

How the conduct of conflict affects food security and health care in Sudan:

Insights and recommendations to enhance civilian protection, food security and access to health care

15 April 2026 marks three years of civil war in Sudan in which conflict, violence and lack of respect for international humanitarian law (IHL) have degraded food and health care systems and disrupted access to life-saving humanitarian aid.

Food security is a major concern during this war. Between February and May 2026, 19.1 million people are projected to experience high levels of acute food insecurity (IPC Phase 3 or above).¹ Insecurity Insight's monitoring of violent events showed an alarmingly high rate of conflict incidents affecting the food system, with violence at markets reported in at least 283 incidents as well as incidents of cattle looting and killing and attacks on civilians growing food, selling or buying food reported in high numbers.

Health needs are also high throughout the country. As of March 2026, two out of three people in Sudan no longer have access to essential health services and 80% of hospitals are out of service in affected areas.² Insecurity Insight's monitoring found that at least 175 health workers have been killed and at least 183 health facilities reportedly damaged and destroyed, with hospitals across Sudan affected.

From the start of the conflict on 15 April 2023 to 31 December 2025, Insecurity Insight recorded 1,754 incidents of violence impacting food security, health care and humanitarian aid. The lack of protection of vital civilian infrastructure is a driver of escalating humanitarian needs across Sudan. This brief identifies trends and recurring patterns within the recorded incidents of conflict violence, highlights how the conduct of hostilities contributes to creating humanitarian needs, and provides insights into anticipating them. It also provides a list of actionable and practical recommendations in service of sustaining international action to mitigate harm.

Key Findings

1. From the start of the conflict on 15 April 2023 to 31 December 2025, Insecurity Insight recorded 1,754 incidents of violence impacting food security (870 incidents), health care (710 incidents) and aid operations (174 incidents).
2. Violence affecting food systems is widespread and systematic. Violence at markets was the most frequently recorded form of violence across all forms of violence during the recording period. The most frequently recorded categories of violence were: violence at markets (283 incidents); health care facilities damaged and/or destroyed (183 incidents); attacks on people carrying out food-related activities (181 incidents); livestock being looted or killed (137 incidents); and health care workers being killed (135 incidents). Food-related activities refer to any activities that fall within the food system ecosystem, including the production, sale and purchase of food or foodstuffs. Individual incidents often involved multiple victims and losses, such as in July 2024 when 200 heads of cattle were looted during one incident in Dar As Salam, North Darfur, and in May 2025 when at least 6 health workers were killed and 15 injured in one incident in El Obeid city, North Kordofan state.
3. Health workers and facilities have been heavily impacted, with at least 175 health workers killed and 183 facilities damaged or destroyed, reducing the capacity of the health care system to respond to high levels of physical and psychological harm caused during the conflict.
4. National staff across the food, health and aid sectors bear the overwhelming burden of risk in frequency and severity of violence, including killing, injury, kidnap and arrests.
5. At least 174 incidents involving aid workers being killed, injured, kidnapped or arrested were recorded, with some incidents involving multiple victims. Between April 2023 and December 2025, at least 157 aid workers were killed in 103 incidents. Aid workers were killed by firearms, drone strikes, and shelling while travelling in convoys, inside aid premises, within refugee or displacement camps, and during the delivery of aid operations and distributions.
6. Sieges, blockades, and administrative restrictions have severely limited access to food, health care, and aid, contributing to worsening humanitarian conditions, including famine risk.
7. The impacts of conflict are compounding and long-term, with damage to infrastructure, livelihoods, and services continuing to affect food security and health outcomes beyond immediate incidents.
8. An anticipatory mindset and data-driven approach is essential. Patterns of harm are predictable and preventable.

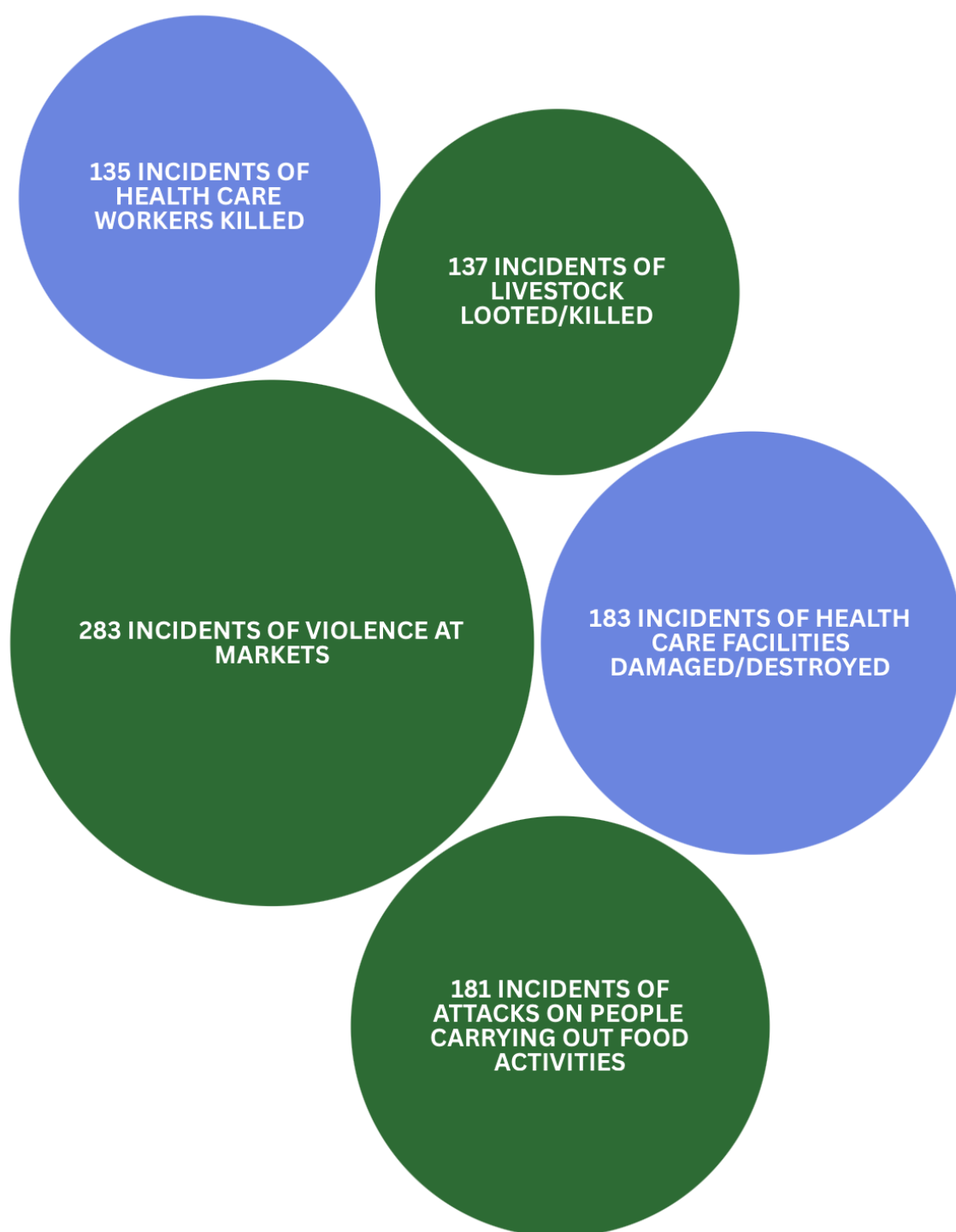
International Humanitarian Law and the protection of food systems, health care and aid operations in Sudan

