Results Report:
CRISIS IN EAST AFRICA 2023
Conflict, Climate and Hunger

(Projects timeline: August 2023 – May 2024)

HUMANITARIAN COALITION
Together saving more lives

ACTION AGAINST HUNGER · Canadian Foodgrains Bank · Canadian Lutheran World Relief · care · Doctors of the World · humanity & inclusion · Islamic Relief · OXFAM Canada · OXFAM Québec · PLAN INTERNATIONAL · Save the Children · World Vision

BACKGROUND

In 2023, conflict, climate-related disasters and hunger put millions of lives at risk in countries across East Africa.

Rival military factions in Sudan began fighting in mid-April 2023. The conflict forced millions of people to flee their homes to escape the fighting. The exodus put an added strain on neighbouring countries including the Central African Republic, Chad and South Sudan – increasing the burden for humanitarian response.

At the same time, three years of drought, exacerbated by climate change, caused repeated crop failures in Ethiopia, Kenya and Somalia. The situation then changed dramatically when torrential rains triggered flash flooding, and the drought-damaged soil was unable to absorb the water. These floods destroyed property, killed livestock and forced thousands of people to leave their homes in search of food, shelter and medical care.

Very quickly the number of people facing high levels of acute food insecurity in East Africa reached the highest level since recording began – including in the Democratic Republic of the Congo, where a quarter of the country's population are food insecure. Conflict is still the biggest driver of hunger, with 70 per cent of the people in the world who are hungry living in areas affected by war and violence.

Humanitarian Coalition Appeal

Together with our members, the Humanitarian Coalition launched a fundraising campaign **from June 5 to June 30, 2023** to respond to this urgent situation.

Thanks to the generosity of Canadians, we raised more than $5 million — these donations were matched by the Government of Canada, resulting in **a total of $10 million** for humanitarian response.

OVERVIEW OF THE HUMANITARIAN RESPONSE

In the months that followed, the funds were used to provide food, cash, health services, nutrition, water, sanitation and hygiene support and protection services in the Central African Republic, Chad, the Democratic Republic of the Congo, Ethiopia, Kenya, Somalia, South Sudan and Sudan.

A total of **363,322** people benefited from Humanitarian Coalition projects across these eight countries. Overall, 61 per cent of participants were women and girls and 39 percent were men and boys; 37 per cent of participants were children.

All 12 members of the Humanitarian Coalition responded to this crisis.

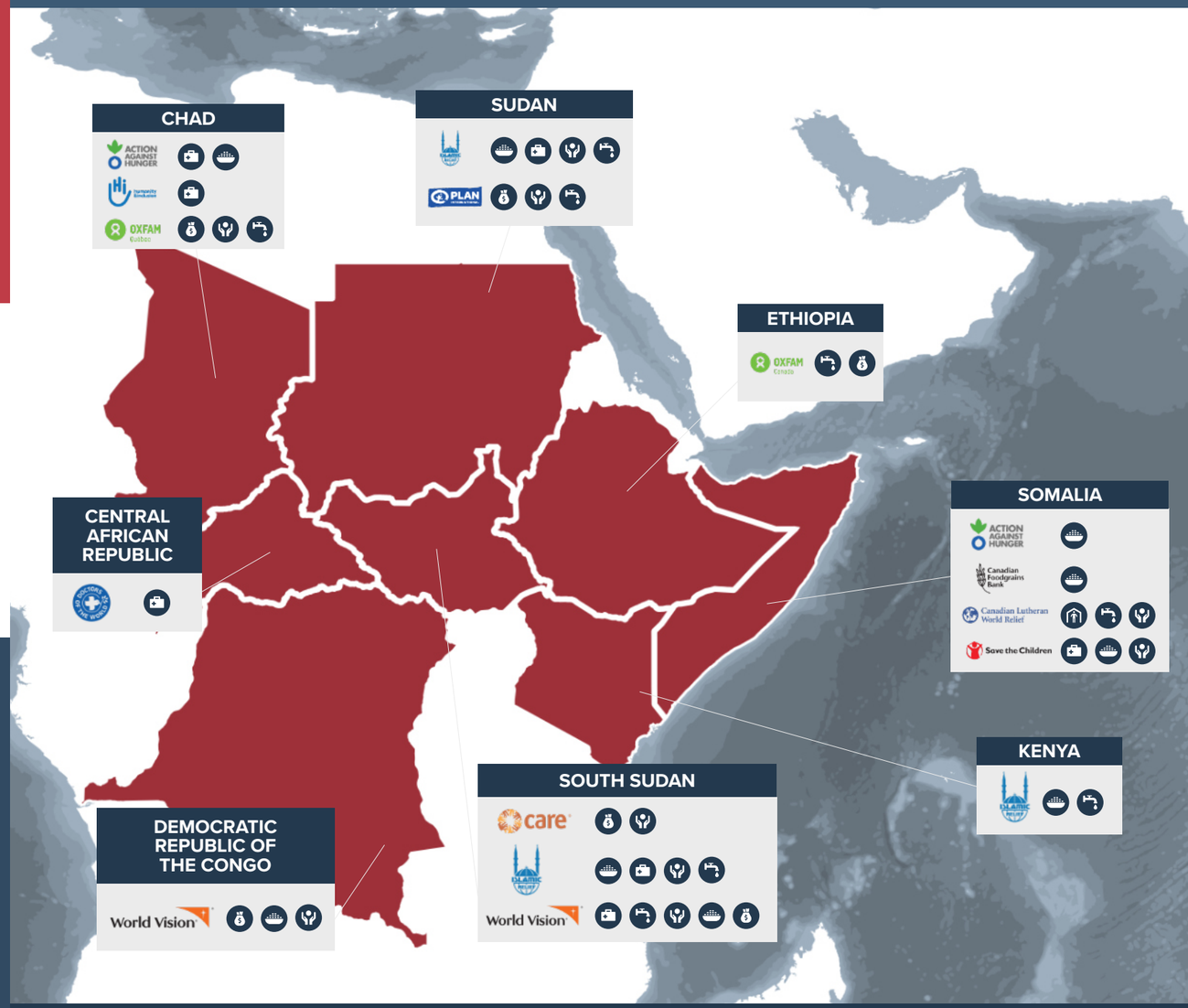
363,222
people benefited from Humanitarian Coalition projects across the eight countries

