

# **Foreword**

The year 2017 marked the end of IOM Sudan's 2015-2017 Strategic Framework. The framework served as a basis to engage both Government and Member States to respond to the migration context in Sudan, by aligning programming, and focusing organizational capacity and resources through three main objectives;

- i. Effective Humanitarian Response to address mobility dimensions of crises in Sudan to assist and protect vulnerable mobile populations
- ii. Early Recovery and Transiton on to accelerate recovery, transition and socioeconomic development to help end forced displacement
- iii. Migration Management and Development by establishing an orderly, safe and responsible migration management system to benefit Sudan's development.

In 2017, under the rs t objecve, IOM connued to e ecv ely provide humanitarian assistance in response to internal displacements and the inux of South Sudanese refugees, where by the end of 2017, 195,599 South Sudanese had crossed the border into Sudan.

The newly gained access to the areas of East Jebel Marra, Darfur, enabled IOM to be the rs t internaonal agency on the ground since 2010 providing assistance to conflict affected populations. In 2017, Sudan also witnessed the return of Sudanese migrants fleeing conflicts in neighbouring countries such as the Central African Republic, Chad and Libya, and the influx of South Sudanese refugees. The IOM Displacement & Tracking Matrix (DTM); a biometric registration system to improve service provision and track mobility trends, continued to play a crucial role in assessing the critical needs of affected populations in newly accessible areas and in places of return, informing and guiding tailored humanitarian responses specifically in the areas of Health, WASH, NFI and Shelter.

Through its Transition and Recovery unit, IOM utilized an early recovery and transition approach to achieve durable solutions for migrants in Sudan. The unit, together with government counterparts, national non-governmental organisations (NGOs), civil society and private sector, worked on addressing basic infrastructure and service needs and delivered livelihood activities to build resilience and social economic development. Targeted interventions supported the promotion of social cohesion to reduce conflict and facilitate cross-border movement and sustainable reintegration for vulnerable migrants including internally displaced persons (IDPs), returnees, refugees as well as host communities in the states of South Darfur, East Darfur, North Darfur, Central Darfur, West Darfur, Abeyi, Kassala, Gedaref and Red Sea.

IOM's Migration Management and Development unit continued to support the process of developing an orderly, safe and a responsible migration system in Sudan. A series of capacity building initiatives, including training activities and technical assistance on multiple areas ranging from document inspection to e-managed systems were conducted with the Ministry of Interior to enhance Sudan's border management capabilities IOM also worked with the criminal jkustice system to develop a Sudan specific curriculum on investigating and prosecuting human trafficking cases, including protection to victims and witnesses of trafficking IOM supported the National Committee for Combating Human Trafficking (NCCT) to develop its first National Action Plan, which was launched in November 2017.

Additionall, protection to vulnerable and migrants was provided through the IOM's Migrant Resource and Response Center (MRRC) in Khartoum. A total of 4,933 migrants were provided with assistance by the MRRC and its mobile response team. A total of 376 migrants were assisted with voluntary return to their countries of origin.

The resettlement of a total of 3,471 refugees to third countries were facilitated in 2017, through medical assessments, logistical arrangements, and cultural orientation in preparation for their new lives and integration in a different socioeconomic context.

IOM also continued to manage the Rapid Response Fund (RRF) on behalf of USAID/OFDA to support international and national non-government organisations to swiftly implement specific emergency interventions. Most notably this year was the response to a country-wide outbreak of acute watery diarrhoea (AWD) through integrated health and WASH interventions.

IOM would like to extend its immense gra tude to the Government of Sudan, donors and other partners without whom these triumphs in migra on governance would not have been possible. We look forward to your con nuous support to the IOM programming in Sudan.

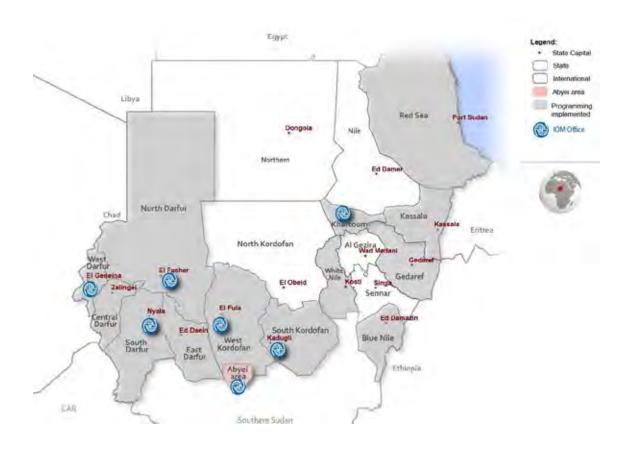
# **IOM** in Sudan

IOM is committed to the principle that humane and orderly migration benefits migrants and society. IOM works with its partners in the international community to assist in meeting the growing operational challenges of migration, advance understanding of migration issues, encourage social and economic development through migration, and uphold the human rights and well-being of migrants.

In Sudan, IOM implements a spectrum of programs, including movement and resettlement; emergency preparedness and response; post-crisis transition and recovery; migration health; counter-trafficking and migrant assistance, including return and reintegration assistance for stranded migrants; immigration and border management; and migration policy and research. These are implemented with support from the Government of Sudan, at Federal and State levels, NGOs, civil society groups and international organizations. IOM is also continuing work to deepen our partnerships with other UN agencies working in Sudan through multi-partner projects and in-country coordination mechanisms, co-leading the Return, Recovery and Reintegration (RRR) sector and working with other UN agencies on the United Nations Development Assistance Framework (UNDAF). IOM also co-chairs the newly established Counter Trafficking and Mixed Migration Working Group.

IOM is working to support the Government of Sudan in developing an integrated migration policy through engagement with a variety of international forums and mechanisms including the Global Compact on Migration (GCM) and is implementing community based programmes with a focus on Migration Development, to meet the objectives of the 2030 Sustainable Development Goals (SDG), in particular its indicator 10.7.

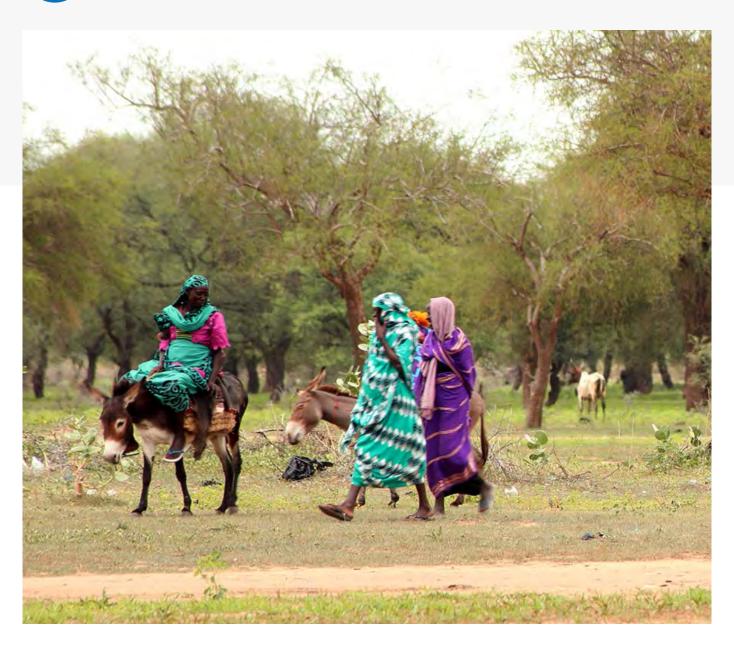
As Sudan is a source, transit, and destination country for migration, IOM provides services that cover the spectrum of assistance for human mobility with a wide variety of projects and programmes delivered through four strategic areas: Preparedness and Emergency Response, Transition and Recovery, Migration Management and Development, and Movement Management.



