## Oral evidence: The humanitarian situation in Sudan, HC 710

Tuesday 23 April 2024

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Members present: Sarah Champion (Chair); Dr Rosena Allin-Khan; Mrs Pauline Latham; Chris Law; Nigel Mills; David Mundell; Mr Virendra Sharma.

Questions 1 - 35

### Witnesses

**I:** Sibongani Kayola, Country Director for Sudan, Mercy Corps; Khalid Osman, Sudan Deputy Country Director, UN World Food Programme; and Mary Louise Eagleton, Deputy Representative, Sudan Country Office, UNICEF.



## Examination of witnesses

Witnesses: Sibongani Kayola, Khalid Osman and Mary Louise Eagleton.

**Q1 Chair:** Welcome to this one-off evidence session on the ongoing conflict in Sudan and the humanitarian crisis that is rolling out of that. We are fortunate today to have three witnesses, all appearing virtually, who are directly responding to what is unfolding. Could you introduce yourselves and your organisations before we start with questions, please?

**Sibongani Kayola:** Good afternoon. My name is Sibongani Kayola and I am the Country Director of Mercy Corps in Sudan. Mercy Corps is an international NGO working in over 40 countries. In Sudan, we deliver assistance to those most affected by the conflict in seven states. Our work focuses on providing immediate support to displaced communities, especially through cash assistance, and promoting long-term resilience and recovery of communities.

**Khalid Osman:** My name is Khalid Osman. I am the Deputy Country Director, but currently acting as the Country Director, with the World Food Programme. We have operated in Sudan since 1963, addressing the needs of the people of Sudan.

**Mary Louise Eagleton:** It is good to be with you. Good afternoon. I am Mary Louise Eagleton. I am the Deputy Representative here in Port Sudan for UNICEF Sudan. UNICEF works across all 18 states of Sudan with a three-pronged approach to the current crisis focusing on hotspots of ongoing conflict, areas of high displacement in the east, north and south in safer states, and across the board on system preservation for Sudan's 24 million children.

**Q2 Chair:** Thank you. Sibongani, could you start by telling us what the current humanitarian situation is in Sudan?

**Sibongani Kayola:** Thank you, Chair. One year of relentless fighting in Sudan has created one of the worst humanitarian and hunger emergencies in recent history. In many places across Sudan we are weeks, not months, away from catastrophe. Nearly 5 million people are living with emergency levels of food insecurity. Approximately 730,000 children are projected to suffer from severe acute malnutrition. They are on the precipice.

In North Darfur, recent reports indicate that emergency thresholds for malnutrition have already been breached twice over. Prices of food have skyrocketed across the country, with the cost of the basic food basket in places such as South Kordofan increasing by over 300% in the last year.

**Q3 Chair:** That is pretty bleak. Khalid, is that your experience? What is the World Food Programme doing to help?

**Khalid Osman:** Further to what my colleague just stated, is it fair to say that right now Sudan is on the brink of something even worse, with



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famine in conflict hotspot areas like Darfur, Kordofan and even Khartoum. That is when hunger reaches a level that is hard even to imagine. It is a nightmare scenario and we have to do everything we can to stop it.

Q4 **Chair:** How close would you say we are to that nightmare?

**Khalid Osman:** If access is not permitted, it will be difficult to even know the conditions of the people in these areas. The biggest obstacle that we face right now, and the largest impediment that faces humanitarians across the board, is our inability to gain access to the citizens who are in desperate need of humanitarian assistance. Furthermore, as the lean season approaches, a shadow of deepening hunger looms large and threatens to engulf even more innocent lives in its unforgiving embrace. Already, a lot of people are struggling to find enough food. The lean season can make things even harder. That is why it is crucial for us to gain access to these communities to deliver vital humanitarian assistance.

Q5 **Chair:** Mary Louise, do you want to add to that and speak in particular about children?

**Mary Louise Eagleton:** We estimate that 14 million of Sudan's 24 million are in dire need of urgent humanitarian assistance. Some 4.6 million children have fled their homes with their families, which makes it the largest child displacement crisis in the world and the largest displacement crisis in the world, with almost 9 million people having fled their homes. That is like a population the size of Switzerland's fleeing, leaving everything behind, losing all their belongings. Their parents have lost their jobs. They are completely stretched, one year on, beyond all means with no purchasing power.

For the last year, 18 million children have not been in school. It is not just an urgent humanitarian crisis where we suspect that thousands more children could lose their lives in the coming months, but a generational catastrophe. I am told that the number of children out of school in Sudan is double the number of primary and secondary school-aged children in the UK. The scale of this learning crisis is severe and has the potential to put the future of Sudan at stake.

Q6 **Chair:** Are the internally displaced people just fleeing conflict, or are there other factors?

**Mary Louise Eagleton:** They are fleeing conflict. Families and communities fled fighting when the war first erupted in Khartoum, Darfur and Kordofan, but every month those numbers have grown. IOM has been tracking those numbers weekly and we are now at these startling numbers. We are talking about a looming famine, and it is a conflict-induced famine. The lethal combination of mass displacement, hunger and disease outbreaks sets up a conflict-induced famine going into the lean season.