61% women and girls

39% men and boys

37% children

SCOPE OF OUR RESPONSE



Food Shelter Protection Health Cash WASH* NFI**

*Water, sanitation and hygiene **Non-food Items

RESULT HIGHLIGHTS

ACTION AGAINST HUNGER

In Chad, ACF improved the general health status of Sudanese refugee and host populations, particularly boys, girls and pregnant women. ACF supported 11,202 people with essential health services, including providing vitamin A supplements and routine vaccinations. A total of 1,404 pregnant women received at least two medical consultations. ACF also assisted in delivering 254 babies at the mobile clinic and conducted 714 consultations after birth.

In Somalia, ACF improved access to nutrition services to both treat and prevent malnutrition for boys and girls under age 5. A total of 8,215 children were screened for malnutrition and 1,450 children received essential treatment. The project also trained 1,450 caregivers on how to check children's nutrition at home using a mid-upper arm circumference (MUAC) measuring tape and how to follow good feeding practices for infants and young children. This strengthened the community's ability to detect and prevent malnutrition in children under their care.

In Chad, ACF improved the nutritional status of Sudanese refugee and host populations, particularly girls and boys. In the Zabout camp, 29 community-based health volunteers were identified and trained both to screen for malnutrition and refer families to treatment options. An additional 39 people were trained in the Adré area. These volunteers helped identify 1,004 new cases of children with severe acute malnutrition to be admitted to the Outpatient Treatment Program. Additionally, 504 children with severe acute malnutrition with complications were treated at Goz Beïda hospital. Approximately 3,625 children under age 5 benefited from free medical consultations as part of ACF's response. In Ouaddaï, 1,590 children with moderate acute malnutrition were admitted to the outpatient nutrition unit for treatment. Treatment was successful, resulting in 0 deaths. Additionally, 16,381 people in Sila and 12,151 people in Ouaddaï joined sessions to learn about infant and child nutrition and healthy family nutrition practices.

*Mid-upper arm circumference (MUAC) is a measurement used to identify malnutrition in children and adults.

Canadian Foodgrains Bank

In Somalia, CFGB's partners increased immediate consumption of food by households and people affected by hunger by distributing six monthly mobile cash transfers of CAD 128 to 850 households. These households were identified as the most vulnerable in the 10 most severely affected camps for internally displaced people in Baidoa. Upon completion, the project evaluation showed that the percentage of households with a poor food consumption score fell from 71 per cent to 2 per cent and the percentage of households with an acceptable score improved from 6 per cent to 73 per cent. The project also increased confidence for women on advisory committees to participate meaningfully in decision making and leadership in food assistance. By the end of the project, 85 per cent of female advisory committee members reported actively participating in decision making on the committees.