<sup>1</sup> SDG 2030 Goal number 10: Reduced Inequalities. Indicator 10.7: Facilitate orderly, safe, regular and responsible migration and mobility of people, including through the implementation of planned and well-managed migration policies

# **Humanitarian Summary**





The Displacement Tracking Matrix (DTM) is IOM's primary suite of tools used to track and monitor displacement and population mobility. The DTM provides humanitarian and development partners in Sudan with essential, accurate, and up to date information on displaced and affected populations: including demographic data, information on vulnerability, and mobility trends. The information shared by DTM helps humanitarian actors to identify areas of intervention and better understand the critical needs of the affected populations, so that they may deliver targeted, timely and vital assistance to these vulnerable people. Biometric data collection is also being used for both new and protracted displacements to establish updated beneficiary lists with increased accuracy. DTM activities are implemented in coordination with the Sudan Humanitarian Aid Commission (HAC) and partnership with the Humanitarian Country Team (HCT), at both Khartoum and state levels.

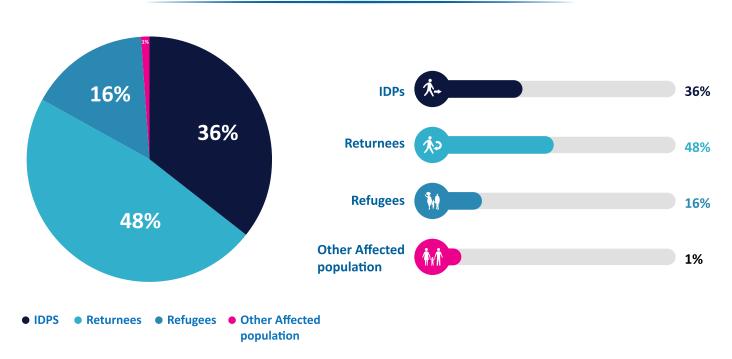
Throughout 2017, IOM DTM team shared, in addition to information, updates and reports upon requests from partners, monthly updates on DTM activities and outcomes. These monthly updates are shared through the DTM mailing list which includes donors, humanitarian and development partners that depend on DTM data for planning their humanitarian response. Due to the high value of the DTM information, The IOM Chief of Mission and the Humanitarian coordinator/ Resident Coordinator (RC/HC) agreed to established a DTM working group that includes DTM beneficiaries (donors, NGOs, UN agencies etc). The DTM working group meets on monthly bases so IOM can brief the partners on the IOM activities and

achievements andkeep them up to date on the DTM planned or completed activities. The IOM DTM team gave several presentations on DTM to different partners to increase knowledge and understanding of DTM, its components, methodologies and the resulting data as well as to receive their feedback on how the DTM can

increase its contribution to their interventions. These presentations were delivered during different forums and dif-ferent groups of partners, such as OFDA, the Emergency Shelter and Non Food Items (ES/NFI) sector's monthly coordination meeting, and in the Information Management Working Group (IMWG Sudan).

All DTM activities were conducted with full coordination and jointly implemented with the Humanitarian Aid Commission (HAC) as well as following requests form HAC and/or partners.

# **DTM Registration 2017**



During 2017, IOM conducted over 83 DTM missions to more than 150 sites within 37 localities in the five states of Darfur and South and West Kordofan States; where a total of 472,022 individuals were registered and/or verified, including IDPs, returnees, South Sudanese refugees and other affected populations. 38,300 individuals among the registered caseload were identified as being in need of special assistance (most vulnerable individuals). The most vulnerable individuals identified included pregnant and lactating women, unaccompanied minors and elders, single parents, people with physical and mental disability and those with chronic illnesses.

**IDPs:** During 2017 a total of 178,392 IDPs were registered via DTM in Sudan. A majority of these IDPs were displaced in 2016, but due to the restrictions on access to certain areas they could not be registered then. At

44%, the IDPs registered in Central Darfur represent the biggest cohort registered in 2017, followed by the IDPs registered in West Kordofan at 30%. The areas covered in these registrations had previously been inaccessible to DTM, and had only become accessible in 2017. The remaining quarter of the total IDPs registered in 2017 were spread between North Darfur (21%), South Kordofan (2%), South Darfur (1%), and West Darfur (1%).

55% of the registered IDPs were females, of which 56% were below the age of 18 (representing 30% of all IDPs registered). 41% of the female cohort was between the ages of 18 and 59 years old (representing 22% of all IDPs registered), whereas 30% of the IDPs registered were male below the age of 18 years (representing 67% of all male IDPs registered). Only 4% of the IDPs registered



were above the age of 60 years, whereas a combined 61% of the IDPs registered were below the age of 18 years. During IDP registrations a total of 13,404 IDPs were identified as vulnerable and/or as people with special needs. Pregnant women and lactating mothers together represented 83% of the vulnerable IDPs with regards to their and their infants' health and nutrition needs.

Returnees: During 2017 a total of 211,279 returnees were registered by DTM in Sudan. This included 10,091 Sudanese refugees returning from Chad who were registered in North Darfur (3,489 individuals) and West Darfur (6,602 individuals). The rest of the returnee cohort registered represents IDP returnees, with 69.6% of the returnees registered in Central Darfur (147,143 individuals) in the areas of Jabel Marra who have now returnedto their place of habitual residence, but had previously not been registered as IDPs due to these localities being inaccessible. Rest of the 25.6% of returnees were registered in North Darfur (24,253 individuals), South Darfur (19,077 individuals), South Kordofan (9,008 individuals) and West Darfur (1,707 individuals).

**Refugees:** During 2017 DTM registered a total of 78,500 South Sudanese refugees in the states of South Kordofan (24,184 individuals) and West Kordofan (54,316

individuals). These refugees were registered by DTM for the purposes of facilitating the provision of humanitarian assistance, and focused only on the areas where at the time of these DTM registrations the refugee registration by COR / UNHCR was not being implemented. All of the refugees registered by DTM in South Kordofan represented the new arrivals during 2017, whereas the registered caseload in West Kordofan represents both the new arrivals of South Sudanese refugees as well as those who had arrived before the 2013 South Sudan conflict started.

**Fire affected population:** In response to a fire that broke out at Korma IDP gathering site in El Fasher locality, North Darfur on 9th June 2017, IOM DTM teams registered 3,851 individuals as affected via door to door assessments. IOM and the ES/NFI sector provided assistance to all affected families.