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The disease outbreak part is very concerning. Related to what Khalid was saying about access, before the war, there was a healthcare system that functioned, with a functional cold chain system for vaccines across all 18 states, with over 80% childhood vaccination. Now we are at just over 50% and, in places like Darfur, under 30%. The combination of displacement, families in congested environments, poor sanitation, little water and little food, with disease outbreaks and not enough vaccination, is worrying.

**Mrs Latham:** Before I ask my question, can I say that the visitors cannot see or hear what is going on, because it is not on the television? That is unfair for people who have made the effort to come.

**Chair:** Absolutely. We will try to get that addressed. Thank you, Pauline.

Q7 **Mrs Latham:** Sibongani, Sudan already hosted 1.1 million refugees before the current conflict, many of them in refugee camps in the east of the country. What impact is the conflict having on the refugees in those camps?

**Sibongani Kayola:** Many of the refugees that Sudan was hosting had fled into Sudan as it offered a safe space. When the conflict started, these populations had to make a decision to either stay in Sudan or return to their home countries, where they would be unsafe and further threatened.

Now, the situation in the refugee camps, similar to the situation in the IDP sites, is deteriorating and the refugees face many of the same challenges that the internally displaced Sudanese people face. Khartoum, as an urban centre, was home to a large number of refugees, who were in Khartoum seeking economic opportunities and ways to support their families. With the destruction of Khartoum, many of those people have had to return to very fragile places.

We need to think of this conflict as a regional conflict. There is the displacement of Sudanese people from Sudan, but also of people who are already vulnerable back into situations of additional fragility in their own home countries. We anticipate regional destabilisation in the months to come.

Q8 **Chris Law:** Mary Louise, thank you for some of the evidence you have given already, particularly on the vaccination rates. What is the general state of the hospitals and other healthcare facilities across Sudan?

**Mary Louise Eagleton:** They are extremely fragile. In the areas of conflict, 70% of the hospitals are not functioning. Across the country, we estimate that about half of the 6,000 primary healthcare centres are operational, but healthcare workers have not been paid, for the most part, since the war broke out.

As Khalid mentioned, getting supplies to these healthcare centres in areas of conflict is very difficult. We are dealing with negotiating access



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for four to eight trucks at a time—painstaking negotiations—when we should be talking about 6,000 trucks to reach the level of need in these areas.

The healthcare system is very concerning. There are heroic efforts on behalf of the Ministry of Health and the state Ministries of Health, whose technocrats have been working in healthcare centres for free and around the clock, but the system hangs by a thread across the country, and especially in conflict areas.

**Q9** **Chris Law:** Have any of the healthcare facilities or hospitals been military targets? We will hear that they never are targets but, as we have seen elsewhere, they often become targets. Has it been similar in Sudan?

**Mary Louise Eagleton:** We have seen militarisation in hospitals and health centres. Medical supplies are appealing for armed groups. As part of the grave violations of children's rights, we track and monitor attacks on schools and hospitals. We have credible reports of attacks on and use of hospitals and health centres by armed groups in Sudan.

**Q10** **Dr Allin-Khan:** What percentage of the person power in your hospitals and healthcare facilities is made up of people from Sudan and what percentage is international aid workers? Is it possible to get workers from aid organisations into hospitals to work?

**Mary Louise Eagleton:** UNICEF works, specifically on health, with over 30 partners, international NGOs and national NGOs—70% of them are national NGOs—but the majority of the health workers across the country and in these primary healthcare centres and hospitals are Sudanese. The international community can bring additionality. Many international NGOs do outstanding work, including MSF, which brings in teams of doctors, but they are small in terms of the scale of the crisis and the need on the ground, so supporting those Sudanese heroes who have continued is fundamental.

**Q11** **Dr Allin-Khan:** Suffice it to say that the Sudanese staff, despite working, have their own family lives, difficulties and insecurities to deal with at the same time.

**Mary Louise Eagleton:** You have families who have fled. Our own staff, Mercy Corps staff, WFP staff—everyone—is in the same situation. Everyone fled their homes at the onset of the war. We all had our headquarters in Khartoum, the capital city. Everyone's homes have been looted. People have lost friends and family members either directly or indirectly from the stress and trauma of various evacuations.

In Port Sudan, for example, where we are right now, if you go to a gathering site for displaced people, you will meet teachers, doctors and healthcare workers. They volunteer at local centres to support children and families, all while trying to take care of their own children and their own fragmented families and the trauma they suffer.



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**Khalid Osman:** On the localisation aspect, WFP works with nearly 12 local NGOs. Most of the staff of WFP who are part and parcel of the implementation of the lifesaving activities are our national staff. Further to Mary Louise's comments, some of our staff have been IDPs themselves, not once but twice or three times, as the conflict hotspots shifted from one area to another. The latest is the situation in al-Jazirah.

**Sibongani Kayola:** I brought with me a quote from one of our team members who had to leave their home in Khartoum. This person says: "Despite the suffering and loss I have endured, I feel stronger than ever and I am more committed to my mission of supporting those in need." It is really important for us to honour the unwavering strength and resilience of the Sudanese people in this time.

Across the INGO community, we have had approximately 100 visas pending over the last month. Even when we do receive visas, it takes on average five to six weeks from the point of application before approval is given to proceed to an embassy to collect the visa. Given the numbers we have already spoken about, you can imagine the cost in lost lives during that five to six weeks.