Attacks on health care and food-related infrastructure in Sudan reflect a broader pattern of harm to civilian objects, raising serious concern under IHL. Health workers, facilities, and transports are afforded special protection and must be respected and protected at all times. Food systems, including markets and agricultural areas, are also protected under IHL as objects indispensable to the survival of the civilian population. Additionally, aid workers, who are civilians under IHL, are also protected against attack, unless and for such a time they directly participate in hostilities. IHL also provides protection to humanitarian operations and prohibits the disruption and interference of humanitarian operations. Conflict parties must ensure that humanitarian relief is facilitated and unimpeded and access constraints may contribute towards the denial of objects indispensable to the survival of the civilian population (such as food assistance). In Sudan, where the majority of the population is dependent on humanitarian aid, the disruption of relief operations has foreseeable and severe humanitarian consequences, reinforcing the obligation on all parties to facilitate safe, sustained and unimpeded humanitarian access.³

Violence at markets was the most frequently recorded category of violence across 1,754 incidents from April 2023 to 31 December 2025

Figure 1: The most frequently recorded categories of violence

Numbers in brackets indicate incidents of violence. Individual incidents often involved multiple victims and losses, such as in July 2024 when 200 heads of cattle were looted during one incident in Dar As Salam, North Darfur, and in May 2025 when at least 6 health workers were killed and 15 injured in one incident in El Obeid city, North Kordofan state.



Conduct of hostilities directly affecting the food system

Conflict disrupts local food systems and makes food production, distribution and purchase more challenging. The conduct of hostilities can aggravate general impacts when the food system infrastructure is destroyed and people feel more vulnerable when seeking food. Understanding the extent to which food systems are disrupted is a fundamental component of addressing food insecurity.

Violence at markets: Violence at markets was the most common form of food-related violence recorded at 238 incidents, with incidents peaking at 147 in 2024. This type of violence, such as attacks on marketgoers, looting of supplies, armed fighting between groups and airstrikes, interrupts a vital element in the food system by adding barriers that inhibit the purchase and sale of goods, in turn undermining local and sustainable food production and access. This type of violence was carried out predominantly by the RSF and SAF at almost identical rates, with the RSF attributed to 111 incidents and the SAF attributed to 107 incidents. However, violence at markets constituted the majority of the SAF's overall food-related violence, whereas it constituted one element among a broader range of violence carried out by the RSF, whose reported actions degraded the food system [2.1][3.1] in a comparatively more diverse manner.

Livestock looted/killed: The looting and killing of livestock, recorded in 137 incidents, deprives communities of their livelihood sources. The violence against pastoralists that is frequently involved in these incidents can trigger forced displacement among vulnerable communities in search of reliable income required to feed their families. Negative coping strategies such as selling livestock and other productive assets may result. In cases where livestock are looted for ransom, any financial gain acquired through this method could fund the activities of armed units who carry out further acts of violence that undermine the food system. In addition to being one of the most frequently observed forms of violence, the impact is deepened by the scale of loss observed during single incidents. Incidents of livestock looting occasionally involved a substantial number of livestock at a time, such as the looting of around 2,000 cattle by the RSF in September 2025 in North Kordofan, and looting for ransom, such as in October 2024 when the RSF looted 650 heads of cattle in South Kordofan, reportedly demanding 10,000-50,000 SDG for their release. This form of food-related violence was most frequently carried out by the RSF, who were reportedly attributed to approximately 45% of incidents within this category (61 incidents).

Attacks on people carrying out food activities: This form of violence, recorded in 181 incidents, relates to any person carrying out activities that fall within the food system ecosystem, including the production, sale and purchase of food or foodstuffs. A high number of these incidents occurred while civilians were carrying out livelihood activities, such as abducting farmers working on agricultural fields or at market stalls. Heightened civilian vulnerability to conflict violence when working the land or buying or selling food undermines the local, accessible and sustainable food systems and leads to an over-reliance on humanitarian aid to address the subsequent needs of the affected populations.