In addition to the registration and verification of vulnerable populations, the DTM team, with full coordination with partners, is planning to conduct, on behalf of the humanitarian and development partners, a profiling exercise in Abo Shouk camp. The exercise is planned to take place during the first quarter of 2018.





IOM's Emergency Shelter and Non-Food Items (ES/NFIs) assistance continued to provide life-saving support to 109,464 vulnerable, crisis and disaster affected people across Darfur states and South Kordofan state between January and December 2017. The ES/NFI response is directly linked to the Displacement Tracking Matrix (DTM), which supports the assessments of households' needs, verification of affected populations and generation of beneficiary lists. The DTM process ensures that ES/NFIs assistance reaches the most vulnerable beneficiaries.

To ensure adequate planned response in the delivery of ES/NFI assistance, IOM coordinates with the Humanitarian Aid Commission (HAC) and the ES/NFI sector and partners in Sudan. Assistance is delivered jointly and in partnership with HAC and NGO partners based in each locality, after coordination has occurred at the sector level. During 2017, a total of 109,464 individuals, including IDPs, returnees, refugees and vulnerable disaster affected populations in Darfur states

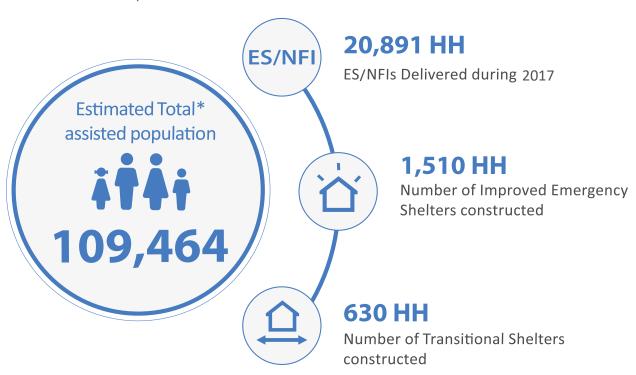
and South Kordofan received assistance through the provision of ES/NFIs, Improved Emergency Shelters (IES) and Transitional Shelters. Of the assisted beneficiaries, 20,891 house-holds were reached with the provision of life-saving ES/NFI assistance: 1,510 households were provided with en-hanced protection through the construction of Improved Emergency Shelters (IES), 18,751 households were as-sisted with NFIs and 630 households were provided with Permanent Transitional Shelters. IOM undertook 175 ES/NFI missions which included needs assessment visits, distribution missions and Post Distribution Monitoring (PDM).

In Central Darfur, 2,500 households (12,319 individuals) were assisted with NFIs; 7,144 households comprising of 38,702 individuals were assisted with ES/NFIs (235 households of 1,709 individuals reached with emergency shelters and 6,909 households of 36,993 individuals reached with NFIs assistance) in North Darfur; 3,676 households (17,363 individuals) were reached with NFIs

assistance in South Darfur; 1,275 households (6,902 individuals) were reached with emergency shelters assistance, and 3,510 households (20,215 individuals) were reached with NFIs assistance in South Kordofan state. Furthermore, 2,146 households (10,803 individuals) were reached with NFIs, in addition to the 630 households (3,150 individuals) that were assisted with permanent transitional shelters provided through two pilot projects funded by Canada and DFID (230 shelters and 400 shelters respectively), in West Darfur state. The objective of the pilot projects was to provide the best durable solutions and safe space for returnees.

Out of the assisted beneficiaries, 71% were IDPs (mostly affected by the flash floods caused by heavy rainfalls in Darfur states); 23% were returnees (Sudanese returning from camps in Darfur states and some returning to places of origin); 6% were South Sudanese refugees (fleeing conflict in South Sudan).

In addition to the above, IOM provided different support to the ES/NFI sector, whenever requested, by supporting the ES/NFI sector partners with the transportation and distribution of NFIs, especially in the remote areas.





## Water, Sanitation and Hygiene Emergency Assistance

In 2017 IOM provided WASH emergency assistance to 227,077 beneficiaries (97,900 IDPs, 39,747 South Sudanese Refugees, 89,430 Host community). IOM Sudan responds to both protracted and sudden onset emergencies through the provision of life-saving Water Sanitation and Hygiene (WASH) interventions. Humanitarian and emergency WASH assistance was tailored to target specific needs identified in Darfur, South and West Kordofan, Abyei PCA Box, Blue Nile and the eastern states. At the beginning of 2017, IOM responded to the out-break of acute watery diarrhoea (AWD), by increasing access to safe water and through the promotion of safe hygiene practices, including garbage disposal for 26,990 residents in Kassala,

Gedaref and Blue Nile states. In East and South Darfur, South Kordofan and West Kordofan, IOM responded to the influx of south sudanese refugees through WASH emergency assistance by increasing access to safe water, safe sanitation facilities and by carrying out hygiene and garbage collection campaigns.

WASH emergency assistance continued in North Darfur and South Darfur for IDPs in Tawilla locality, North Darfur, and in Otash camp in South Darfur, and for the first time since 2010 IOM extended its WASH interventions to East Jebel Marra, providing assistance to 10,000 residents and returnees in Belle El Serief, an area that only became accessible in 2017.

In August 2015, the WASH sector in Sudan endorsed a comprehensive sector improvement agenda adapted from lessons learnt from past WASH interventions in Sudan. In line with the newly adopted agenda, IOM implemented the Water Sanitation and Hygiene Study Project in 2016 and 2017, to examine the water services in place and identify baseline trends of beneficiaries and facilities available. The study looked into patterns of vulnerability and economic conditions among IDPs in Darfur, at five different sites (Orchi at Um Baru locality, Rwanda Camp at Tawilla locality, Otash Camp, Abu Shouk and in El Fasher). In addition, the study created an informative foundation for the WASH sector partners to think through and strategize ways of developing transitions from fully subsidised humanitarian assistance to more sustainable contributions to the water supply systems in the region. Under this project, IOM developed three survey questionnaires (Survey A, B and C) and a methodology to collect information on water availability, water tariff systems in place, and how these factors affected the lives of beneficiaries in Sudan. For Survey A, IOM assessed 246 sources to map out the water sources present in the target





communities and their functionality. Under Survey B, data from 15,779 households was collected, including data on income and water sources. Survey C gathered information on the operation and management of the present water sources at each of the sites through Focus Group Discussions (FGD) with 92 community members. This study highlighted the nature of the type of reliance on the water services, and the discrepancies across the five sites in Darfur, identifying segments of the targeted population who are dependent on water subsidies from the humanitarian sector and those who can contribute. It examined the vulnerabilities and economic potentials of the communities living in the selected locations, with a vision of initiating a shift from complete reliance on subsidy of WASH services to that of self-sufficiency, where service users will contribute to the cost of operation and management of their water facilities. In 2018 IOM will be implementing stage two of the project and will take into account the findings of each deliverable.





direct medical consultations as part of the Minimum Basic Health Package (MBHP) ranging from treatment of acute and chronic communicable and non- communicable diseases, basic maternal and child care and health promotion on various health topics, including screening and community based management of malnutrition (CMAM) and immunization. Child care services supported 20,626 children under five (U5s) who were screened for malnutrition, and 19,550 U5s were reached through the Expanded Programme for Immunization (EPI). These services were provided through fixed and mobile facilities in North, South and East Darfur states.