**Chair:** Sadly, we hear similar things in other places in the world. I join you in paying tribute not only to all your staff and colleagues but to the Sudanese people. It is just appalling what is going on right now.

Q12 **Mr Sharma:** Khalid, we understand that there is a severe risk of famine across Sudan. Is that your understanding?

**Khalid Osman:** Absolutely. First, famine has not been officially declared in Sudan. The situation is dire, with millions facing acute food insecurity. WFP struggles to reach nine out of 10 people with emergency levels of hunger due to limited access to conflict hotspots. Anecdotal reports suggest people are dying of starvation in areas like Khartoum and Darfur, highlighting the urgency of unrestricted access for humanitarian actors like WFP, UNICEF and others to assess and address the severity of the food security situation. In the absence of access, this is absolutely an alarming situation for us because we are unable to reach the communities.

**Sibongani Kayola:** We have seen warnings from the Famine Early Warning Systems Network that certain parts of the country will have famine-like conditions in the months to come without an immediate cessation of hostilities and a scale-up of the response.

This conflict has severely impacted agricultural production in the country. The Food and Agriculture Organisation estimated that production of two staple crops, sorghum and millet, in the last agricultural year was 24% to 50% below average. Farmers have been hard hit because they can no longer afford seeds and it is difficult for them to access their land and to access finance. This has really put pressure on the food systems.



**Mary Louise Eagleton:** It is important to note that, as Sibongani said, the evidence shows that pockets of famine already exist in the country, but we do not wait for famine to be declared and all the data to be in place to prepare for it to happen. By the time the data comes out, children are already dying at a very high rate, hence the importance of being ready and preventing famine and taking those measures. As Khalid was talking about, access is critical.

We are very grateful for the UK and FCDO doubling their commitments at the Paris conference last week. So much more is needed if we are to prevent famine over the coming weeks and months.

**Sibongani Kayola:** I have an additional comment on preventing famine. Organisations that have been able to assess market functionality and the supply of food items in the market indicate that in many places there is some supply of key food and non-food items. However, the biggest constraint is that families cannot afford what is available in the market. The limiting factor is cash. Cash programming can provide a lifeline for those in places where the markets are functional, because cash allows them to access food in the markets. Cash is also fungible, so it can reach people in places where in-kind assistance cannot reach them as rapidly. It supports the functionality of local markets, ensuring that livelihoods are protected.

**Khalid Osman:** I just want to add that the humanitarian actors in Sudan have agreed on a famine prevention strategy focusing on 7 million people across 41 hotspot areas. These include areas that are inaccessible to us, where we are lobbying vigorously to gain access to those citizens to ensure that they receive the urgent humanitarian aid that they need.

Q13 **Mr Sharma:** Khalid, to what extent can the people across Sudan access safe drinking water?

**Khalid Osman:** Allow me to pass that to Mary Louise, if I may. Do you want to come in, Mary Louise?

**Mary Louise Eagleton:** Thank you. Even in the best of times, Sudan is very water scarce, and that has just been magnified with the onset of the war. We have evidence of water treatment plants coming under attack. As populations are displaced, they move to places with no access to drinking water and clean water. That is a big component of the disease outbreaks. We have had significant cases of cholera in many parts of the country. We estimate that 9 million people in dire need of clean drinking water have no access to it.

I was in a healthcare centre the other day and a girl was having an epileptic fit. I went to get her water. I said, "Can someone get a cup of water?" It took 10 minutes to find water. Eventually, I had to go to my car and get a bottle of water and bring it to the girl because there was no clean water in a health centre not too far from the urban area where we are now. That is just one indication but, across the country, the situation





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is very worrying, especially for populations that are displaced and not in host communities with existing systems.

**Sibongani Kayola:** I read an article yesterday that chronicled how a dialysis centre can no longer operate because it cannot access water for dialysis and cannot power the washing machines. They reported the number of people who had previously been receiving treatment at that facility and had died. It is a dire situation.

**Khalid Osman:** Picture this. Prior to the conflict, Darfur and the Kordofans faced severe water shortages. In fact, part of the intercommunal violence resulted from water, and the significant malnutrition and violence against women was due to the scarcity of water. With this conflict, further to what Mary Louise said, the situation is absolutely dire. Unfortunately, this is why we always say that the humanitarian community needs immediate and unimpeded access to ensure that we deliver the urgent and vital humanitarian assistance.

**Mary Louise Eagleton:** I don't want to give the impression that it is so hopeless that things can't be done. On water specifically, in 2023, even despite the war, UNICEF was able to reach 5.9 million people with clean drinking water. A big part of that is that a lot of the communities in Sudan in the major towns are along the Nile and have big water treatment plants, but they have come under attack. They have run out of chlorine and basic chemicals to keep running. We have been focused on keeping those big water treatment plants going and also on boreholes and solar systems. It is extraordinary how solar pumping systems have kept going through the war and are sustainable. There are these actions that we can take. We can reach people at scale with the will behind it and the access.

Q14 **Mr Sharma:** Mary, what impact is the conflict having on women and girls?

**Mary Louise Eagleton:** Unfortunately, like in so many conflicts, women and girls bear the highest brunt of the war. As I mentioned earlier, we monitor grave violations against children. A part of that is sexual violence. We have credible reports of over 5,000 grave violations, including significant reports of sexual violence in the country.

