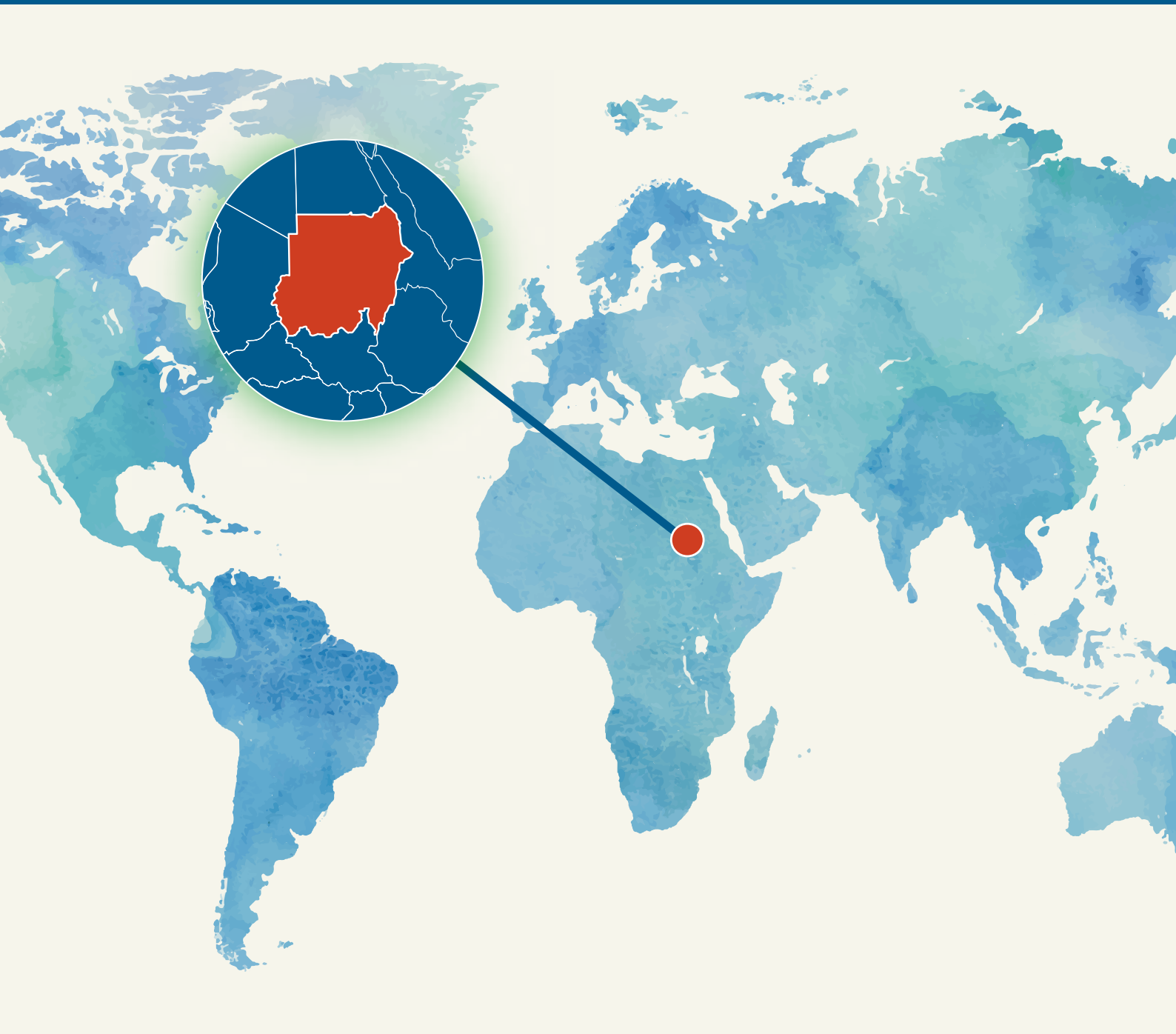


# SUDAN

## Violence Against Health Care in Conflict 2021



# Letter from the Chair



During the past 18 months the list of health care systems that have been destroyed or severely compromised by war-related violence lengthened. Three-quarters of the health facilities in Ethiopia's Tigray region were destroyed or damaged in the conflict that began in November 2020. In the now-forgotten conflict in Gaza in the spring of 2021, 30 health facilities were damaged. In Myanmar the public health system has all but collapsed since the coup in February 2021, because many hospitals have been occupied by the military, while COVID-19, HIV, TB, and malaria programs stalled and 300 health workers were arrested. Then in February 2022 Russia began attacking hospitals, ambulances, and health workers during its invasion of Ukraine. By the end of April 2022, The World Health Organizations confirmed almost 200 such attacks.