Farmers and pastoralists who resisted the looting of their livestock and volunteers/staff at community food kitchens were particularly vulnerable to violence, highlighting how the defence of local food systems has been highly vulnerable to attack. Over half of these incidents were attributed to the RSF, highlighting the significant and direct threat the group poses to the food system at all levels, from production to purchase, as well as economic stability and livelihood security for the population.

Forms of violence differed between population groups. For example, women and children were particularly vulnerable to conflict-related sexual violence (CRSV) while travelling to and from markets and whilst conducting agricultural work. The majority of recorded incidents of attacks involving sexual violence during food-related activities were attributed to the RSF, but reported perpetrators also included the Darfur rebels and the SAF. Several instances of sexual violence involved large numbers of victims, highlighting the wide-ranging scale and impact of a single event. For example, in May 2023, members of the RSF reportedly raped and sexually assaulted five families in a market and surrounding areas in Khartoum and, in November 2024, 21 women, including children and elderly women, were raped at gunpoint by members of the RSF while on their way to farms to harvest crops. Such traumatic events contribute to further undermining food systems and food security in complex ways, including serving as barriers to participating in agricultural work and attending markets due to psychological and physical harm and the risk of repeated incidents of violence.

The destruction of the health system from conflict

Health needs rise and change during conflict. War injuries and increasing levels of conflict-related sexual violence (CRSV) increase the need for specialised services. Other health needs often rise as a result of poor public health and increased vulnerability, including from poor nutrition. All other health needs for chronic illness and maternity services continue to require attention. Conflict violence damages and destroys the health system, increasing health needs and requiring urgent action to prevent further long-term impacts.

Health care facilities damaged/destroyed: Prior to the conflict, Sudan had an estimated 6,500 primary health care facilities and 300 public hospitals across the country. Since the onset of the conflict, Insecurity Insight has documented at least 183 attacks reportedly damaging health facilities, with hospitals across Sudan affected. The majority (75%) of incidents where hospitals reported damage or destruction to facilities were caused by explosive weapons, including artillery, airstrikes delivered by planes or drones, missiles, mortars or rockets. Some hospitals, like the Saudi Maternity Hospital in El Fasher and Bashair Teaching Hospital in Khartoum, were struck multiple times.

Attacks on health facilities coincided with fighting and it is estimated that about **70-80% of health facilities** in areas affected by conflict are barely functioning or have closed, depriving millions of people of access to health care. In 2023, when fighting was highly concentrated in Khartoum there was a spike in incidents of health facilities being damaged or destroyed primarily by explosive weapons, including artillery shelling, missiles, mortars and airstrikes delivered by planes or drones. Whilst in 2024, there was a spike of incidents in North Darfur, particularly around El Fasher, as fighting intensified as the RSF attempted to gain control of the city. In 2025, an increase in incidents in North and South Kordofan. In Khartoum, some hospitals were struck because they were reportedly treating injured soldiers. Whilst others were struck after being repurposed by opposing forces.

Health care workers killed (135 incidents): Health care workers were reportedly killed in 135 incidents, with at least 175 health workers losing their lives. Doctors were the most frequently affected profession, accounting for almost half of those killed (85 doctors) across 63 separate incidents. These losses further deplete an already limited skilled health workers, which even prior to the conflict was low, with approximately 2.5 medical doctors per 10,000 people and 10.83 nurses and midwives per 10,000 people. The training of health professionals requires many years, meaning that those lost cannot be easily or quickly replaced. Even before the war, there was a shortage of specialised and international doctors, who often played a critical role in providing essential services.

The impact of conflict on aid operations

From the onset of conflict, aid organisations immediately came under attack. The reported direct harm to international non-governmental organisations (INGOs) was frequent during the first three months following the outbreak of hostilities in April 2023, when multiple aid premises were looted by conflict actors, leading to the evacuation of international staff, and the ending of employment contracts for national staff, reducing the aid workforce overall.

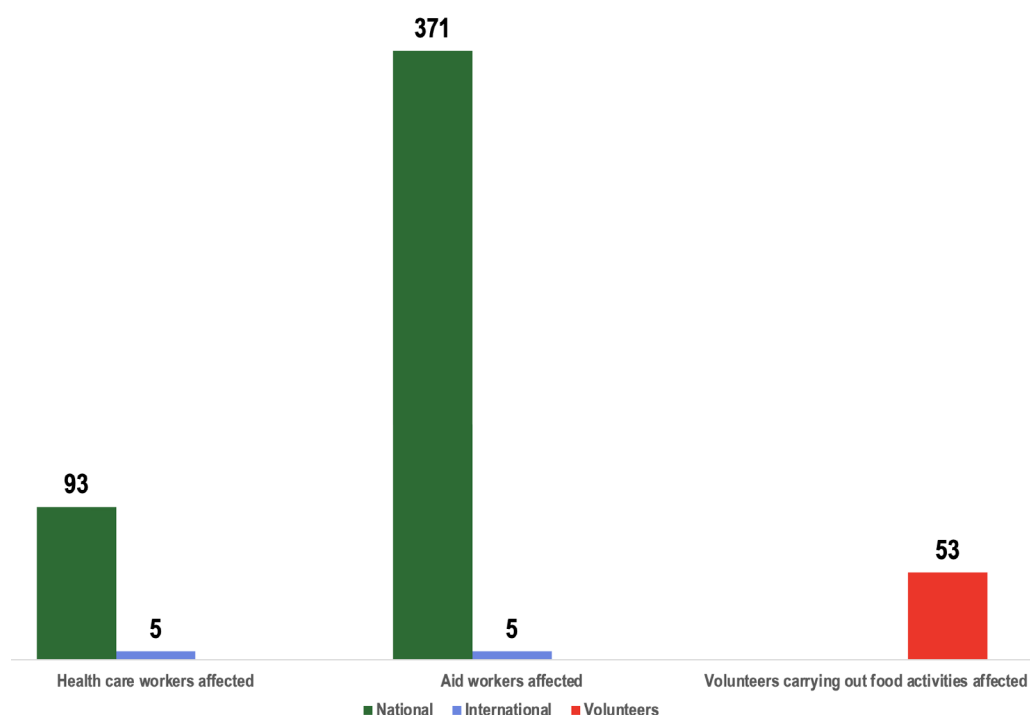
Attacks on aid workers: Between April 2023 and December 2025, at least 157 aid workers were killed in 103 incidents. Aid workers were killed by firearms, drone strikes, and shelling while travelling in convoys, inside aid premises, within refugee or displacement camps, and during the delivery of aid operations and distributions. These attacks significantly reduced the aid workforce, disrupting the delivery of life-saving assistance and limiting the ability of organisations to operate safely and effectively. The loss of experienced personnel further constrains the operational capacity of aid organisations, delays response efforts and increases the vulnerability of the affected communities who are increasingly reliant on humanitarian support.