The burden, of course, as they flee is on girls and women as primary caregivers. We have a very high rate of maternal and infant mortality in this context. As Sibongani mentioned, one of the big flagships of supporting women and working on child survival and maternal mortality is contact for these women in pregnancy in healthcare centres, to keep them able to feed themselves when they are pregnant, and able to feed their young children.

Sexual violence is a very big concern, as are social and cultural norms and the taboos around them. In the early days of the conflict—we are now one year in—we are seeing babies born from sexual violence and





rape. Our team was in Khartoum several weeks ago, in one of the few remaining hospitals where we were providing support, and very sadly hearing about the children being born from rape, one year in, and those women sadly having to abandon their children because of the taboos around that. We are seeing a significant increase in unaccompanied children, abandoned children, and maternal and infant mortality in this context.

**Sibongani Kayola:** In many ways, this conflict has become a war on women. In addition to what Mary Louise has just said, the economic impact of this conflict has further marginalised women, stripping them of their livelihood opportunities and pushing many of them towards extreme measures and the risk of sexual exploitation as they try to support their families. We have deep concerns about reports of families already resorting to marrying off younger girls or women engaging in sex for money simply because they need to survive. The numbers we have are the tip of the iceberg because many incidents go unreported due to poor communication, lack of access to services and community stigma. In a context where sexual and gender-based violence has already destroyed so many lives, it will continue to spiral. We need to see a cessation of hostilities.

**Khalid Osman:** In addition to what my colleagues have stated, it is worth underlining that women and girls are far more food insecure today than ever. Prior to the conflict, especially in the marginalised communities of the Darfurs and the Kordofans, 70% of households were led by women. Today, unfortunately, due to the lack of security and protection, life is very difficult for them and their families. That said, in the communities that we target even now, the majority of households are led by women.

Q15 **Chair:** Calling it a “war on women” and the examples that you have given are pretty harrowing. I am thinking about the children who are born through sexual violence. You said that, because of the stigma, a lot of those children are given up. What happens to them?

**Mary Louise Eagleton:** Even before the war, there was a cultural taboo of having children out of wedlock. Often, children born out of wedlock are abandoned in the first few days of life.

One of the big things we work on with women’s networks and community groups is trying to change this taboo, along with other social and cultural norms, such as FGM and child marriage, which Sibongani also mentioned. One of the things is to prevent abandonment right from the start by supporting pregnant women to have a safe space to give birth and encouraging bonding with the child very early on, in the first few weeks of life, with some support, and then support on livelihood and a safe place to be in those first months of life, which are so important.

On the prevention of abandonment, we were working before the war on the justice system and complex elements around how adoption works and



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the laws to support children. Now, with the war, all those efforts around changing legislation have paused. We are really just firefighting to keep these children from being abandoned and to find foster care and families for them to go to.

You may have heard about Mygoma, a big orphanage in Khartoum, where over 360 infants had been abandoned early in life before the war. These small children were almost all under the age of two. Sixty died in the first four weeks following the onset of the war because some of the carers had to flee, the supplies were not getting in, there were not enough carers and there were disease outbreaks in the centre. UNICEF and ICRC worked to evacuate the remaining 300 babies and infants from that orphanage in the middle of the fighting. Some of them were very fragile and on the brink of death. We brought them outside of Khartoum to a safer place. We have been in the process of getting those children into foster care and into families since then. Sadly, the place we took them to was also overrun by fighting in December and we had to evacuate them a second time to another safer location, where we have been continuously working to get them to families.

It is hard to play catch-up because, just as you get children into foster care, more children—for example, those born from rape—get dropped off at these institutions. It is really about deinstitutionalising this and getting children into families. The number of Sudanese families who are very stretched themselves but have raised their hand to take in children and adopt, including among our own staff and across society, is really quite inspiring.

**Chair:** I have never understood why it is seen as somewhat acceptable for some men in conflict to think that they can rape women. What you have told us about the rape itself, the massive stigmatisation that the woman will face when pregnant, and what inevitably happens to the child, is just pure evil.

**Q16 David Mundell:** Thank you, Mary Louise, for what you have just told us. It gives tremendous insight into the awfulness of the situation for those children. Will you tell us about the impact of the conflict on children's day-to-day lives more generally? We have heard about the malnutrition issues.

**Mary Louise Eagleton:** Generally, this war has produced so much trauma and so many scars for children who have witnessed violence, have been violated themselves, have lost everything, or have seen their friends or family members killed in this process. There is a lot of lasting trauma, and lasting scars, one year on. With 4.6 million children having fled their homes, that is a country-wide trauma for children who have endured so much loss, in addition to all the health issues and the loss of life as a result.

That said, children are extraordinarily resilient. Getting them into safe spaces and into school is critical so that they can have normalcy in their



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lives and just be children. It is a drop in the ocean, but we have got almost 1 million into these child-friendly safe spaces, which we call Makanna, which means “our place”. They have access to structured learning, psychosocial support and WASH facilities. Just getting them into those safe spaces, we can see the healing happening.