The past year was marked by continued international failure to prevent such attacks and hold perpetrators to account. Governments' expressions of horror at the violence continued without being accompanied by action. By the fifth anniversary of the passing of UN Security Council Resolution 2286, in which governments committed to concrete actions to prevent such attacks and increase accountability, very little had been done. Nor did the Security Council consider new course corrections to implement the resolution's requirements.

At the same time, one of the foundations of action, the WHO's systems for tracking attacks, remained inadequate to its function. Except for reporting in Myanmar and Ukraine, where widespread attention increased pressure to collect data, the system severely under-reported incidents. In Ethiopia, despite the effective destruction of the health system and the murder of health workers in Tigray region and other attacks in Afar and Amhara regions, the WHO reported zero attacks in the country for the whole of 2021. This failure no doubt contributed to the lack of global attention to the dire situation in Ethiopia. When the WHO system did report, it continued to withhold information essential to understanding what took place and where attacks occurred.

There were some advances in the area of accountability. Germany obtained a conviction of a Syrian war criminal under principles of universal jurisdiction (although not for crimes involving attacks on health care). The prosecutor of the International Criminal Court (ICC) accepted Ukraine's request to investigate alleged war crimes there. But these cases did not address the continuing structural problem that permits the five permanent members of the Security Council to block certain referrals to the ICC, but nevertheless are a sign that accountability may finally be on the increase.

Perhaps 2022 will be an inflection point, as images and reports of attacks on health care and their consequences in Ukraine continue to go viral, accompanied by frequent and loud demands for accountability – but it won't be if the lassitude of the international community continues.



Len Rubenstein  
*Chair, Safeguarding Health in Conflict Coalition*

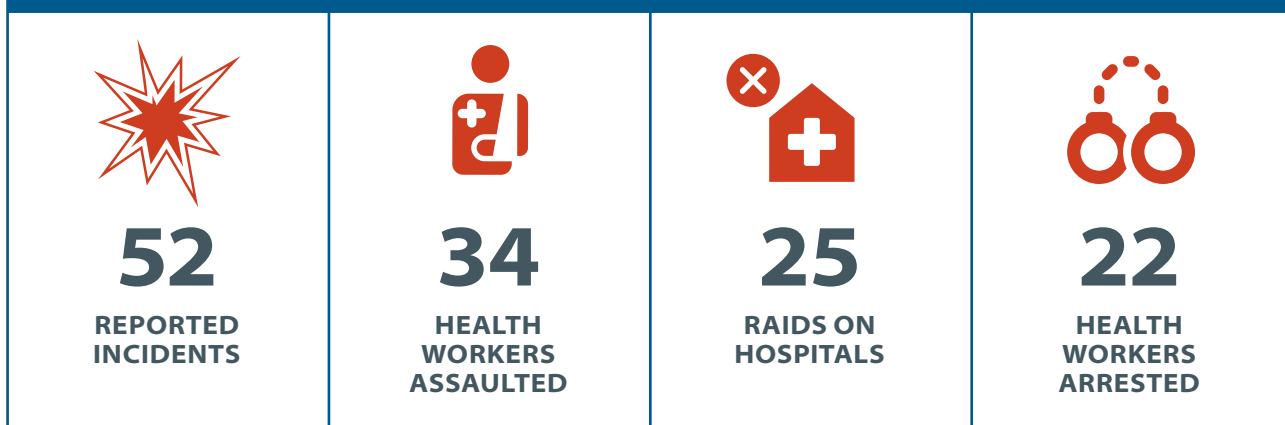
[!\[\]\(6059a5aa8b4ca7bb793408023d6c6e42\_img.jpg\) Methodology | Full Report](#)



On April 3, 2021 a clearly marked MSF ambulance traveling to Al-Fasher Hospital in Jebel Marra, West Darfur state was carjacked. The passengers, who included a pregnant woman, had all their belongings stolen and were left by the roadside. In response to the incident MSF temporarily stopped all referrals to Al-Fasher Hospital until the safety of patients and medical staff could be guaranteed.<sup>1</sup>

On December 30 security forces stormed Khartoum Teaching Hospital in search of injured pro-democracy protesters. During the raid security forces fired large amounts of teargas into the hospital, injuring patients and staff.<sup>2</sup>

## REPORTED INCIDENTS AND MOST COMMONLY REPORTED CONCERNS



↓ Source: 2021 SHCC Sudan Health Data

## OVERVIEW

The Safeguarding Health in Conflict Coalition (SHCC) identified 52 incidents of violence against or obstruction of health care in Sudan in 2021, compared to 15 in 2020. In these incidents 34 health workers were injured and/or assaulted and 22 health workers were arrested. Security forces raided hospitals at least 25 times. Thirty-five incidents were related to the political protests and 17 occurred in the context of the long-standing armed conflicts in Darfur and South Kordofan.