IOM also established outpatient (OTP) nutrition centres in Umbaru in North Darfur and West Darfur states reaching 21,496 beneficiaries, with 1,016 U5s screened for malnutrition. IOM delivered a number of trainings and awareness programmes on health and nutrition.

120 Community Health Workers (CHWs) and 20 nutritional staff were trained on nutrition related topics and 330

caregivers undertook promotion activities on Infant Young Child Feeding (IYFC) programme, while 10 peer learning groups were formed, reaching 1,841 (679 males and 1,162 females) caregivers and 15,000 members of the host com-munities with important messages on how to improve nutrition and hygiene practices. In addition to screenings, the OTP treated 4,809 U5s cases with SAM/MAM through CMAM/ outpatient treatment and facilitated referrals to feeding programs and in patient care.

IOM supported EPI campaigns reaching 1,465 beneficiaries with vaccines in South Kordofan. Through the maternal care, 7,853 pregnant women were assisted with safe delivery at antenatal clinics, with cases being referred for obstetric emergencies. 460 women dignity kits were distributed to vulnerable girls, women, and pregnant and lactating women (PLW) in North Darfur, and 350 PLW were also screened and referred to feeding programmes.

The first AWD case was reported in Kassala in August 2016 and to date 134 localities across all 18 states in Sudan have been affected. A total of 30,762 cases have been reported and 657 deaths have been registered. In response to the emergency public health threat caused by the outbreak of acute watery diarrhoea (AWD) during 2017, IOM trained 93 health workers (including community health workers) on infection prevention and control in isolation centres, community surveillance, case identi-fication and management in North Darfur. Similarly, 149 community health workers (CHWs) received training and consequently 1,100 households with an estimated num-ber of 5,500 individuals were reached with key messages on AWD in West Darfur.

IOM in collaboration with State Ministry of Health (SMoH) conducted various activities such as house-to- house visits, garbage collection and





disposal exercises, health and hygiene campaigns that reached to over 10,000 households in South Kordofan. Furthermore, IOM in coordina-tion with Oxfam and CIS (Care International of Switzerland) participated in the joint celebrations to mark the "Global Hand Washing Day" and supported activities that included soap and jerry can distribution for 1,640 households in East Darfur.

Finally, in addition to these direct medical services, health promotion activities and on-the-job trainings on topics such as treatment protocols, MUAC screening and referral guidelines, midwives training in PMTCT (HIV/ AIDS) were conducted in East Darfur state in close coordination with SMoH reaching 32,920 beneficiaries. 180 health workers including medical staff and community health workers were trained on various health topics. IOM also constructed a fixed mobile clinic in Elferdous camp in order to improve access to health services to the vulnerable populations in need.



#### Clinics

**37,389** beneficiaries received direct medical consultations through 5 fixed clinics managed by IOM.



#### Nutrition

21,496 children under 5
years (U5s) were assessed
for malnutrition using
middle upper arm circumference (MUAC) screenings, with cases of malnutrition referred to outpatient or inpatient care, or
via CMAM.



#### Vaccinations

19,550 children under 5 years (U5s) were vaccinated through implementation of the Expanded Program for Immunization (EPI).



#### Pregnant

**7,853** pregnant women were assisted with safe delivery through antenatal clinics



### Medical supply

460 women dignity kits were distributed to vulnerable IDPs and refugees in Allait, North Darfur state, as part of the awareness campaigns on hygiene and reproductive health.



#### Infant

**350** Pregnant and Lactating Women screened and referred to feeding programs.

# Trainings, Awareness Programs and Capacity Building





Health workers (including staff and community health workers) were trained on general health topics such as conducting MUAC screenings, CMAM, good nutrition practices and PMTCT (HIV/AIDS)



beneficiaries were reached via Information, Education Communication (IEC)

materials as part of several health promotional activities conducted by
health workers trained by IOM.



beneficiaries were reached with key messages on Acute watery diarrhea
 (AWD)

A fixed mobile clinic was constructed in El Ferdous camp in East Darfur state, to facilitate provision of outpatient care.

### **IOM Managed Nutrition Clinics:**

To contribute towards the reduction of morbidity and mortality associated with malnutrition, IOM in close coordination with partners ran 5 nutrition clinics (4 in West and 1 in North Darfur).

#### **24.148** U5s

were screened through mass and routine MUAC campaigns

#### **4,809** U5s

received support for the management of Severe Acute Malnutrition (SAM) and Moderate Acute Malnutrition (MAM)

#### 8,222

Caregivers were provided with information on how to improve Infant and Young Child Feeding (IYCF) practices through 10 peer learning groups, and the importance of hand washing, proper storage and handling of food and water to prevent foodborne illnesses and waterborne diseases.

#### 15.000

beneficiaries reached with education promotion, general health and hygiene tips.





Supported by USAID/OFDA and managed by IOM, the RRF is a unique emergency funding mechanism, which provides grants to national and international NGOs for critical, life-saving activities in the immediate aftermath of a natural or man-made disaster. Covering all of Sudan, but with a particular focus historically on Darfur and Kordofan, the fund provides urgent support to IDPs within six sectors: NFIs; Humanitarian Coordination and Information Management; WASH; Health; Protection; Shelter and Settlement. Through RRF outreach to National and International NGOs, the RRF mechanism is able to respond quickly to reach underserved populations that are often excluded from other funding streams.

In 2017, IOM responded to humanitarian emergencies through RRF in four States across three sectors (Health, WASH, and NFIs), but was most notably one of the largest agencies to quickly respond to a country-wide out-break of acute watery diarrhoea (AWD) through integrated Health and WASH interventions. Collectively in 2017, RRF grants totalled 1,064,786 USD and reached approximately 523,232 direct and indirect beneficiaries. In addition, critical non-food items (NFIs) were distributed both directly and through an innovative voucher mechanism to vulnerable, returnee households in Central Darfur state, and urgent WASH assistance was provided to IDPs and returnees in South Kordofan state.

# Accelerating Recovery, Transition and Socioeconomic Development



### **Community Stabilisation**

### Promoting Peaceful Coexistence, Cooperation and Dialogue



Pastoralist and sedentary communities co-exist in different areas of Sudan and its neighbouring countries. Human mobility patterns across borders are affected by factors such as climate change and different social and economic structures and rules that can affect peaceful coexistence.