One of the activities we do with the children is art and drawing. In the early days after fleeing, all the art was about soldiers and dead bodies—grim pictures of what they had been experiencing. Just a few months on, in these centres where they can play and be children, it is rare to see those kinds of images. We see more and more flowers, rainbows, hearts and happiness in these places. That safe, secure, psychosocial support, and getting schools to reopen, is such a fundamental piece.

The point about its being a drop in the ocean is important. We have 900,000 children in these centres, but, as I said, 18 million children are not in school. The only way to reach them at scale is for schools to reopen. We are advocating at all levels for schools to reopen wherever it is safe for them to do so. FCDO, with many Governments in the Global Partnership for Education, also supports the reopening of those schools and getting children back into school if they can open their doors.

**Q17 David Mundell:** Is there more the FCDO could do, or something it could do better, to help facilitate what you have just set out in relation to either schools or safe places?

**Mary Louise Eagleton:** I want to thank the FCDO for raising that education cannot be forgotten in the midst of war and the middle of an emergency. Often, it is the last thing people think of. They think that lifesaving means thinking about health, nutrition and food, but that security and that environment for children is so important. FCDO has been very vocal and engaged in getting that message out. Of course, more support is always needed. I urge that education not be forgotten in this crisis. FCDO has been very vocal about that, which is much appreciated.

**Khalid Osman:** I want to add a positive note. We have started this year our homegrown school feeding activities, encouraging girls back to school and providing income opportunities for women. Also, as part of the resilience project, we have started targeting mainly women-headed households in eastern Sudan to provide livelihood opportunities. In addition, in the next few months we plan to reach 1.3 million children, mothers, and pregnant and breastfeeding women with nutritious food. There is activity, but to really scale up and respond to the needs, we need much greater access to a number of other areas, and continuously.

**Sibongani Kayola:** Ultimately, an end to the violence is the best way to protect women and girls, prevent famine and get children back into school. What we need to see from the UK Government is a step up in diplomatic efforts to secure peace and ensure that any peace processes



that are brokered are inclusive of Sudanese civilian voices and civil society.

Q18 **Nigel Mills:** Sibongani, could you talk us through how easy it is to provide aid on the ground? Is it straightforward or are lots of barriers and obstacles placed in your way?

**Sibongani Kayola:** It has been very difficult over the last year to provide aid in many parts of Sudan for many reasons. First and foremost, I would like to honour the unwavering strength of our Sudanese colleagues on the ground, who continue to work through some very difficult circumstances.

As humanitarian responders, we are doing everything possible to contain the crisis by supporting people but, despite assurances from the authorities and from the parties to the conflict, we continue to see impediments to the delivery of lifesaving assistance. These impediments include arbitrary denials, with no clear justification, of access and permission to move from one part of the country to another. As I said earlier, the INGO community has over 100 visas pending, with no real justification, for us to send in surge staff to scale up our capacity. We have an example of trying to move cross-line from al-Fashir in North Darfur to other areas of Darfur and permission was denied. The insecurity is one thing that makes it difficult for us to work, and at the same time, there are so many bureaucratic hurdles imposed by the parties to the conflict, which mean that we are not able to reach people in a timely manner.

Despite all these challenges, we continue to push the authorities so that we can access people in need. As Khalid has said so many times, we need an increased commitment to facilitate access by the parties to the conflict, but we also need the international community to put additional pressure on the authorities and the parties to the conflict for humanitarian access.

**Mary Louise Eagleton:** To try to drill down on access, as I mentioned up front, we have a three-pronged approach: we look at the conflict hotspots, and the areas where we have greater access and greater movement. We have six offices open and functioning across states in the north, east and south, and I travel often across the country.

What is difficult is, as Sibongani was mentioning, cross-line travel—travel from a place where one armed group is in control to another—and cross-border travel. The largest border, and the most important right now, is between Chad and west Sudan—Darfur—where over 5 million children are at very high risk of malnutrition and death with the looming famine. All aid groups have had significant pipelines of lifesaving supplies coming through the border with Chad, but two months ago we were requested to stop that. We have no authorisation to do those cross-border movements from Chad, which is highly problematic. All efforts to unlock that Chad-Sudan cross-border humanitarian lifeline are fundamental, as well as



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significantly unlocking the cross-line within Sudan that goes east to west to get those critical supplies in.

**Khalid Osman:** Allow me to unpack the point about access. When we talk about access as humanitarians, we are talking about the movement of personnel and goods. It is worth mentioning that the treatment is different between UN agencies and INGOs. We have to do a better job as the humanitarian actors, but more importantly the international community, to ensure that the UN agencies and their partner INGOs are treated in the same way when it comes to visas and travel.

The hotspot areas with access impediments are largely in the Darfurs and Kordofans. Indeed, the closure of the Adré access that we had, which Mary Louise alluded to, is a serious problem. That closure basically prevented the humanitarian—*[Inaudible.]*—of people. The Sudanese Government have closed that border but opened a separate cross-border from Tine in Chad, which makes it much harder for assistance to reach especially the west of Darfur.

Then there is the cross-line issue. In the areas outside of the SAF's control, it is difficult for trucks to gain easy access because they face road blockages and oftentimes the drivers are requested to pay money to be given access.

Q19 **Nigel Mills:** What could the international community do? Is putting on pressure to reopen the Chad border the most effective thing we could do?