This factsheet is based on the dataset [2021 SHCC Sudan Health Data](#), which is available for download on the Humanitarian Data Exchange (HDX).<sup>3</sup>



## THE CONTEXT

Large-scale anti-corruption protests that began in December 2018 led to the ouster of Sudan’s long-time president, Omar al-Bashir, in April 2019. A political agreement between civilian leaders and the Sudanese military resulted in a Draft Constitutional Charter that laid down a 39-month process that would formally transfer power to the Sovereignty Council of Sudan, led by Prime Minister Abdalla Hamdok. In October 2021 the military initiated a coup d’état and declared a state of emergency. When protests erupted against this move troops used violence against the protesters.

Some medical associations, in particular the Central Committee of Sudanese Doctors, co-led a civil disobedience movement, including operating clandestine clinics in designated safe houses across Khartoum to provide first aid to injured protesters. Pro-military militia employed violence inside hospitals and against clandestine clinics when the latter were located.

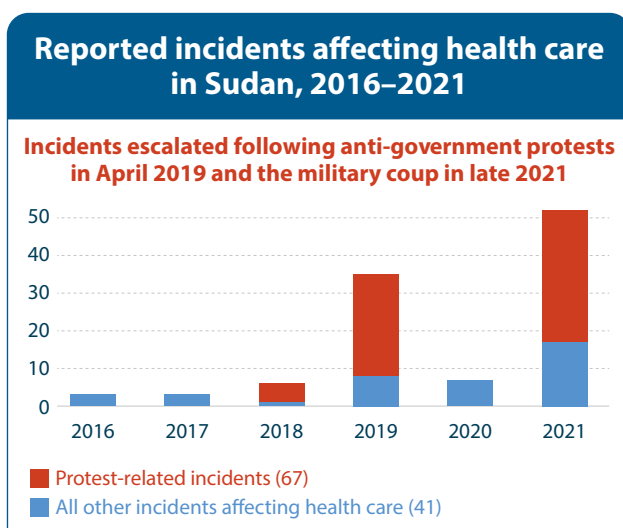
The conflict in the Darfur region of Sudan has been ongoing since 2003, when rebel groups started fighting against the government of Sudan, which they accused of oppressing Darfur’s non-Arab population. The August 2019 Draft Constitutional Declaration defined a peace process that would lead to a peace agreement being signed in Darfur and other conflict-affected regions in Sudan within the first six months of the 39-month transition period to democratic civilian government.<sup>4</sup>

After the withdrawal of the African Union-United Nations Hybrid Operation in Darfur in 2020, attacks in Darfur escalated in 2021, resulting in 430,000 people being forcibly displaced and villages and some displacement camps being attacked and burned.<sup>5</sup>

Following the 2019 revolution peace agreements with various armed opposition groups were signed in 2020 and March 2021 to end these groups’ long-standing conflicts with the Sudan Armed Forces (SAF) in South Kordofan and Blue Nile states.

Since October 2021 violence between nomads and farmers in both Darfur and South Kordofan has increased.<sup>6</sup> The October 2021 coup makes it unlikely that the peace process will continue in the way foreseen in the 2019 Draft Constitutional Declaration.

## VIOLENCE AGAINST OR OBSTRUCTION OF HEALTH CARE IN 2021



In 2021, 52 incidents of violence against or obstruction of health care were reported in Sudan, compared to 15 in 2020. Prior to the October 25 coup most attacks on health care in 2021 were perpetrated by non-state actors or militia. After the coup violence against health care escalated sharply in the context of anti-coup protests. Violence against health workers resulting from security forces’ efforts to end political protests had already been highlighted by the SHCC during the protests calling for the resignation of President Bashir in April 2019, underlining how the tactics of elements in the security forces continued to be applied in similar ways after the coup.