Severe hardship for local aid workers: Community kitchens also repeatedly came under sustained attack. Between April 2023 and December 2025, at least 19 incidents affecting community kitchens were reported, the majority occurring in 2025 when communities were most reliant on them due to prolonged conflict and the widespread destruction of food systems. These attacks forced many kitchens to close or suspend operations.

Figure 2: Graph showing incidents of members of critical workforces killed, injured, kidnapped and arrested, displaying the disparity in harm between international and national workers.

National staff and local volunteers bear the overwhelming burden of risk in frequency and severity of violence, including killing, injury, kidnap and arrests. In addition, national staff and volunteers are often at a disadvantage when working for international organisations when they are contracted workers or volunteers rather than employees. International employees frequently experience associated benefits, such as higher salaries, life insurance policies, and emergency evacuation plans compared to those operating on temporary contracts with limited support for themselves and their families if they are injured or killed at work, as well as higher levels of job insecurity. These vulnerabilities are even more pronounced among local volunteers, who often take on the burden of addressing the gap in needs created by attacks on food systems, health care systems and aid operations.

Funding cuts have impacted both international and national staff, with less funding available to ensure comprehensive hostile environment awareness training (HEAT) and other measures crucial to effective preparation to be working in an environment with high levels of security risk. In addition to less comprehensive and effective security risk management, funding cuts impact organisations' ability to operate and obtain necessary supplies such as medications and foodstuffs.



There is an urgent need to develop more equitable access to protective mechanisms and coverage for critical local aid personnel to address the heightened vulnerabilities they face while supporting communities in need in high-risk environments and during crises.

Attacks on aid operations and access restrictions: Violence and obstructions to humanitarian access have severely curtailed aid operations. Throughout Sudan, different actors with varying degrees of power, consent and governance control have impacted the delivery of and access to humanitarian aid through a variety of measures including checkpoints, access restrictions and restricting the movement of local populations. Across Sudan, food and nutrition programmes were severely affected, with convoys attempting to deliver food assistance and other essential supplies repeatedly attacked, obstructed, or denied access, particularly as conflict actors gained control over key supply routes. North Darfur, especially El Fasher city, Zamzam and Abu Shouk camps, were among the hardest hit as RSF forces placed these areas under siege, preventing humanitarian convoys from reaching affected communities. As a result, famine was confirmed in Zamzam camp by **August 2024**.

Overall, at least 54 incidents affecting humanitarian convoys were reported. These included drone attacks that destroyed or severely damaged vehicles, killing at least eight aid workers and injuring others. At least 25 vehicles carrying medical supplies and food were stolen or hijacked, while convoys were repeatedly obstructed and prevented from reaching affected communities. Access restrictions impact aid operations and civilians in multiple ways:

- In July 2024, residents of Abu Shouk IDP Camp in El Fasher, North Darfur state, were prevented from going to the markets in order to prevent the transfer of information about RSF movement in the camp to the SAF.⁴
- In September 2024, 30 humanitarian aid trucks were prevented from entering RSF-controlled areas by the SAF.⁵
- In November 2024, a humanitarian food aid convoy heading towards Zamzam IDP Camp in El Fasher, North Darfur state, was stopped and seized by the RSF.⁶
- In January 2025, an aid worker at local NGO (LNGO) was arrested by the RSF in South Darfur state reportedly for working and conducting activities without the permission of the group.⁷

Damage to critical food production and humanitarian infrastructure: In May 2023, the Samil Food Factory in Khartoum, responsible for producing 60% of ready-to-use therapeutic food supplied to UNICEF and WFP for treating malnourished children, was burnt down. While in April 2023, a UN Humanitarian Air Services (UNHAS) aircraft was damaged at Khartoum International Airport, disrupting the movement of humanitarian personnel and aid across Sudan.

Harmful narratives undermine approaches to neutrality and aid acceptance

Social media has assumed an important role in the conflict in Sudan and social media narratives increasingly shape perceptions about humanitarian organisations and can influence operational access and staff safety. As online discourse becomes more central to how aid is understood and contested, finding ways to articulate humanitarian principles in social media-appropriate language is an important component to maintain aid acceptance through strengthened communication with conflict-affected communities.

Figure 3: Example of harmful narratives undermining approaches to neutrality and aid acceptance

Social media users with a clear bias towards the SAF circulated the image showing RSF soldiers attacking and damaging medical buildings, which are represented by text boxes with plumes of smoke rising from them.

In the foreground is a representation of the Sudanese Doctors' Syndicate, depicted as burying its head in the sand. The medical buildings represented by the text boxes are Khartoum Hospital, a maternity hospital, and a laboratory, which likely refers to the National Public Health Laboratory in Khartoum, reportedly occupied by RSF forces in late April 2023[4.1].