In August 2017, IOM Sudan completed the implementation of a European Union funded project on Cross Border Peace and Cooperation (CBPC) which provided local infrastructure and empowerment within pastoral-ist and sedentary communities in South and East Darfur; especially in border areas with South Sudan. Spanning over 2.5 years, CBPC has made many notable achievements, with over 42 activities implemented along migratory pastoral corridors in South and East Darfur, posi-tively impacting more than 42,000 people by addressing major root causes of conflict to promote community stabilisation. This was done through the improvement of community infrastructures such as health clinics, schools and markets as well as productive assets such as water sources that sustain social stability and strengthen communities to promote co-existence. Throughout its duration, the project further helped communities to improve their sources of income through trainings targeting gum arabic and, honey production, tree planting and small businesses. The successful and positive impact of the CBPC project and TRU projects,

can be attributed to its strong developmental and participatory approach that provided communities with the tools to accelerate recovery, transition and socioeconomic development. In the specific case of CBPC, two participatory workshops targeting 1,000 participants from local and state authorities, tribal leaders and members of the community were conducted using a consultative process that enable dialogue and through which the communities were responsible to identify the root causes of conflict within their communities. Priority needs were then identified in six selected localities including El Radoom and Buram localities in South Darfur and Ed Daein, Abu Karinka, Assalaya, Bahr Elarab localities in East Darfur. Community improvement committees were formed as a result of the workshops for each locality, including members of different segments of the community (pastoralist and farmers), state and local authorities as well as women in order to ensure the inclusion of gender specific needs. These committees served as a link between the IOM and communities throughout the project, but most importantly increased a collective sense of ownership and responsibility of the interventions by participating in the decision-making process. This proved to be critical when sensitive issues were faced during the implementation process, requiring project staff and community committees to act as connectors where possible.

### WASH and Basic Infrastructure

### Improving Access to Basic Services and Community Infrastructures



In South and East Darfur, construction of community infrastructures and increased access to basic services, were key tools in mitigating the risk of conflict and promoting community socioeconomic development between pas-toralists and sedentary communities in both states. Interventions were implemented along migratory pastoral corridors where IOM constructed and rehabilitated over 12 water facilities and other community resources such as primary schools, health and community centres and livestock markets. Additionally, IOM provided assets to the health clinic, a boy's high school and women centre in South Darfur to address some of the priority needs in basic services and income generating activities. Positive achievements through collaborative community initiatives were further encouraged through the planting of 600 trees at schools and a market in East Darfur enhancing land management through improving existing practices to counter land degradation and overgrazing.

In east Sudan, IOM began rehabilitating a water treatment plant in Girba town to improve access to water for the residents and to support the agricultural activites in the

area. Access to safe water is also being improved at the main border posts in each of the three states of East Sudan, Kassala, Gedaref and Red Sea, to support both the local communities and migrants passing through the border on a daily basis. IOM is also working closely with the Ministry of Education, the Ministry of Health and the State Water Corporation to improve access to water and sanitation facilities in 10 schools in Kassala, and is carrying out rehabilitation work at two hospitals, one in Kassala state and another in Gedaref state to improve access to health services.

In the states of East, South, West and North Darfur, IOM is also implementing WASH activities under the Darfur Development Strategy funded by the Government of Qatar which aims to increase access to water in villages of return in Darfur and promote safe hygiene and sanitation practices among communities.

In Abyei, IOM has provided assistance to approximately 25,000 beneficiaries by improving access to safe drinking water through the construction or rehabilitation of water facilities in the underserved communities of northern and southern Abyei.

The construction of the water pints was complemented with the establishment of water management committees formed from the community to ensure the correct maintenance of the newly established water sources. At least 2,000 beneficiaries were also reached through the hygiene and garbage collection campaigns. Hygiene awareness campaigns provided information on how to reduce the risks of contracting water-borne diseases through the use of safer hygiene practices and the communities also became actively involved in the garbage collection campaigns which were conducted to reduce pollution, potential contamination of water sources and improve the local environment (also under the framework of community capacity building). In Abyei, IOM and UNISFA also carried out a number of Quick Impact Projects (QIPs), infrastructural interventions to support local basic services, such as the construction of new fencing for a school and, the procurement of new medical furniture for the Abyei clinic and Banton Bridge Check post office and the procurement of a new generator set for Gok Machar local administration office which had been stolen.

IOM also constructed two new local community halls in two towns where these facilities were not present before in order to support local community meetings and to construct spaces in which trainings and workshops could also be conducted. Three grinding mill facilities were constructed to support and enhance the local production of grains for the local communities who rely on more expensive local markets for the purchase of ground grains. As a result, the targeted beneficiaries can now purchase locally produced grains for 1SDG instead of 2SDG at the market. This intervention not only increased local production, but also ensured increased purchasing power for a greater number of people. Three vegetable farms with drainage systems were established in order to enhance local livelihood opportunities and increase local production of grains and vegetables. The establishment of these farms has also been closely co-ordinated with FAO for the distribution of farming tools and seeds to the local communities. In 2017, IOM conducted vegetable gardening trainings under theproject "Enhancing Basic Services and Livelihood Opportunities in Abyeis (PCA)" to enhance the sustainability of the veg-etable farms that were constructed last year under the QIPs 2015/2016.

### Livelihood Interventions

# Strengthening Community Capacity to Increase Resilience, Recovery and Economic Development

Community capacity building with the aim to foster eco-omic and social resilience is usually paired with capacity building for local authorities in order to increase the sustainability of the projects and promote development. IOM Sudan aimed to enhance community stabilization by supporting local and state authorities through capacity building activities, as they play a prominent role in the decision-making process. In South and East Darfur States, under the CBPC project, IOM implemented two cross-border conflict prevention workshops with over 1,000 participants from different segments of the local communities (community police, state police, rural courts judges and representatives, influential tribal leaders and civil society) to discuss and address issues such as cross-border dynamics, proactive conflict resolution issues amongst pastoralist and sedentary communities. Through identifying problems and solutions using an interactive, participatory approach, open dialogue, transfer of knowledge and exchange of experiences from different areas and fields; participants received positive feedback and were enabled as community members to pave the way forward in implementing and developing communal cohesion and peaceful coexistence.

IOM Sudan works towards building resilience amongst

affected populations, reducing aid dependency, promoting safe returns and sustainable reintegration for the prevention of secondary displacement. Livelihood support is a key strategy for promoting resilience and socio-economic re-integration. Through the livelihood and capacity building component of CBPC, IOM reached the intended result by heavily engaging in the managing small businesses training of 100 women from host communities and IDP camps and South Sudanese refugees allowing for increased interaction amongst different trib-al groups in East Darfur. Two Gum Arabic trainings for a total of 129 farmers were conducted in order to facili-tate advanced methodologies of planting and harvesting (tapping) in an environmentaly friendly manner in collaboration with the private sector, one in each state; hence empowering farmers in South and East Darfur. During the seasonal migration to the north, four livestock vaccination and treatment campaigns for 19,355 heads of livestock were carried out to attend to the wellbeing of pastoralists' main source of livelihood-Bee-keeping and honey production trainings for 50 men and women were conducted in El Radoom, South Darfur, to reinforce and improve existing coping and livelihood management strategies and land protection through improved methodologies and tools. IOM also focused on integrating different project interventions under each result to consol-idate the overarching objective of the project, through assigning a mobile theatrical group that performed six plays in community gathering points or economic hubs instilling messages of peace and social cohesion in each selected locality.