## Protest-related violence



The protests that erupted following the October 2021 coup immediately affected health care. On October 25 – the day of the coup – two doctors were shot and killed by state security forces during a Million of Marches protest in Khartoum.<sup>7</sup> In total, 35 protest-related incidents impacting health care were reported in Sudan in 2021. The vast majority were recorded in Khartoum state, but were also documented in North Kordofan, Red Sea, Sennar, and Kassala states.

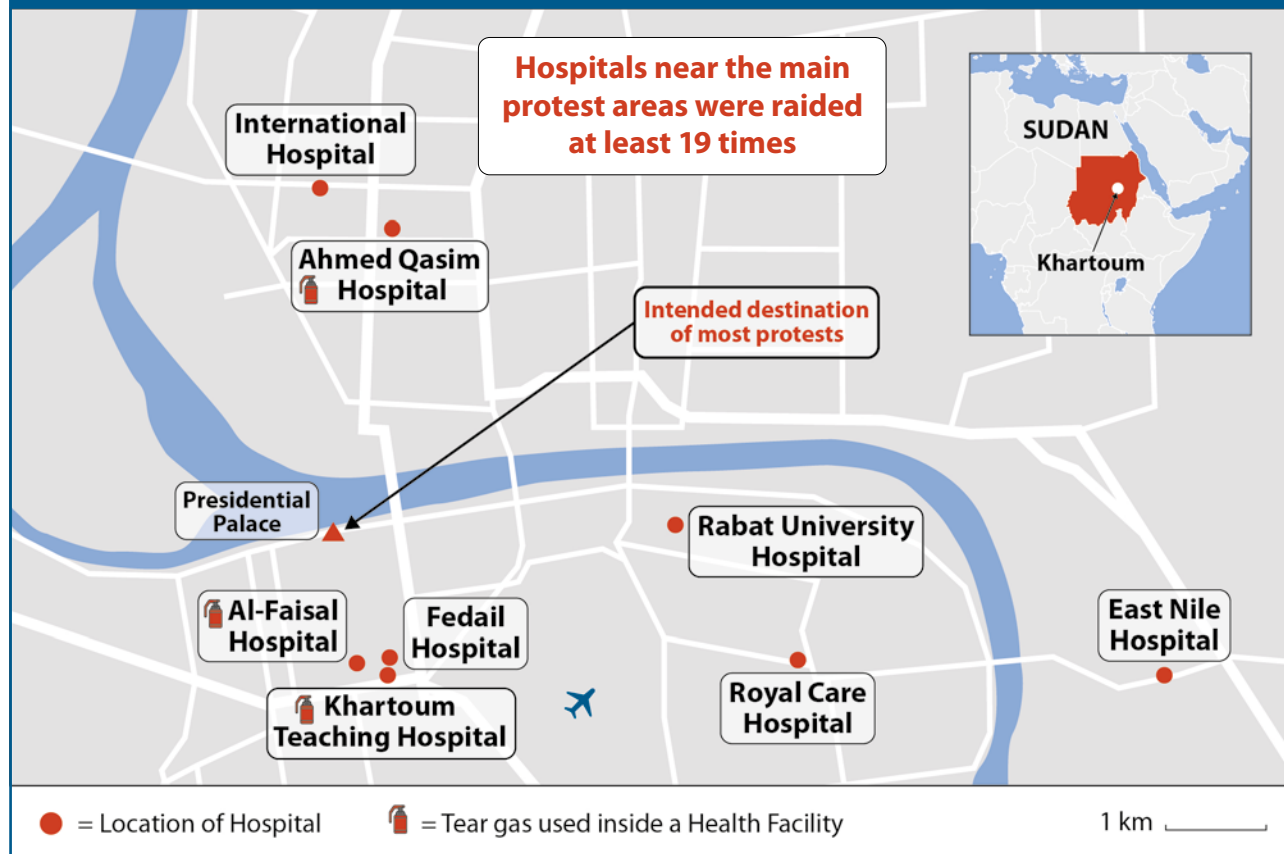
Between October 25 and December 31, 2021 **state security forces** raided hospitals in search of injured protesters at least 25 times in the cities of Khartoum and Omdurman and in North Kordofan state, which were all sites of major demonstrations.