This image captures sentiments, widespread among SAF supporters in Khartoum and active on social media, promoting opinions that the Doctors Syndicate chooses to turn a blind eye to crimes committed by RSF soldiers, suggesting that it supports the RSF after a press release that confirmed their neutral stand in the conflict.



Monitoring: Insecurity Insight⁸

Incidents over time and reverberating effects

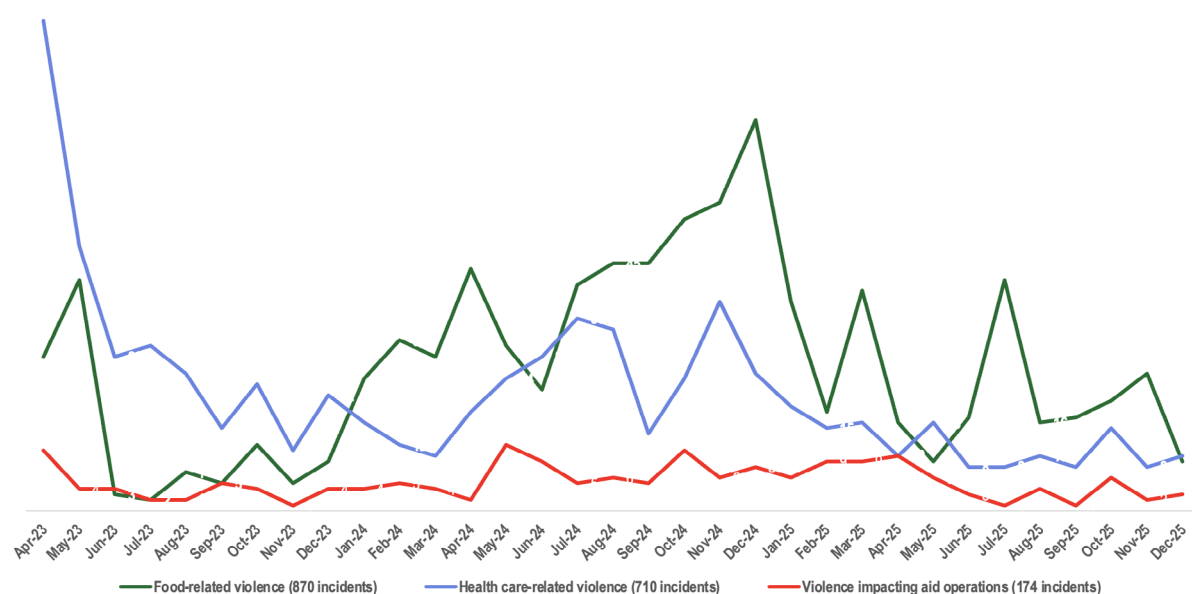
Many effects of violent incidents occur at the time of the incident itself, as observed in cases such as damage to hospitals that disrupt health services or the looting of food aid. In addition to immediate consequences, such as the death and injury of health care workers, it can take weeks, months or even years for the full impact of many incidents to unfold. For example, the consequence of the destruction of a warehouse storing medicine will be felt at a future date, when the stocks in health facilities have been used up. When fields are no longer worked on due to the displacement of farmers, the impact on food stocks is felt months later when there is no harvest.

Figure 4: Incidents of violence over time (April 2023- December 2025)

Even as incident numbers decrease, the full impact and reverberating effects of violent events can take weeks, months, or even years to be realised. After an initial peak at the start of the conflict, food system-related incidents grew over a whole year from November 2023 to 2024, creating the conditions that resulted in over 21.2 million people experiencing high levels of acute food insecurity (IPC Phase 3 or above) and famine (IPC Phase 5) in El Fasher town, North Darfur state and Kadugli, South Kordofan state by September 2025.⁹

A peak in recorded incidents of health care-related violence in April 2023, at 89 recorded incidents from 15-30 April alone, follows a commonly observed trend across contexts of peaks in the number of attacks during the immediate or early stages of conflict or with major conflict escalations.¹⁰

Violence against the aid systems trying to mitigate the impact of the conflict violence has been a permanent feature of the conflict, preventing humanitarian assistance from saving lives.



Levels of food security and positive health outcomes do not necessarily rise and fall concurrently with the rise and fall of conflict incidents that affect food or health systems directly. If health facilities are not repaired or farmers cannot return to their land, the reduction in the frequency of violence does not guarantee a return to food security or functioning health care systems. Aid becomes essential to address the needs of the population under these circumstances. The destruction of local food and health care systems can lead to high levels of avoidable deaths and dependency on aid. When aid blockades and violence against aid occur in this context, they can drive starvation.