**Sibongani Kayola:** The UK and the international community need to commit to elevating and escalating diplomatic pressure to ensure that humanitarians are able to access all parts of the country regardless of territorial control and that humanitarians are allowed to use all feasible entry points into Sudan, not just through Chad, ensuring that we can reach many more people. Sudan is a large country and the Darfur crossing points are not sufficient.

Q20 **Nigel Mills:** Is it the Sudanese Government that is being difficult here or are the neighbouring ones being obstructive as well?

**Mary Louise Eagleton:** I think Sibongani's point is that all access points are essential. In that concerted effort to get the parties to the table, the parties had agreed to convene a humanitarian forum to monitor these access issues and to make sure that humanitarian corridors were opened for aid. That has not convened. So it is about getting the parties to the table to convene that humanitarian forum, to monitor the access and to guarantee that access on all sides. There is the Chad cross-border, and the southern and northern east-to-west access lines. It is both parties plus other armed groups in some of these communities that create the environment of insecurity where trucks and people cannot access.

Q21 **Chair:** Mary Louise, have any humanitarian corridors been negotiated internally in Sudan?



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**Mary Louise Eagleton:** Until November, we had fairly good access east to west in Sudan across the southern states to get to Darfur and the Kordofans. It is never easy. As I said, we painstakingly negotiate every single movement of every truck and every person that crosses, and the time that it takes delays aid, but we have been able to get those negotiations done, get the permits in place and move supplies.

With the escalating conflict and the greater politicisation of aid on both sides, those movements from east to west have been stuck, so that has slowed down. Access is getting worse, not better, in this context. Those few corridors that we had working have been very fragmented and mostly paused over the last few months. That is why now is such a critical moment.

**Khalid Osman:** In terms of negotiations and ongoing efforts, it is worth highlighting that we have the RC/HC for Sudan, who is one of the key champions—*[Inaudible.]*—discussing the issue of access, in particular the—*[Inaudible.]*. As a result, even though the Government closed the Adré cross-border, the Government agreed to open a separate cross-border about two hours from Adré. The Tine Chad cross-border is what we call it.

Another point worth highlighting is that in addition to Chad cross-border, WFP moves food from South Sudan into Sudan, in particular reaching the communities in the two areas. Further down, the SPLM-North also facilitates WFP trucks further into Government-controlled—*[Inaudible.]*—in the Kordofans.

Q22 **Chair:** Khalid, we are losing your signal quite a bit. I wonder if you could you turn your camera off and we will see if that works.

You said earlier that there was a difference in the response to the UN agencies and to the NGOs when it comes to protections and access. Could you tell us a little bit more about that difference and why that is?

**Khalid Osman:** When we talk about access, we are talking about the movement of personnel and goods. The INGOs are subjected to different rules and protocols when it comes to gaining visa approvals, permissions and so on. The INGOs are the partners of the UN agencies. The WFP and other agencies continue to advocate—this is where the FCDO should offer support—for the INGOs to be given the same treatment. That means facilitating their visas and making it easier for them and their staff to reach the populations—*[Inaudible.]*—travel permissions and so on.

**Sibongani Kayola:** The different treatment of INGOs and UN agencies is primarily because of the legal and regulatory frameworks. The UN agencies operate in a different category from INGOs. The operation of INGOs in Sudan is managed through the general directory of procedures for international non-governmental organisations and the UN is exempt from those procedures. So there is a regulatory framework that created that distinction in the past.





Q23 **Chair:** Could you give us an example? How does Mercy Corps feel that difference?

**Sibongani Kayola:** I can give a primary example in terms of registration and permission to exist in Sudan at the moment. As an INGO, Mercy Corps has to renew its registration annually, which is not the case for UN agencies because they have diplomatic agreements with the Government of Sudan and therefore exist in the country legally on a different framework than we do.

Q24 **Dr Allin-Khan:** Mary Louise, what impact has the conflict had on your staff and those of other aid organisations? Are aid workers being targeted in this conflict?

**Mary Louise Eagleton:** Thank you for the question. I will highlight, as others have, the heroic efforts of aid workers across the board, from the UN, international NGOs and local NGOs to civil society and mutual aid workers, as we see with the emergency response rooms—individuals and families who are helping each other.

The large majority of the 4.5 million children who have fled are being hosted by Sudanese families; they are not in gathering sites. It is a smaller percentage of those who are in camps and informal sites. It is Sudanese society that is helping the most.

That said, as I mentioned, the impact on all our staff is the same as the impact on the people of Sudan. Colleagues have lost so much. We have colleagues who have lost children in childbirth from the stress of what they have experienced. We have colleagues who have lost elderly parents from heart attacks as they were evacuating or because they could not access adequate care where they were going.

We have a lot of extraordinary female colleagues who initially fled across borders with their small children and their spouses, or by themselves, who have left their children with family members or husbands and returned to Sudan to keep working. They all very much miss their children, but as my colleague Hiba Ali said the other day when we were commemorating, quite emotionally, the one-year anniversary of the start of this war, "It's not a job; it's a purpose." Everyone felt drawn to staying and delivering, and to coming back and continuing to deliver in Sudan. As you said, it is heartbreaking and requires all efforts from across the board.