FIELD INSIGHTS: Watch Andy Harrington, executive director at Canadian Foodgrains Bank, while visiting South Sudan

"I was reminded of the fundamental truth that every human being is equally human. No one, regardless of where they live, is more human than another. There is no "other" – there is only us. Any of us could find ourselves in their shoes. In a time when empathy is increasingly treated as a vice, we must not turn our backs on the world's most impoverished. To claim to be compassionate is meaningless if we do not act. And the time to care and to act is now."

Canadian Lutheran World Relief

In Somalia, CLWR increased access to water, sanitation and hygiene infrastructure and gender-sensitive hygiene supplies among vulnerable populations. The project constructed 100 pit latrines with handwashing facilities, resulting in 3,000 people gaining access to safe, clean and reliable hygiene facilities. Also, a total of 500 hygiene and dignity kits containing reusable sanitary pads, laundry soap, underwear, bathing soap, basins and cleaning buckets were distributed to 500 girls.

In Somalia, CLWR increased the skills and knowledge of community protection monitors to deliver community-centred gender-based violence prevention and response, prevention of sexual exploitation and abuse, and public health and psychosocial support. A team of 30 staff members were trained on the prevention of sexual exploitation and abuse. Following the training, a community outreach program was launched to raise awareness of gender-based violence among the displaced population, reaching 10,141 people (6,659 women and 3,482 men).

In Somalia, CLWR increased access to safe and dignified shelter for women, girls and other vulnerable people who were displaced from their homes. The project distributed tarpaulins to 500 households, supporting 3,000 individuals. Of those households, 300 (an estimated 1,800 people) also received household kits which included two bed sheets, a metal basin and plastic bucket for washing, a mosquito net, assorted clothing, bathing soap, baby diapers, sanitary towels, a floor mat, a mattress and laundry soap.

care

In South Sudan, CARE increased access to gender-based violence awareness messaging for 26,112 people. This project was delivered by five volunteers who were trained in gender-based violence prevention and mitigation and led awareness campaigns in the community. The risk of gender-based violence often rises during disasters, when people are forced to flee their homes and lose their traditional support systems and resources.

In South Sudan, CARE increased the ability for people to meet essential needs by transferring USD 79 (CAD 110) of cash assistance to 2,100 households. More than 70 per cent of these households were headed by women. After the project, 95% of recipients reported that their lives were positively impacted by the cash distribution. Most participants reported spending their cash on food.

In Central African Republic, DotW Canada improved access to sexual and reproductive health services in host communities and sites for internally displaced people. After an extensive awareness-raising strategy that engaged 7,678 people, 717 women who were pregnant or breastfeeding benefited from medical consultations and referrals from trained health care staff. DotW Canada also supported eight health facilities with medicines and medical supplies for family planning and sexual and reproductive health, as well as training 48 community health workers and traditional birth assistants. As a result, 3,871 people, including people who live in areas far from formal health facilities, have access to family planning care through trained, community-based health workers.

In Chad, Humanity & Inclusion improved access to rehabilitation services for children and adults affected by this crisis who were in immediate need of rehabilitation. A total of 594 people benefited from rehabilitation and mental health services, including 262 people who received physical and functional rehabilitation sessions and 163 people who received psychological first aid as part of the rehabilitation activity, followed by individual consultations and group therapies. In the communities, 168 caregivers were trained in rehabilitation and mental health and psychosocial support techniques.

In Kenya, Islamic Relief Canada improved access to safe drinking water, sanitation and hygiene for people who were displaced within the country, people who were returning to Kenya and host communities. The project rehabilitated boreholes, benefiting 300 households and 648 school students, including 76 people with disabilities. By installing a solar pumping system and piping water to the community kiosk, the distance women traveled to fetch water was reduced from more than five kilometers to less than 500 meters. This project significantly improved the general health of households and reduced cases of waterborne diseases such as cholera.

In Kenya, Islamic Relief Canada increased access to immediate food security among people who were displaced within the country, people who were returning to Kenya and host communities by distributing cash transfers of KES 12,250 (CAD 127) to 2,800 households, reaching 13,800 people. There were three rounds of these transfers, providing critical resources for families to purchase food at local markets. **Similarly, in Sudan, Islamic Relief Canada increased access to immediate food security** by providing 421 households one-time multipurpose cash support equivalent to SDG 116,000 (CAD 256) so people could purchase food at local markets.