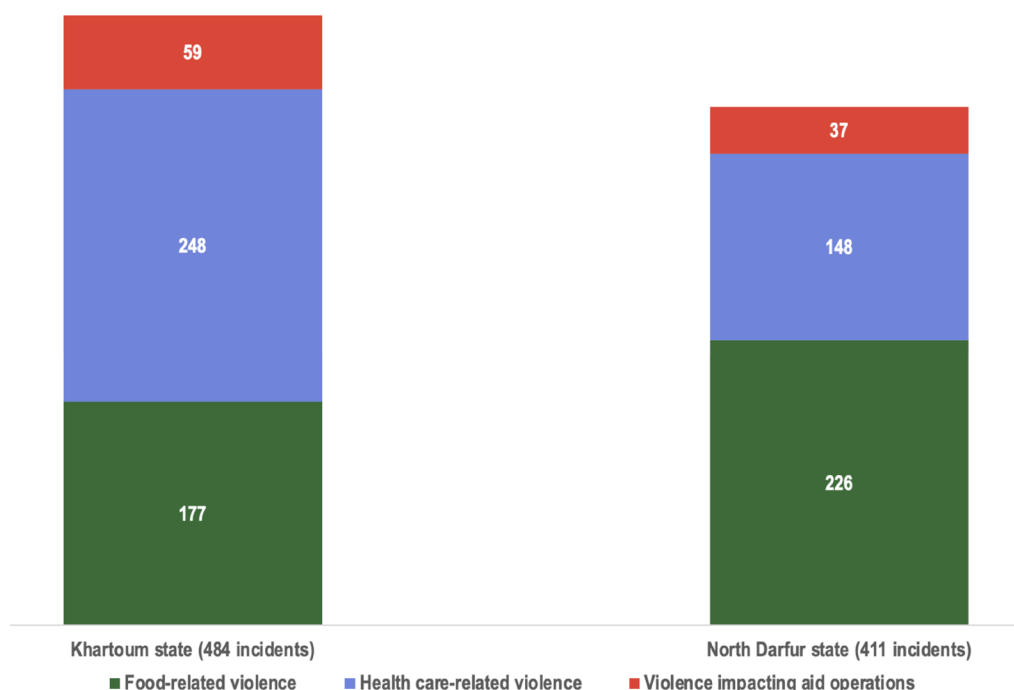
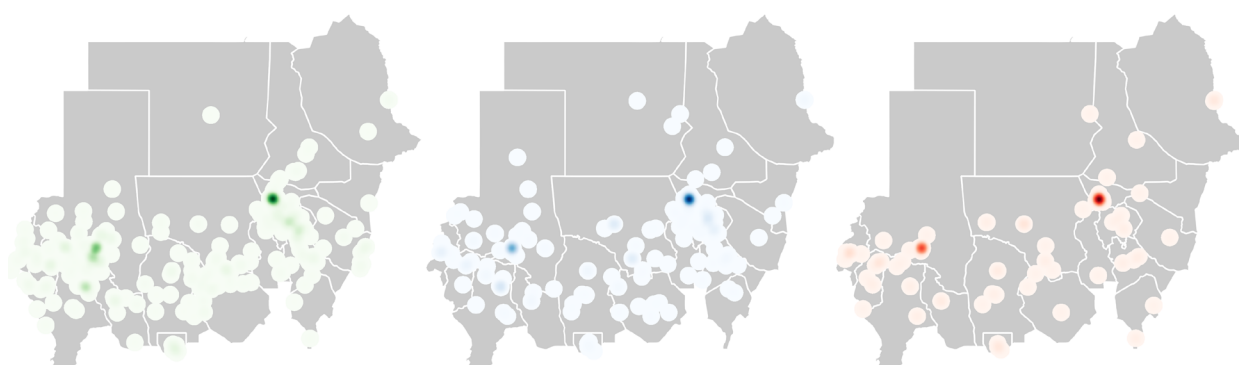
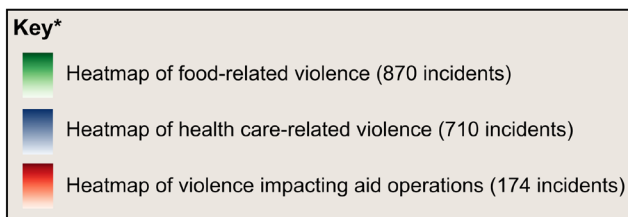
Every single conflict incident that affects vital civilian services needs to be understood from the perspective of its immediate, long-term and cumulative impact on the functioning of essential local services.

Figure 5: Geographic concentration of incidents: The highest number of violent incidents affecting food systems, health care and aid operations were recorded in Khartoum state and North Darfur state

1,754 incidents of violence recorded in Sudan (April 2023-December 2025)

The highest number of violent incidents affecting food systems, health care and aid operations were recorded in Khartoum state and North Darfur state. Incidents in Khartoum (484) and North Darfur (411) accounted for over half of all recorded incidents during this period.

All states across Sudan have been affected by these three forms of violence. Violence across multiple sectors has resulted in high numbers of deaths, injuries, displacement and catastrophic health outcomes for local populations. The concentration and repetition of violence across sectors has cumulative effects over time, eroding local sustainable systems and increasing reliance on humanitarian aid, which is frequently disrupted, obstructed, targeted and inadequately funded.