Doctors, psychologists, nursing specialists, and other health care personnel were injured and arrested during these raids. On November 17 – the deadliest day of the protests – security forces reportedly arrested 15 doctors at the Royal Care Hospital in Khartoum and El Arbaeen Hospital in Omdurman,<sup>8</sup> and at least 15 protesters were reportedly shot and killed by security forces during mass protests that occurred throughout the country.<sup>9</sup> There were also reports of police officers sexually assaulting female doctors.<sup>10</sup>

Security forces violently entered East Nile Hospital, El Arbaeen Hospital, Fedail Hospital, and Khartoum Teaching Hospital multiple times. Some of these facilities were located along major protest routes and a few blocks from the Presidential Palace, the intended destination of many protests.

## Street map showing hospitals raided during protests in Khartoum between October 25 and December 31, 2021





State security forces fired tear gas into and inside hospitals seven times between October 25 and December 31, 2021. The emergency room at the Khartoum Teaching Hospital was subjected to tear gas attacks three times, on November 21, December 25, and December 30.<sup>11</sup> In another incident on December 30 security forces fired tear gas inside El Arbaeen Hospital in Omdurman and attempted to seize the bodies of civilians killed during protests.<sup>12</sup>

The tear gas caused severe breathing difficulties among health workers and patients.<sup>13</sup> Deaths from tear gas exposure occurred, especially among people with predisposing lung conditions.<sup>14</sup> The emergency room at Khartoum Teaching Hospital is reportedly close to the intensive care unit and neonatal department, where patients are particularly vulnerable to the effects of tear gas exposure. Security forces had previously used tear gas in medical facilities during the 2019 protests.

State security forces also routinely blocked ambulances from reaching injured protesters and prevented them from transporting such protesters. In addition, protesters held in detention were denied medical treatment. In East Darfur five government officials who were infected with COVID-19 in prison, where they were held following the coup, were denied transfer to the nearby COVID-19 hospital by the Rapid Support Forces, a special SAF unit.<sup>15</sup> One of these officials was the director of the state's health ministry.

## Conflict-related violence

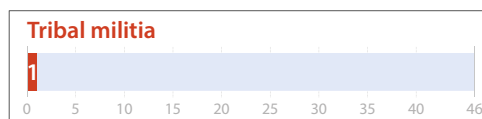


Armed tribal militias and unidentified non-state armed groups were the main perpetrators of violence against or obstruction of health care in the Darfur and Kordofan regions. In most cases these perpetrators were armed with firearms, and on one occasions with a rocket-propelled grenade.

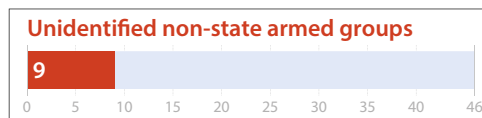
In Rokero town, Central Darfur state fighting between **rival sections of the Sudanese security forces** resulted in armed soldiers from both sides violently forcing their way into an MSF-supported health facility in May, severely injuring a nurse during the ensuing gunfight.<sup>16</sup>



**Tribal militias** attacked a hospital in Geneina city, West Darfur with a rocket-propelled grenade and used the same type of weapon against an ambulance during clashes between Masalit and Arab militias in early April.<sup>17</sup>



**Unidentified non-state armed groups** in North Darfur ambushed an INGO ambulance transporting a pregnant patient to Al-Fasher Hospital in April.<sup>18</sup> In West Darfur members of an armed group assaulted health workers at Morni Rural Hospital in August. In December **gunmen** blocked roads and attempted to seize medical supplies from a convoy traveling to treat victims of an earlier attack.<sup>19</sup> In South Kordofan state **gunmen** on motorcycles stole solar panels from the El Abbasiya Hospital.<sup>20</sup>





## IMPACT ON HEALTH SYSTEMS AND ACCESS TO HEALTH CARE



### Health services

Protest-related violence and the conflict in Darfur compounded the already low availability of qualified health personnel and health care workers in Sudan. Statistics show that there are only 0.76 health personnel (doctors, nurses, and midwives) per 1,000 population across Sudan, while the WHO health workforce target requirement for universal health coverage is 4.45 per 1,000 population. The lowest ratios of medical professionals per 1,000 people were reported in areas experiencing the highest level of violence, such as White Nile, West Kordofan, East Darfur, North Darfur, and Central Darfur states.<sup>21</sup>

In West Darfur several facilities suspended their activities during the last quarter of 2021.<sup>22</sup>



### Access to health care

Violent searches of and the use of tear gas in health facilities disrupted care for patients. The repeated attacks on the Khartoum Teaching Hospital disrupted critical care for newborns.