In South Sudan, Islamic Relief Canada improved the skills and knowledge of internally displaced people, returnees and host communities to understand and respond to protection risks. Through broad community outreach sessions, the project reached 900 people with key messages on safeguarding, gender-based violence and peacebuilding. As part of the Engaging Men in Accountable Practices initiative, 30 men participated in awareness-raising and gender-based violence training. Small group sessions on gender-based violence, including prevention, protection and safeguarding, were held with another 30 community participants. The project also provided individual case management services — such as psychosocial support, referrals and counseling — to 89 gender-based violence survivors. In addition, 1,000 women and girls, including 101 people with disabilities, received dignity kits including reusable sanitary pads, underwear, laundry and bathing soap, a solar torch, lotion, a comb and a mirror with a carry bag.

In Sudan, Islamic Relief Canada improved the knowledge of and ability to respond to protection risks among people who were displaced within the country, people who were returning to Sudan and host communities by distributing 325 dignity kits to 217 women and 108 girls. Dignity kits contain essential personal hygiene items designed to help women and girls maintain their health, dignity and privacy. Additionally, psychosocial training was conducted for health workers by trainers from the State Ministry of Health. This training aimed to equip health workers with the necessary skills to support women, girls and boys affected by conflict.

In Ethiopia, Oxfam increased access to safe and adequate drinking water for women, men, girls and boys affected by drought by successfully rehabilitating two water supply systems. These two water supply systems now serve approximately 28,632 people and their cattle. This project established a water, sanitation and hygiene committee at each water access point and provided three days of refresher training for committee members on the operation and maintenance of the water system.

In Ethiopia, Oxfam provided emergency cash grants to meet essential needs for people affected by drought who are internally displaced or part of host communities, with an emphasis on women-headed households. A total of 690 households (4,140 people) each received ETB 7,700 (CAD 86) so they can purchase food and other essential items for their families.

In Chad, Oxfam improved access to water, hygiene and sanitation services for people affected by the crisis by building 65 latrine and shower blocks — separate facilities designed to provide a safe and private area for people to use the toilet and to bathe — reaching 1,300 people across two camps for refugees. The project also strengthened the area's drinking water supply system by constructing a water reservoir and drilling boreholes. Additionally, awareness-raising sessions about good hygiene practices to prevent illness reached 10,800 people.

In Chad, Oxfam increased access to emergency and protective services for people affected by the crisis. The project included 17 awareness sessions for 1,750 refugees on refugee rights, gender-based violence prevention and available community services. The project also set up a protection committee of refugee leaders that included six women and six men. They were tasked with directing people to the appropriate support services in the camp and facilitating ongoing awareness-raising campaigns on various protection issues. Further, solar lamps were distributed to 1,034 households in Mitché camp, which helped people feel safer at night, enabled people to carry out household chores after sundown and helped deter insects and reptiles. A training workshop on gender and the rights of women and young people reached 29 participants, and awareness-raising sessions with 121 leaders focused on the rights of all people, regardless of sex, age, culture, class, religion or disability, to access resources, opportunities and civic participation.

In Chad, Oxfam provided cash assistance to 1,848 people from 445 households. In line with the national Cash Working Group standard, the project made three rounds of cash transfers of XAF 7,000 (CAD 15) per person per round. Participants used the cash to purchase food and other essential items for their families.

In Sudan, Plan International Canada improved access to water, sanitation and hygiene facilities in sites where internally displaced people were living and in host communities. For example, seven drinking water stations were rehabilitated, improving access to safe drinking water for 16,706 people and significantly reducing the amount of time and effort that women and girls spent collecting water. Additionally, the project rehabilitated 123 gender-sensitive latrines and 54 bathing facilities, ensuring dignified and safe access to these facilities for 4,416 people.

Through this project, Plan International Canada reached 3,664 people with hygiene messages to prevent the spread of disease and provided household hygiene kits to 719 vulnerable households, reaching 3,988 people. The project also provided laundry soap to 832 households in four different distributions.

Health campaigns to reduce the spread of mosquitoes and flies were carried out in eight sites where displaced families were living (832 households), as well as in nearby host communities (2,047 households). A further 16,706 people received key messages on how to protect themselves from insect-borne diseases, including using mosquito nets and repellents. In addition, 1,700 insecticide-treated mosquito nets were given to 603 families — one net for every two people — across the eight displacement sites.