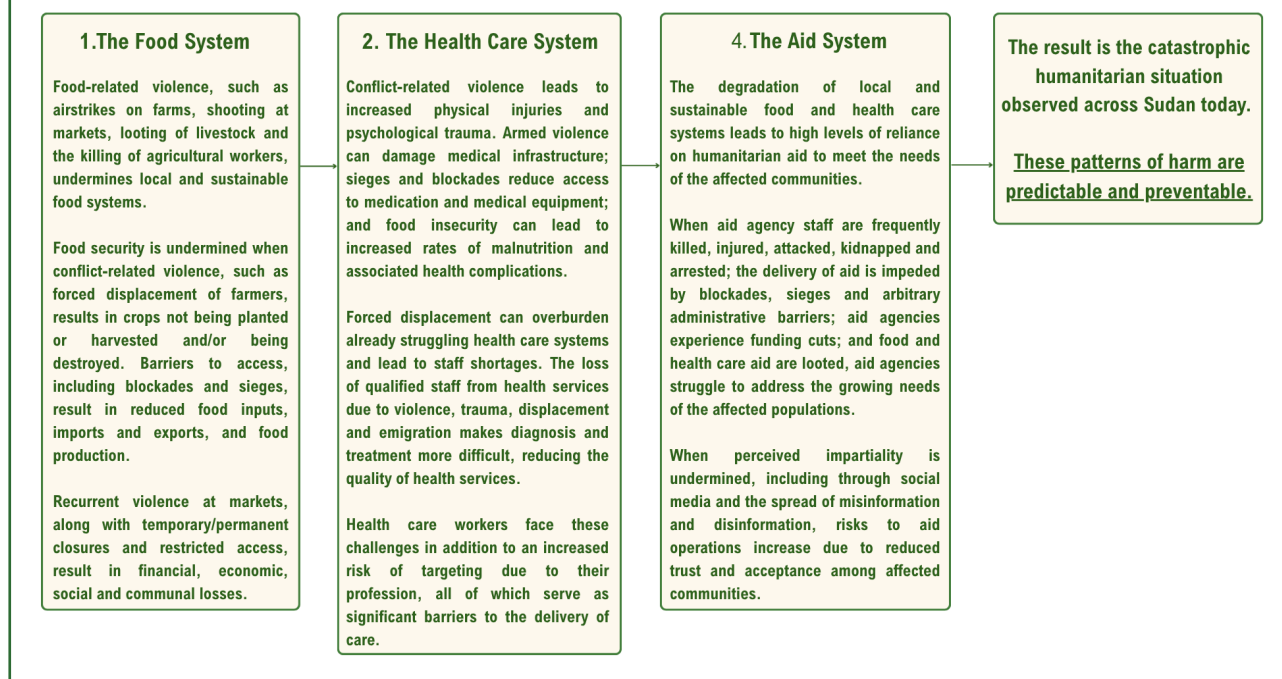


* Heat maps: Deeper colours indicate higher concentration of incidents.
Data source and visualisation: Insecurity Insight. Base map data source: UN OCHA.

The compounding impact of violence against food-systems, health care and aid

Conflict affects local structures and aid operations simultaneously and repeated incidents have compounding impacts. Whilst conflict violence itself cannot be predicted on the basis of monitoring data, patterns of harm that result from the nature of the conduct of hostilities are largely predictable and foreseeable.

Figure 6: Geographic concentration of incidents: The highest number of violent incidents affecting food systems, health care and aid operations were recorded in Khartoum state and North Darfur state



Adopting an Anticipatory Mindset

In conflict, monitoring patterns of damage and destruction can help to anticipate the predictable devastating needs in order to identify the mitigating measures that prevent the impact spreading and turning into devastating consequences. Supporting the functioning of the local food and health systems through flexible and situation-adapted funding is a vital component of strengthening the resilience and dignity of communities, enabling an instant response to damage and harm. The anticipatory mindset is a specific form of anticipatory action to address the impacts of conflict, centred on the idea of proactivity informed by an analysis of available evidence and consideration of expected scenarios. It also advocates for a flexible and context-sensitive approach, such as flexible funding, rather than a response involving rigid structures. The key aim is to extensively analyse and continuously monitor and understand the threats to aid operations, food systems and health care in order, as far as possible, to sustain livelihoods and prevent food insecurity, avoidable deaths and displacement. This enables an organisation to take proactive or early action to reduce the devastating impact that follows damage, destruction and death before vast population groups are affected. While the most affected states, such as Khartoum and North Darfur in this analysis, require urgent and immediate prioritisation to mitigate suffering and meet humanitarian needs, harm can be mitigated by applying the anticipatory mindset to all states across Sudan.¹¹

The anticipatory mindset includes:

- Understanding the level of destruction of the local food system and how it affects food needs in the short, medium and long-term
- Understanding the level of damage and destruction to the health system and how to support protection and mitigation
- Understanding how narratives affect aid acceptance and adjusting access and security risk management strategies accordingly
- Developing the capacity to link information on the impact of the conduct of hostilities to the needs assessments
- Developing the capacity to assess acceptance in a polarised and changing context
- Developing the capacity to support local partners, and volunteers, in their security risk management
- Developing the capacity to act and implement action based on predicted changes at short notice
- Developing the capacity to mitigate the immediate damage to local systems to strengthen resilience, including through adapted mental health support
- Developing the capacity to advocate for the respect of IHL in conflict to ensure the protection of food systems, health care and aid workers.

Recommendations

Recommended Policy Instruments

- Sudan: The **endorsement** and implementation of the **Political Declaration** on Strengthening the Protection of Civilians from the Humanitarian Consequences Arising from the Use of Explosive Weapons in Populated Areas (EWIPA declaration).
- States: Diplomatic and advocacy efforts are directed towards the endorsement and implementation of the Political Declaration.

Accountability

- Strengthen opportunities for accountability and justice by documenting violations of IHL, including through systematic documentation of incident data through in-person and open-source data collection.

Weapons Risk Reduction and Civilian Protection

- Address the widespread use of firearms through support for weapons embargoes, investment in Weapons and Ammunition Management (WAM) programmes (e.g. marking and safe storage) and advocate for the expansion of the existing **arms embargo that currently applies to Darfur** to the entirety of Sudan, as advocated by **Amnesty International**.
- Where explosive weapons use has been recorded, it would be valuable for donors and humanitarian agencies to invest in explosive ordnance risk education programmes, humanitarian demining, Explosive Ordnance Risk Education (EORE) and efforts to safely dispose of unexploded ordnance (UXO) to prevent future injuries, deaths, contamination of soil and water sources and damage to civilian infrastructure. We recommend that states collaborate with humanitarian organisations, ministries, and local communities to coordinate clearance and restoration priorities.

Principled Humanitarian Access and Effective Operations

- Take steps to strengthen principled humanitarian access, including support for adequate needs assessments, risk assessments and communication and negotiation with governing actors to ensure safe humanitarian passage. Support and facilitate open communication and negotiation with armed actors, particularly in areas where they maintain governing power, influence and consent, in order to ensure access and delivery of critical food, medication, and aid.
- Use insights from social media sentiment analysis to assess the hostility or receptiveness of communities to aid organisations and use this to inform operating strategies throughout Sudan.
- Support social media-adapted communication strategies for core humanitarian principles.