In West Darfur, IOM also supported economic reintegration for returnees within host communities through delivering community-led livelihood interventions. A total of 2,120 households (1,008 from returnee communities, 780 from host communities; and 332 from settled communities) were supported through agricultural extension services, livestock focused interventions and a small scale business support. The agricultural interventions were delivered through agricultural training on land management and pest control; distribution of improved seeds and provision of agriculture tools to improve crop production. IOM further supported two irrigation systems in the selected areas that needed water points to support crop growth during the dry season. The livestock interventions included: training of Community Animal Health Workers (CAHW); vaccination campaign for livestock; and distribution of goats, coupled with an awareness campaign to assist effective livestock husbandry practices. Additionally, small scale group businesses were supported through the project with particular focus on youth, reaching a total 60 young people from returnee communities (30 male and 30 female). The group of male youths benefited from the construction of shelters as a venue for the youth TV club business and provision of the necessary equipment such as TVs and other digital and power systems including a solar panel system.





The group of women were also supported with the required furniture and necessary supplies such as tables, chairs and other food processing items to start their restaurant business.

In Abyei, IOM organised a vegetable gardening workshop and training for 50 Misseriya community members, 25 in Diffra town and 25 in Mekines town to enhance food security and livelihood opportunities. The workshop was built around the topics of i) vegetable gardening ii) land use iii) food processing skills and iv) basic small business planning and management skills, integrated with the distribution of seeds and tools. Local households involved in these workshops were able to harvest higher quality produce which contributed to improving household food security and diversifying goods that could be sold as a source of income. As a direct result of the trainings and seed and tool distribution carried out under this project. new food items such as okra and watermelons were available and sold for the first time at the local markets with other staples such as tomatoes and onions, covering a wider range of the nutritional needs of the community and supporting the participating households with income generation capabilities.

Donors: European Union (EU), United Nations Interim Security Force for Abyei (UNISFA), United States Agency for International Development (USAID); USAID Office of Foreign Disaster Assistance (OFDA), Qatar, Italian Agency for International Cooperation and Development (AICS), The Department for International Development (DFID).

# **Migration Management and Development**



### **Capacity Building and Migration Governance**

Counter-trafficking and Migration Policy



# Developing a National Action Plan to Combat Human Trafficking

IOM has worked closely with the Government of Sudan (GoS) to develop a National Action Plan to Combat Trafficking. Over the past year, IOM provided direct technical assistance to the National Committee to Combat Trafficking (NCCT) as they worked to develop a national action plan. This includes organizing and running workshops to design the National Action Plan, several consultative meetings and significant inputs into the action plan. In November 2017, the plan was endorsed thus strength-ening the legal framework on trafficking. In 2018, IOM will be supporting the NCCT in the operationalisation of this plan.

# Advocacy and technical support on the Global Compact for Migration

IOM Sudan supported the GoS national consultations on the Global Compact for Safe, Orderly, and Regular Migration through providing policy and technical advice. In November, the Ministry of Foreign Affairs (MoFA) hosted two days of roundtable discussions on the Global Compact on Migration with members of relevant line ministries and representatives from academia present. The roundtable was designed and facilitated by IOM

with generous funding from the EU's regional Better Migration Management Project.

# Improving the capacity of the criminal justice system to respond to trafficking has been a key priority for IOM in 2016

In 2017 IOMs efforts on trafficking were focused on the criminal justice system. Through a UK FCO funded project, IOM implemented a range of training activities designed to enhance the capacity of the judiciary and the police to investigate and prosecute trafficking of human beings in Sudan.

The key successes of the project include: 1) the development of a standardized and first nationally endorsed training curriculum for judges, prosecutors and police on effective investigation and prosecution of trafficking cases with a strong focus on victim and witness care and protection; 2) the establishment of a team of local trainers on investigating and prosecuting trafficking of persons from within the criminal justice system; 3) the design and development of a set of guiding tools to support practitioners on the job and standardize investigation and prosecution methods across Sudan. These trainings are set to be rolled out across the country in 2018.

#### **Legal Technical Working Group on Trafficking in Persons**

above mentioned curriculum development process identified a range of legal issues, including the interpretation of the Combatting Human Trafficking Act 2014 and its relationship with other laws at both Federal and State levels. IOM has been advocating for and supported the establishment of a Legal Technical Working group on Human Trafficking and related crimes such as smuggling. The overall purpose is to set up a body of legal experts and practitioners engaged with: a) conducting a comprehensive review of the Combatting Human Trafficking Act 2014 (CHTA) in all its aspects; b) supporting the effective implementation of the act through clarifying potential inconsistencies with the national and international legal framework; c) taking measures or making recommendations on amendments to the current law addressing identified challenges in prosecuting of human trafficking cases.

# Developing the institutional capacity on Border Mangement

Over the year, IOM Sudan has been assisting the Passport and Civil Registration Corporation (PCRC) of the Ministry of Interior to strengthen technical knowledge and practical skills on a number of essential areas related to border control and management.

A needs tailored training programme has been designed and developed with the technical assistance of the IOM African Capacity Building Centre (ACBC) in Moshi (Tanzania) jointly with the Police Training Authority focusing on ID management and examination.

Namely, one introductory training on Immigration and Border Management, four Basic Level Trainings and two Training of Trainers on Document Security and Fraud Detection have been delivered. Approximately 150 mid and senior level migration officers from Khartoum and across Sudan have been trained. Additionally, 60 frontline migration officers (non-commissioned officers) at the Khar-toum Airport have received one training on the use of first line inspection equipment.

As a result of the capacity development process, number of Sudanese trainers have been practicing their acquired competencies assisting with the delivery of some of the mentioned trainings, including two basic level trainings on Document inspection for Embassies Visa sections and consular offices as well as for security officers from the Italian Embassy and the EU Delegation.

Additionally, a set of resourceful materials on first and second line document examination developed by the ACBC has been translated into Arabic for further use while a new smartphone App for off-line document examination has been designed and developed by the ACBC.

In parallel, IOM Sudan has been advising the PCRC on identifying options for an effective e-managed border management system. Specifically, an induction process has been undertaken to sensitize and advocate with the top-management and ITC experts on the integration of MIDAS into the current Sudanese border management system training. Meanwhile, technical assistance has been provided to initiate the process for the rationalization and modernization of the VISA system.

A set first and second line inspection equipment has been procured and delivered to Khartoum International Airport further to a preliminary assessment.

A comprehensive needs assessment exercise has also been conducted covering both Sudan's international airports (Khartoum and Port Sudan) as well as land border crossing points in Gedaref state, to identify critical needs as far as equipment and infrastructure.

### **National Conference on Youth Migration**

IOM in partnership with the Ministry of Youth and Sports (MoY&S) and in collaboration with the Secretariat of Sudanese Working Abroad (SSWA) organized the first Conference on Youth Migration in an effort to address youth issues driving many of them to migrate in search for better opportunities while informing them of the risks of irregular migration.

The National Conference on Youth Migration took place on 13-14 March 2017. The overall aim was to promote youth and youth institutions engagement and exchange of ideas, hence creating a platform for open dialogue to discuss the challenges and drivers of migration through workshops as well as to enhance youth knowledge and awareness on the risks of irregular migration. The discussions intended is to pave the way towards informing possible youth projects and / or policies related to youth migration.

150 youth from the 18 states attended the conference including youth organizations, political parties, civil society organisations, and cultural institutions. 34 recommendations came out from the three workshops facilitated by youth addressing three different topics: 1) Safe Migration; 2) Opportunities youth would like to see in Sudan; 3) Role of the diaspora in the development of Sudan. The recommendations range from policy-making to the development of and creation of job opportunities for youth to manage youth migration. All of which are in line with the Sustainable Development Goals (SDGs).