Plan International Canada set up and trained eight community water, sanitation and hygiene (WASH) committees with 62 members, including people who were displaced and host community members. The committees received cleaning tools and protective gear to support their work.

In Sudan, Plan International Canada increased access to emergency child protection services and spaces for children and adolescents affected by the crisis. The project provided child protection services to 5,909 children, as well as training for 93 child protection staff members (social workers and volunteer Child- and Adolescent-Friendly Spaces facilitators and supervisors). Additionally, 547 child protection cases were managed effectively and closed. Child protection cases are closed once the child's needs are assessed, a support plan is created, services are provided (like psychosocial support, family tracing or legal help) and there is confirmation that the child is safe and stable. Individual Community-Based Child Protection Committees were established in six sites where internally displaced people were living, and all 93 members were trained on various child protection topics including case management and referrals. Moreover, 2,610 people increased their awareness of topics such as child protection risks and child rights by attending awareness-raising sessions. Lastly, menstrual hygiene management kits were distributed to 300 adolescent girls and women, helping them maintain dignity, comfort and health during the crisis, when such basic supplies are often unavailable.

In Somalia, Save the Children reduced morbidity and mortality for the most vulnerable children under age 5 and their mothers through a variety of activities. For example, 26,498 people were able to access basic health services with the establishment of a permanent health facility and the deployment of a mobile clinic equipped with nurses, medical supplies and equipment. During the project period, 578 children under age 5 were fully vaccinated against diseases that are common for children in Somalia, including measles and polio. Additionally, 295 mothers were vaccinated against tetanus. This prevented the transmission of tetanus from mother to child, which can be deadly for babies. Throughout the project period, 1,189 women were supported with comprehensive maternal health services, including prenatal consultations, delivery services and postnatal consultations. The project reached a total of 442 participants with mental health and psychosocial support services.

In Somalia, Save the Children improved awareness, access and quality of protection and gender-based violence services for groups of people who were most vulnerable. Through this project, 7,427 people were reached. The project provided direct case management support to 136 children who were either experiencing or at risk of protection concerns. The project established peer-to-peer groups consisting of 50 children between 9 and 13 years old, and a group of 40 adolescents between 13 and 18 years old. These groups aimed to provide psychosocial support and recreational activities for girls and boys. Further, by the end of the project, 150 girls received gender-sensitive dignity kits tailored to their specific requirements, including sanitary pads, underwear, washing and bathing soaps, flashlights, and whistles. Save the Children also incorporated key child protection and gender-based violence messages for women into infant and young child feeding sessions, which effectively engaged 6,572 people.

In South Sudan, World Vision increased access to health services for children and families affected by the conflict. The project included both consultations and treatment of common diseases for 34,541 people (26,157 were adults and children over 5 years old, and 8,374 were children under age 5). A total of 2,550 pregnant women received prenatal care services at the transit center. Four women gave birth there with the support of skilled birth attendants. Most prenatal visits were first-time checkups, during which women received health kits to prevent illness — these included items like mosquito nets and soap. In follow-up visits, women were given deworming treatment, iron and folic acid supplements, and Fansidar (for malaria prevention). The project trained 18 people on how to prevent infections, manage neonatal and childhood illness and support maternal, infant and young child nutrition. Additionally, 25 health facility staff were trained on how to provide medical care and support to survivors of sexual violence.

In South Sudan, World Vision increased access to water, sanitation and hygiene services for children affected by conflict and their families. The project built eight water collection tap stands, installed one water storage tank and laid water pipelines, supporting 37,000 people with clean and potable water. Additionally, 6,410 people were provided with access to emergency sanitation services including gender-segregated latrines, bathing shelters and handwashing facilities. Further, 12,173 people were reached with hygiene promotion information. Through this project, World Vision distributed 350 menstrual hygiene management kits, 100 hygiene kits and other items including soap, jerrycans and buckets, to 500 households.

In South Sudan, World Vision increased access to protection services, including protection from gender-based violence, for children who were displaced by conflict and their families. The project reached 4,500 people through its various protection awareness activities. This included establishing two protection/gender-based violence committees with 10 members each. Twenty awareness raising sessions on child protection and gender-based violence issues were delivered, reaching 4,500 people.

World Vision also furnished and supported two child-friendly spaces, benefiting 500 children.

Through this project, World Vision also provided 4,158 people with protection services including referrals, trained 200 service providers on case management, established two help desks, and provided in-kind assistance to 125 survivors of gender-based violence.

In South Sudan, World Vision supported families displaced by conflict by providing cash to 420 households, helping them meet basic needs like food and other essentials.