Security Risk Management

- Support risk management and harm mitigation for national and international staff by developing approaches with specific emphasis on equitable security risk management and context-specific support for all staff and volunteers.
- Support redressing the inequalities between international and national staff by enabling long-term employment opportunities for national staff with sufficient benefits.
- Support long-term psychological support to aid staff and long-term investment in staff and community protection.
- Support trusted national volunteer groups to enable them to adequately compensate their volunteers. When sustainable local services are damaged and destroyed, and aid agencies are attacked, communities often rely on volunteer organisations to fill the gaps.

Utilise Insights into Predictable Reverberating Effects from Violence to Mitigate Harm

- Develop systems of research that systematically track the reverberating effects of conflict violence over time to develop a more comprehensive and nuanced understanding of the predictable impacts of conflict violence over space and time, and inform more effective anticipatory action and post-conflict recovery.

Recovery and Response

- Support the rebuilding and strengthening of sustainable and local food systems with the ultimate goal of reducing and eliminating reliance on aid.
- Support the repair and maintenance of vital civilian infrastructure damaged during the war to maintain the functioning of the systems.
- Support training and material support for the local health workforce.
- Support mental health recovery for volunteers, health workers and aid workers.

Resources:

- Insecurity Insight **Security Incident Information Management** (SIIM) toolkit to track and use security-related incidents affecting operations to learn from past incidents to improve the safety and security of their staff and access to affected communities. (SIIM Handbook, User Guide and Toolkit available in Arabic, English, French and Spanish [here](#)).
- **UNIDIR EWIPA Research Framework** to track and document the impact of violence damaging and destroying vital civilian infrastructure.
- **Incident Data**: Sudan (SDN): Attacks on Aid Operations, Education, Food and Water Systems, Health Care and IDP/Refugee Camps, and Conflict-Related or Political-Related Sexual Violence and Explosive Weapons Incident Data | Humanitarian Dataset | HDX
- Further information on Sudan: **Sudan - Insecurity Insight**.

Methodology

The event-based data in this brief on conflict incidents affecting food security, health care and aid in Sudan is based on data extracted from **Insecurity Insight's Security in Numbers Database** and partner contributions. It covers the period from 15 April 2023 to 31 December 2025.

Insecurity Insight works to mitigate violence against aid operations, strengthen the duty of care towards staff and local aid partners, and improve humanitarian access. It supports analysis on how vital civilian services – such as food supply, health care, education, protection and aid delivery – are affected by conflict. It also promotes strong data responsibility practices and ethical standards for data on conflict incidents, ensuring that information is handled with integrity. The methodology's adaptive, database-driven design is built to flexibly generate and tailor data that can inform and support humanitarian policies across the aid sector.

Insecurity Insight uses an event-based approach to document incidents affecting humanitarian operations, health care, education, food systems, and protection. Event-based information is documented from three primary sources: open sources (information publicly available on the internet, usually taken from edited media or from organisations identified through our AI-supported search functions), private sources (information on incidents provided by individuals) and aid agency data-sharing mechanisms. Documented incidents must provide sufficient information to ensure that events are verifiable, fostering trust in the data. Information is collected on when and where an incident occurred, what or who was affected, and how they were affected (including information on the conflict actor an incident was attributed to, the type of weapon used and how it was launched or delivered).

This event-based data can be combined with first-hand accounts and other on-the-ground sources to build a rich, contextualised understanding of how ongoing conflict affects civilian well-being and humanitarian aid access and delivery. It allows us to understand the context of a given situation and helps us analyse trends and patterns of attacks.

Links to additional relevant resources

- **Sudden Threats from the Sky**: Security Measures Against Drone Strikes. Guidance for the Protection of Aid workers and Aid Operations. The document was originally intended to provide guidance on the protection of aid workers and aid operations facing drone threats in the Sahel region, but much of the guidance is transferable and can serve as useful guidance for local aid agencies and international supporters in Sudan.
- **Anticipatory Action and the Anticipatory Mindset**: Preventing and Mitigating the Impact of Food-related Violence on Food Security.
- **Attacks on Health Care in Sudan** (04-17 March 2026)
- **Fractured Flow: The Cascading Impacts of War on Access to Water**. The Use of Explosive Weapons in Populated Areas and Their Impact on Access to Water.
- **Shattered Stalls, Shattered Lives: The Human Cost of Bombing Marketplaces**. The Use of Explosive Weapons in Populated Areas and Their Impact on Food Security.
- **Broken Harvests: How Explosive Weapons Devastate Farmland and Livelihoods**. The Use of Explosive Weapons in Populated Areas and Their Impact on Food Security.

Endnotes

1 https://www.ipcinfo.org/fileadmin/user_upload/ipcinfo/docs/IPC_Sudan_Acute_Food_Insecurity_Sep2025_May2026_Special_Snapshot.pdf

2 <https://www.redcross.org.uk/about-us/what-we-do/international/sudan>

3 See: <https://bit.ly/SDNIHLFoodHealthApr2026>

4 95246

5 84838

6 86881

7 99233

8 By tracking both emerging and entrenched narratives on social media, insights into how public sentiment towards aid actors is developing in Sudan. The findings of such analysis can facilitate policymakers and humanitarian practitioners in strengthening community acceptance in a rapidly shifting aid environment: <https://insecurityinsight.org/iiarchive?category=Sudan%20Social%20Media%20Monitoring>

9 https://www.ipcinfo.org/fileadmin/user_upload/ipcinfo/docs/IPC_Sudan_Acute_Food_Insecurity_Sep2025_May2026_Special_Snapshot.pdf

10 <https://pmc.ncbi.nlm.nih.gov/articles/PMC12822187/>

11 For further information on the anticipatory mindset, with transferable lessons from Mali see: [Anticipatory Action and the Anticipatory Mindset](#) Preventing and Mitigating the Impact of Food-related Violence on Food Security.

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