Poor access to health care contributed to the spread of diseases. In east Sudan cases of hepatitis E increased rapidly. Spread by dirty water and poor sanitation, hepatitis E is particularly serious in pregnant women, killing 25% of those it infects.

There are also concerns that routine childhood vaccination programs will soon be negatively impacted, with an ensuing rise in preventable infectious diseases.<sup>23</sup>



- 1 Insecurity Insight. Safeguarding Health in Conflict Coalition 2022 Report Dataset: 2021 SHCC Sudan Health Data. Incident number 27338.
- 2 Insecurity Insight. Safeguarding Health in Conflict Coalition 2022 Report Dataset: 2021 SHCC Sudan Health Data. Incident number 30703.
- 3 Six incidents that had not been reported elsewhere were reported by the WHO Surveillance System for Attacks on Health Care (SSA).
- 4 [https://en.wikipedia.org/wiki/2019\\_Sudanese\\_transition\\_to\\_democracy#4\\_August/17\\_August\\_Draft\\_Constitutional\\_Declaration](https://en.wikipedia.org/wiki/2019_Sudanese_transition_to_democracy#4_August/17_August_Draft_Constitutional_Declaration).
- 5 <https://www.hrw.org/news/2021/12/15/sudan-new-wave-attacks-darfur>.
- 6 <https://reports.unocha.org/en/country/sudan/card/3sJXsKnIOf/>.
- 7 Insecurity Insight. Safeguarding Health in Conflict Coalition 2022 Report Dataset: 2021 SHCC Sudan Health Data. Incident number 29740.
- 8 Insecurity Insight. Safeguarding Health in Conflict Coalition 2022 Report Dataset: 2021 SHCC Sudan Health Data. Incident number 30023.
- 9 <https://www.reuters.com/world/africa/mobile-phone-lines-inside-sudan-are-cut-before-planned-protests-2021-11-17/>.
- 10 Insecurity Insight. Safeguarding Health in Conflict Coalition 2022 Report Dataset: 2021 SHCC Sudan Health Data. Incident number 30718.
- 11 Insecurity Insight. Safeguarding Health in Conflict Coalition 2022 Report Dataset: 2021 SHCC Sudan Health Data. Incident number 30308; 30628; 30703.
- 12 Insecurity Insight. Safeguarding Health in Conflict Coalition 2022 Report Dataset: 2021 SHCC Sudan Health Data. Incident number 30705.
- 13 <https://www.theccsd.org/post/570>.
- 14 <https://www.theccsd.org/post/543>.
- 15 Insecurity Insight. Safeguarding Health in Conflict Coalition 2022 Report Dataset: 2021 SHCC Sudan Health Data. Incident number 29767.
- 16 Insecurity Insight. Safeguarding Health in Conflict Coalition 2022 Report Dataset: 2021 SHCC Sudan Health Data. Incident number 27778.
- 17 Insecurity Insight. Safeguarding Health in Conflict Coalition 2022 Report Dataset: 2021 SHCC Sudan Health Data. Incident number 27725.
- 18 Insecurity Insight. Safeguarding Health in Conflict Coalition 2022 Report Dataset: 2021 SHCC Sudan Health Data. Incident number 29955.
- 19 Insecurity Insight. Safeguarding Health in Conflict Coalition 2022 Report Dataset: 2021 SHCC Sudan Health Data. Incident number 30511.
- 20 Insecurity Insight. Safeguarding Health in Conflict Coalition 2022 Report Dataset: 2021 SHCC Sudan Health Data. Incident number 29289.
- 21 <https://reliefweb.int/report/sudan/sudan-humanitarian-needs-overview-2022-december-2021>.
- 22 <https://reliefweb.int/report/sudan/sudan-humanitarian-snapshot-september-2021-18-october-2021>;  
<https://www.hrw.org/news/2021/12/15/sudan-new-wave-attacks-darfur>.
- 23 <https://www.bmj.com/content/376/bmj.o241>; <https://news.un.org/en/story/2022/01/1109612>.



# SAFEGUARDING HEALTH IN CONFLICT

The Safeguarding Health in Conflict Coalition is a group of more than 40 organizations working to protect health workers and services threatened by war or civil unrest. We have raised awareness of global attacks on health and pressed United Nations agencies for greater global action to protect the security of health care. We monitor attacks, strengthen universal norms of respect for the right to health, and demand accountability for perpetrators.

[www.safeguardinghealth.org](http://www.safeguardinghealth.org)

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