### **Labour Migration**

IOM in partnership with the Ministry of Labour (MoL) and Administrative Reform organised the first workshop on Labour Migration Policy on 5–6 December 2017. The objective of the workshop was to assist the MoL in identifying the main gaps within the existing labour



migration policy along with relevant government and non-government institutions looking ahead of a policy-making process focussing on the protection of Sudanese working abroad as well as of migrants in Sudan. 40 recommendations have been drafted including the signature of bilateral agreements between Sudan and receiving countries, the delivery of pre-departure

trainings to the Sudanese migrants, the deployment of labour migration-oriented attachés as the Diplomatic representation overseas.

An additional third day was focused on training private and public recruitment agencies and MoL staff on ethical recruitments, selection malpractices and institutional frameworks.

### **Direct Assistance to Vulnerable Migrants**

### Migrant Resource and Response Centre Offers a Service Hub for Migrants

IOM Sudan established the Migrant Resource and Response Centre (MRRC) in October 2015 in Khartoum. Through the MRRC, the first of its kind in Sudan, IOM has supported the Government of Sudan (GoS) to manage mixed migration flows by equipping migrants with information that can assist them to make more informed migration decisions and reduce their vulnerability to the risks associated with irregular migration; and by providing direct assistance services and community outreach. The MRRC provides different services such as medical assistance, psychosocial counselling to victims of trafficking and other vulnerable migrants, information on risks of irregular migration, as well as assisting in the voluntary return and reintegration of migrants who are stranded in Sudan and voluntarily choose to return to their countries of origin. The MRRC Outreach Team also regularly engages with migrant communities to support the protection of vulnerable migrants.

Between January and December 2017, a total of 4,933 vulnerable migrants were assisted through the MRRC and its mobile response team. AVRR and medical assistance were the services most requested and needed

by migrants in Khartoum. Services were provided to vulnerable migrants directly at the MRRC, through referral to relevant service providers and through the MRRC mobile response team. The mobile response team enabled beneficiaries without access to the centre, such as migrants in immigration detention and migrants in community safe houses, to obtain much needed services. Most of the migrants assisted were from Ethiopia, Somalia, Nigeria and Eritrea but those screened by the MRRC staff to receive assistance also included migrants from a number of other countries, including Burkina Faso, Cameroon, Central African Republic, Chad, Congo, Comoros, DRC Gambia, Ghana, Guinea, Ivory Coast, Liberia, Libya, Mali, Niger, Senegal, Syria, Tanzania, Uganda and Yemen. It is to be noted, that since the opening of the MRRC there has been a consistent increase in the number of migrants assisted since the MRRC was established, from 281 migrants assisted in 2015 to 1,977 in 2016 and up to the 4,933 migrants accessing quality protective services provided through the MRRC.

A total of 2,380 beneficiaries were provided with direct



medical and psychosocial assistance by the MRRC in 2017, including 2,258 medical assistance beneficiaries and 122 Psychosocial support beneficiaries. The MRRC outreach team continued to coordinate targeted support to groups of migrants in administrative detention due to immigration related violations, as well as to vulnerable migrants outside detention, such as migrants being supported by community based safe houses. A total of 2,177 were assisted by the mobile response team in 2017. Beneficiaries in detention included migrants apprehended by the Sudanese authorities while attempting to migrate irregularly to Libya and migrants in immigration deten-tion who had been detained in Khartoum due to a lack of documentation such as passports and visas. These migrants, often lack adequate nutrition, hygiene items, medical support and related follow-up by service providers due to confinement and limited resources.

Community engagement continued to be the driving force of MRRC direct assistance and outreach activities. The close interaction with the various migrant communities and the informal referral mechanisms created between migrant communities and the MRRC in Khartoum played an important role in providing targeted and context specific services to migrants. In 2017 the MRRC team focused on expanding and deepening the referral networks of the MRRC to enable more specialized assistance and effective partnerships with other agencies and service providers, including but not limited to: Ethiopian Community Association and safe house, Eritrean safe house and active members of Somali and Nigerian communities in Khartoum who were supported by their respective embassies and the MRRC outreach team to better support vulnerable community members. MRRC staff continued community outreach activities, including sessions with community representatives to support their efforts to provide assistance to vulnerable

migrants throug community based initiatives, including support provided by communities through their safe houses and support to migrants in detention from the communities themselves. The sessions conducted with community representatives also continued to discuss the risks of irregular migration, safe migration practices and finding alternatives to irregular migration.

Lastly, the MRRC team made a significant contribution to increasing the availability of opportunities for assisted voluntary return and reintegration (AVRR) to vulnerable migrants stranded in Sudan. For stranded migrants, a viable alternative was provided to remaining in Sudan in a precarious situation or taking the risks that irregular onward migration from Sudan may entail. A total of 376 migrants voluntary returned to their countries of origin.

# **Expansion of Migrant Assistance Activities to East Sudan**

In 2017 IOM Sudan has started working closely with the State Ministry of Social Welfare (MoSW) in Gedaref to prepare for the set-up of a Migrant Resource Centre (MRC) in Gedaref. Sudan is a key transit country and the Gedaref border area is one of the main transit points for migrants from the Horn of Africa traveling to North Africa and to Europe. In light of the strategic location of Gedaref IOM Sudan has started coordinating with the State MoSW in order to establish a Migrant Resource Centre in the framework of the EU-funded project Addressing Mixed Migration Flows in Eastern Africa, managed by Expertise France. The MRC will assist vulnerable migrants including victims of trafficking and exploitation and/or abuse, unaccompanied and separated children as well as potential migrants and support local governmental authorities, NGOs, relevant civil society organizations and migrant host communities to respond to the challenges of mixed migration more effectively.

### **Darfur Monitoring Project**

### **Data Informs and Improves Humanitarian Programming**



In 2017, IOM Sudan in partnership with Management Systems International (MSI) continued its third consecutive year of the Darfur Monitoring Project (DMP) as a Third Party Monitoring (TPM) entity for USAID's OFDA-funded humanitarian efforts in Darfur. DMP is designed to facil-itate learning and improved programming based on reg-ular data collection in South and West Darfur. TPMs are typically used in challenging and unsafe environments like Darfur, where donors and non-governmental organisation (NGO) staff have limited access to remote field locations to regularly monitor and observe activities. The DMP's data collection is meant to inform programme man-agement and help implementing partners (IPs) and OFDA make real-time adjustments in a difficult operating context. These data are designed for use by IPs in their programming and by OFDA staff in its oversight monitoring of partner activities. Monitoring in 2017 included data collection and verification for four OFDA implementing partners (IPS) and their project sites (42 in total) across South and West Darfur States focusing on health, water, sanitation and hygiene (WASH) programmes.