**Dr Allin-Khan:** Thank you so much to you all for the work you do. It can feel incredibly lonely to be you and you have so many people to support, to hold up and to be there for. We all know that this must take a significant toll on your physical and mental health. Please know that we see you and that, all the way over here, we are so grateful for all that you do. We really appreciate how much you have devoted your lives to doing.





**Mary Louise Eagleton:** Thank you so much. Our colleague Abdelgadir Yousif said the other day that it was great to see some attention on Sudan on the anniversary of the war on 15 April, but the problem is that every day is 15 April. The needs are there and the tragedy is there daily and it cannot just be something that is remembered from time to time. We really appreciate the Select Committee's efforts to bring attention to this crisis.

Q25 **Chris Law:** Sibongani, we have heard about serious breaches of international law being committed. How should the international community respond?

**Sibongani Kayola:** We need to see continued pressure on the parties to the conflict to respect international humanitarian law and the human rights of the Sudanese people. We have seen to date that the parties to the conflict are comfortable to continue perpetuating these violations. We see blatant disregard for international humanitarian law. Even in cases where there has been agreement to protect facilities used by humanitarians, we have not seen those protections given to humanitarian facilities. We need to continue to see diplomatic pressure on the parties to the conflict to respect international humanitarian law. Also, the UK and friends of Sudan need to monitor and systematically denounce the violations of international humanitarian law.

Q26 **Chris Law:** We often hear that sanctions are not very effective. I assume you will say that that is the case at the moment, given those continuing breaches. Specifically, have sanctions announced by the UK and other countries have any effect on deterring atrocities or have they just been completely ignored?

**Sibongani Kayola:** As a humanitarian worker, I am not best placed to answer that question, and the sanctions were announced pretty recently, so it is difficult to say whether they are effective yet. We are grateful that the sanctions included an exemption for humanitarian organisations; activities necessary for the delivery of humanitarian assistance are exempted. We continue to encourage the UK Government to monitor closely and ensure a dialogue with organisations working in Sudan to ensure that the sanctions do not adversely affect the capacity of humanitarian organisations to deliver assistance.

**Chris Law:** Mary Louise and Khalid, do you have anything you would like to say on this?

**Mary Louise Eagleton:** Sibongani put it really well. The evidence from similar crises around the world has shown that the most effective sanctions are those against individuals rather than companies, shell companies and groups. That is where the needle can be pushed a little further. Targeted sanctions on individuals have historically proven to be more effective.



**Khalid Osman:** Political solutions are imperative to resolving the crisis. The UK's commitment to promoting accountability and protecting civilians in conflict-affected areas is greatly appreciated, but we need additional diplomatic efforts to ensure that all parties uphold international humanitarian law, facilitate humanitarian—[Inaudible.]—space for aid agencies to operate effectively. [Inaudible.]

**Chair:** Khalid, we lost you a little bit there. We might need to ask you to turn your camera off. Thank you.

**Khalid Osman:** Lastly, I was saying that diplomatic—[Inaudible.]—humanitarian law, facilitate humanitarian access and create space for aid agencies to operate effectively.

Q27 **Nigel Mills:** The conflict in Sudan has been called the “forgotten conflict”. Why do you think the crisis has not had the attention it should have had from the international community? Is it just that there is too much else happening in the world, or is there some other reason why we have not focused on this?

**Mary Louise Eagleton:** There are many reasons, one of which you have mentioned: there is a lot going on. There are a few things related to that and compounding it. Because of the telecoms in the country and blackouts, getting information out of Sudan and reaching people in Sudan has been very difficult. The telecoms thing has impacted communities across the board. The capacity of families to access support from their families overseas in the diaspora or across the country without access to the cell phone network has been a significant issue for communities. Telecoms access is an important point of advocacy to push on. One of the three companies has almost folded now, but ensuring that the two remaining ones are able to maintain operations is fundamental and lifesaving.

Also, international journalists and media initially struggled to get visas into the country. I understand that some of those visas have been forthcoming and so there is a little bit more movement of international media into Sudan, but much more is needed to show the reality on the ground and the suffering of Sudanese children and women, and all of society.

**Sibongani Kayola:** There is also a denial that what we see in Sudan is not just about Sudan; it affects the entire region from the Red Sea to the Sahel. If the situation is not contained, we might see a destabilisation into other countries. South Sudan and Chad have elections in the next few months. Also, as populations continue to move outside of Sudan, they place strain on already constrained countries, which will further destabilise the region. The sooner we spread the message that this is a regional crisis and not just about Sudan, we can possibly get more attention, but we need to drive home that message and bring more attention to the region as a whole and to how what is happening in Sudan can further destabilise the region.



Q28 **Nigel Mills:** How do you assess the response of the UK Government? Have we done everything we could have done or is there more we should be doing?

**Sibongani Kayola:** The UK Government have been very supportive since the start of this process. We have seen dedicated funding for Sudan, which has been doubled in the last year to £89 million. The UK has also clearly articulated the priorities. However, despite the good work being done, there is always room for improvement. As they say, the only room that is never full is the room for improvement. The UK Government can do additional work around scaling up diplomatic and humanitarian efforts to support actors on the ground, by advocating for access, using the UK as the penholder on Sudan, advocating for monitoring of violations of international humanitarian law, and continuing to support a peaceful and sustainable political solution to the conflict. Mary Louise also had her hand up so I will hand over to her.