In the Democratic Republic of the Congo, World Vision provided cash assistance to 400 vulnerable households (2,400 people), prioritizing people who are internally displaced and host community members with severely malnourished children. Each selected household received two installments of CAD 115 to purchase food and other essential supplies.

In the Democratic Republic of the Congo, World Vision improved the skills and knowledge of 30 volunteer community health workers through training on best nutritional practices for infants and young children. The project also equipped these community health workers with locally made handwashing kits and other tools and awareness-raising information for their work in communities. Monthly community awareness sessions on good nutrition and hygiene practices were held with community members. Additionally, 1,800 jerrycans were distributed to 400 households to support safe storage of household water.

COMMUNITY ENGAGEMENT: PARTICIPATION AND ACCOUNTABILITY

The Humanitarian Coalition works closely with communities affected by disasters. We listen to their needs, involve them in decisions and partner with local leaders to plan and carry out projects together. By including community members every step of the way, we ensure that our work is transparent, effective and truly meets their needs. This approach helps build trust, resilience and stronger communities.

KEY CHALLENGES

Challenges met by our member organizations while delivering aid in this context included:

- Growing unmet needs: the demand for humanitarian support far exceeds the resources at the disposal of humanitarians, partly due to the unpredictable flow of people who were newly displaced within their home countries.
- Difficulty accessing operating areas: floods destroyed or cut off road networks, making the delivery of emergency supplies and essential food items to some project operating areas difficult. This was particularly relevant for program activities in Somalia, but also in Kenya and South Sudan.
- Limited pool of qualified technical staff: a short supply of skilled experts, particularly in health and mental health, makes recruitment challenging.
- Rising protection risks: several members of the Humanitarian Coalition report rising safety risks in the project operating areas linked to active conflict and increased displacement.

STORY FROM SUDAN

SEEKING PEACE: GESMA'S STORY

When Gesma's husband proposed to her, she was happy. She would move to Khartoum, far from the bullets that plagued the sky of Darfur every day. She would be safe.

"Unfortunately, the war followed me in Khartoum," begins Gesma. "I remembered the Ab-Shouk camp in North Darfur, where I lived through my childhood – the suffering and tragedy that my family went through when the crisis began in Darfur."

For the second time in her life, the young woman — two children in tow and pregnant with twins — had been forced to flee violence and conflict. She faced a harrowing journey to Sennar, a city on the Blue Nile, once the capital of the Funj Kingdom.

In April 2023, intense conflict between the Sudan Armed Forces and Rapid Support Forces erupted, pushing Sudan to the brink. The repercussions of war have been devastating, claiming thousands of lives, displacing multitudes and ravaging vital infrastructure across the nation. As the conflict rages on, Sennar State emerged as a meeting point for internally displaced persons – and yet, the situation there is equally alarming.

Basic necessities like food, clean water and health services are in critically short supply, exacerbating the suffering of people who are internally displaced and host communities alike. Access to clean water has been severely compromised due to the lack of maintenance for crucial pipelines, forcing households to resort to unsafe drinking water sources and risking waterborne diseases.

Life in the makeshift camp, once a school intended for training midwives, has become a stark reality for Gesma and others like her. With inadequate shelter and amenities, she found herself in Sennar battling illness and uncertainty.

When Islamic Relief Canada arrived to inspect the conditions of people who were internally displaced in the Sennar settlement, Gesma's 5-year-old son appeared and asked if they might assist his sick mother.

"All we are hoping for is health," Gesma told Islamic Relief Canada. "A drink of clean water, a piece of bread for the children and a sleeping mattress."

With support from the Government of Canada through the Humanitarian Coalition, Islamic Relief Canada's cash grant brought tangible relief to Gesma and other displaced families. Gesma used part of the cash assistance to purchase supplies in preparation for the birth of her twins.

"I am thankful for the health services I received in a small, modest room inside the camp," says Gesma. "It came at the right time, it made me and my children happy. It helped me with my childbirth. I thank all those who contributed to the assistance."

As she faces the challenges of living in Sennar, Gesma has used part of the cash assistance she received to establish a joint income-generating project with three other women in the settlement: making and selling falafel and sugar cane. The income is low, she says, but with the money she makes, she can support her young family.

Meanwhile, the birth of Gesma's twins — Watan and Salam, which mean "homeland" and "peace" in Arabic — has brought joy and light to Sennar and offered hope that Sudan's children will not have to grow up far from home.