One component of the DMP is an annual data quality assessment (DQA). The purpose of a DQA is to ensure that OFDA and its implementing partners (IPs) are aware of the strengths and weaknesses of data used for decision-making. The indicator selected for the data quality assessment (DQA) in 2017 was the number of pregnant women attending two or more antenatal (ANC) visits reported by three implementing partners conducting health programs in South and West Darfur

states, This indicator is an OFDA standard indicator and is reported by all partners implementing activities under Subsector Health Systems and Clinical Support.

The indicator was chosen because it is verified by the DMP during its regular monitoring visits and it serves as a good proxy for other reproductive health (RH) indicators reported by OFDA's partners. The approach used for the DQA was based on the five criteria (validity, reliability, precision, integrity and timeliness) identified by USAID and supplemental guidance developed by USAID's office of policy, planning and learning (PPL). The DQA methodology looked at how each IP collects data on the indicator in question, evaluating both the IPs' data collection practices and the overall data quality of the indicator.

In addition, in 2017, DMP also produced one Lessons Learned Report. The purpose of this report was to convey relevant connections and time-based trends across the sub-thematic areas, individual sites or groups of sites and higher-level sub-sector findings wherever possible. Data used in report was from 165 sites visit to OFDA-supported health and WASH sites that took place between December 2016 and October 2017. This included 51 interviews with WASH and hygiene promotion committees, WASH site observations, repeat visits to 33 health clinics in West and South Darfur and 20 focus group discussions (FGDs) with health facility staff and 18 with community health promoters (CHPs) since July. Beneficiary data were collected through 984 exit interviews with female patients and 1,220 rapid surveys at water collection points.

# **Operations and Movement Management**

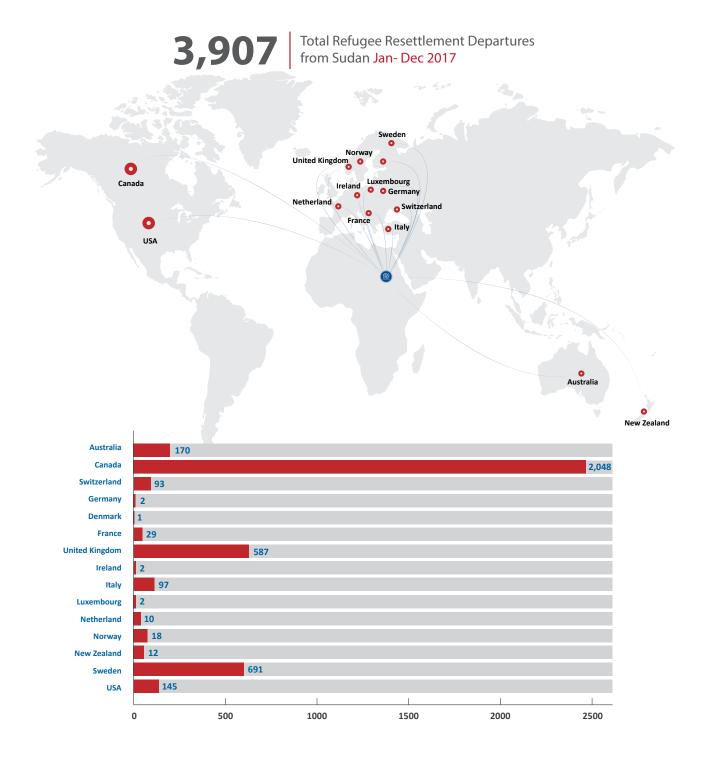


### **Facilitating Migration Services**

### Safe and Dignified Refugee Resettlement into Third Countries

IOM continued to support the Government of Sudan in facilitating the movement of refugees. In 2017 15 countries (Europe (11), North America (2) and the Pacific (2)) were the destinations for refugee admission and family reunification from Sudan. A total of 3,907 refugees were assisted in 2017. The top five major resettlement destinations remained as being Canada which alone absorbed over 52% of the refugee caseload, followed by Sweden, UK, Australia and US, in that order, which together accounted for 93% of the entire resettlement caseload from Sudan for 2017. The remaining 11 countries represent 7% of the total facilitated admissions. IOM's resettlement activities are

implemented in cooperation and collaboration with the United Nations High Commission for Refugees (UNHCR), the Sudan Commission for Refugees (COR) and other relevant Sudanese authorities. The activities include the facilitation of travel documents, transportation, health assessments and protocols, cultural orientation sessions and family reunification procedures. As antifraud promotion, IOM Sudan has introduced a number of messages for the refugee clients of admission programmes, which emphasize that IOM Resettlement services are free of charge; and that any solicitation of funds or suspected fraud should be reported to Fraud IOM Sudan through iomkhartoum@iom.int.



### Medical Assessments and Services to Promote Migration Health



Pre-departure Migration Health Assessment and Travel Health Assistance is provided by IOM upon the request of countries of refugees' admission. This assistance aims to ensure that refugees are healthy by conducting preventative and curative interventions for conditions that could have a negative impact not only on the refugees traveling on resettlement grounds but also on the public health of the host communities. During 2017, more than 5,000 comprehensive health assessments were conducted in preparation for refugees to resettle from Sudan, of whom 3,471 travelled to Canada, Sweden, Italy, and the United States. The remainder have their data in a specific database, which will inform countries of resettlement about the respective individual medical profiles for future ref-erence. All refugees being resettled also received pre-departure medical screenings to assess fitness to travel and ensure they are given appropriate medical referrals upon arrival.

IOM's Migration Health Department in Sudan coordinates with different programmes (such as UKTB screening and United States Refugee Admissions Program (USRAP)) in order to provide health services to migrants and refugees resettling to various countries such as Canada, USA, UK, Sweden, Italy, Australia and New Zealand including for resettlement, family reunification, student and other temporary or permanent travel. Since January 2017, these services have reached over 5,000 beneficiaries.

The most common of these services is tuberculosis (TB) screenings, with 2,341 examinations accomplished in 2017, under the United Kingdom Tuberculosis Programme (UKTB). UKTB medical certificates are issued

for all UK visa applicants who intend to stay in the UK for a period longer than six months. In addition, IOM administered 182 yellow fever vaccinations for migrants traveling to Australia and New Zealand and collected 42 DNA samples to support family reunification to Italy and UK during 2017.

- 53: DNA samples
- 12: Medical escorts
- 2,339: UKTB Screening programme
- Fitness to travel (FTT) check for all persons who received travel assistance from IOM Operations team
- 1,630: Canada Health Assessment / e-medicals
- 105: Italy Health assessments
- 268: Yellow fever vaccine
- Fitness to travel (FTT) check for all persons who received travel assistance from IOM Operations team.

Cultural Orientation was provided for refugees bound for resettlement to Canada and Italy to prepare them for their new life and speed up integration in a new socioeconomic and cultural context. This was conducted by IOM trainers and used standard materials and specific curricula from the country of resettlement. In 2017, IOM Sudan delivered 56 sessions to a total of 1,487 participants. Each session takes three days, and attendants are ten years of age and above. Over 93% of the participants were resettled to Canada.

IOM extends its gratitude to the Government of Sudan for the collaboration throughout the implementation of IOM programming.



IOM greatly appreciates the generous financial and in-kind contributions from its donor partners, which has ensured the continuous delivery of IOM programming in Sudan.























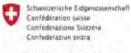


























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