**Mary Louise Eagleton:** You said it perfectly, Sibongani. We need a concerted, co-ordinated effort to get the two parties to the table in negotiations. We hear that Jeddah is reopening in the next few weeks, but that effort needs all hands on deck. The UK is a key actor in that and in the Security Council. The humanitarian corridors are urgent and critical, and we need to get the parties to the table to stop the war.

**Nigel Mills:** Khalid, do you have any observations?

**Khalid Osman:** No further comments from my side. It was well said by both Sibongani and Mary Louise.

Q29 **Nigel Mills:** Mary, was the UK right to have held discussions with the Rapid Support Forces or was that a mistake?

**Mary Louise Eagleton:** As UNICEF, we speak to all parties to ensure that we can get aid to children. It is so important to talk about violations and to talk to the parties in conflict to ensure that international humanitarian law is being respected and the populations are being protected. In that sense, it is important to speak to all sides to get a solution to this war. It is not possible to reach communities, to reach children, to get aid in and to get a solution without speaking to all parties in the conflict.

Q30 **Nigel Mills:** Finally, which country is most influential with the various parties? Who do you think is best placed to move this forward?

**Mary Louise Eagleton:** Certainly, the neighbouring countries, the regional actors and then, at the wider level, the Security Council are very important. There are alliances and support coming from different countries to different groups, and those are known.

Q31 **Chair:** Sibongani, at the beginning you told us about the extent of the internally and externally displaced people. I will direct this question to Khalid. Do neighbouring countries receiving refugees have the capacity



and resources to host them?

**Khalid Osman:** The largest groups of Sudanese refugees to date—*[Inaudible.]*—Chad and then South Sudan. I can tell you that the demand—*[Inaudible.]*—than the ability of the World Food Programme to meet the needs of these refugees. More support is definitely urgently needed. As you will recall, his excellency the Deputy Foreign Secretary, Andrew Mitchell, recently visited Adré, where WFP is providing—*[Inaudible.]* The situation there is completely devastating. We are hoping that the FCDO and other partners will step up support for the collective WFP for colleagues to ensure they have the funding necessary to meet the needs of these refugees.

Q32 **Chair:** Are you seeing any co-ordination of all the countries impacted, or are they each being dealt with individually by donors?

**Khalid Osman:** There are absolutely co-ordinated discussions in place. In fact, recently the regional director of WFP overseeing these three countries was in London to brief FCDO colleagues. The co-ordination is ongoing and we hope and pray that more support will come their way. Thank you.

Q33 **Chair:** Sibongani, what impact is the conflict having on the stability of those neighbouring countries?

**Sibongani Kayola:** When we look at the numbers displaced across the region, we see extremely high numbers going into South Sudan and Chad, as Khalid already said. It is important to note that, on 15 February 2024 the Government of Chad announced a food security emergency situation. Also, independently of the refugees who have returned from Sudan into South Sudan and the Sudanese refugees now entering South Sudan, South Sudan on its own had 7 million people facing severe food insecurity. The situation is very difficult in those countries. We need to see a co-ordinated effort to fund the countries that are hosting these refugees appropriately. The funding we need to see is for Sudan but also for the neighbouring countries that are hosting these large populations.

Q34 **David Mundell:** Mary Louise, you referenced the Paris conference and the UK's increased contribution. Did the conference overall raise sufficient funds to meet Sudan's humanitarian needs?

**Mary Louise Eagleton:** No, it didn't. Pledges amounted to about \$2 billion, which is less than half the need just within Sudan, but those pledges were for Sudan and for neighbouring countries. We have not done all the math on all the pledges, but we estimate that that might reach one third, if that, of the critical need of the populations within Sudan.

**Sibongani Kayola:** That \$2.1 billion represents only 20 cents per day for each person facing urgent needs in Sudan and in neighbouring countries. While we welcome the announcement of these funds, which will help us



to scale up, we need much more to fill the envelope needed for Sudan and neighbouring countries.

**Khalid Osman:** The underfunding problem, in addition to the access problem—*[Inaudible.]*—here in Sudan. The overall needs are rising by the day and, as colleagues mentioned, more and more support is needed to prevent famine-like situations in Sudan.

Q35 **Chair:** Khalid, I take your point that full funding and humanitarian access points are crucial, but it seems to me that unless the conflict stops, all this is somewhat pointless. Can any of you comment on what more the international community could be doing to bring this conflict to an end, or is that out of your remit?

**Sibongani Kayola:** What we need to see from the international community is continued commitment to supporting a peaceful, inclusive and sustainable resolution to the conflict. This process must meaningfully—that is the key word—include women, youth and civil society voices. Specifically, we ask the UK Government to continue to utilise their position as penholder on Sudan at the UN Security Council to increase the international spotlight on the atrocities in Sudan and to pressure the concerned parties to end the fighting.

**Chair:** Beautifully put. Thank you very much. I really appreciate the time that all of you have taken today. It is horrifying to hear what you, your colleagues and the people of Sudan are going through as a consequence of this conflict. That was a powerful way to end, with Sibongani's comment about the need for a peaceful and inclusive resolution to conflict that meaningfully engages particularly women and young people. Thank you for sharing your thoughts. We will do all that we can to amplify what you have told us. I appreciate your time and, please, send my solidarity to your colleagues.