

MSF UNSC Briefing on the Humanitarian Situation in Sudan

March 2025

Madam President, excellencies, colleagues,

Two years of unrelenting violence have plagued Sudan. Two years of devastation, displacement, and death.

Millions uprooted. Tens of thousands killed. Famine tightening its grip.

Two years of suffering, met with two years of indifference and inaction.

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Madam President,

The war in Sudan is a war on people – a reality that grows more evident by the day.

The Rapid Support Forces, the Sudanese Armed Forces, and other parties to the conflict are not only failing to protect civilians – they are actively compounding their suffering.

The Sudanese Armed Forces have repeatedly and indiscriminately bombed densely populated areas. The Rapid Support Forces and allied militias have unleashed a campaign of brutality, marked by systematic sexual violence, abductions, mass killings, the looting of humanitarian aid, and the occupation of medical facilities. Both sides have laid siege to towns, destroyed vital civilian infrastructure, and blocked humanitarian aid.

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Six weeks ago, I was in Khartoum State. I arrived at the MSF-supported al-Nao Hospital in Omdurman just after the Rapid Support Forces had shelled the Sabreen Market.

The hospital was a scene of utter carnage: waves of patients with catastrophic injuries filled every corner of the emergency room. I witnessed the lives of men, women, and children being torn apart in front of me. Al-Nao is one of the few hospitals still operational in the area, and it has suffered multiple strikes over the past two years.

That same week, the Sudanese Armed Forces bombed a peanut oil factory and civilian neighborhoods in Nyala, South Darfur, overwhelming the MSF-supported hospital with casualties.

Meanwhile, the Rapid Support Forces were pushing into the Zamzam camp in North Darfur, following months of siege and starvation. The field hospital MSF supported there, designed for pediatric and maternal care – not war trauma – received 139 wounded patients before the attacks forced us to suspend all activities, leaving behind a besieged and starving population.

But these are just the latest examples of how this war is being waged.

From the very start, the violence has been merciless. In West Darfur, the violence reached unthinkable levels, culminating in massacres targeting an entire community between June and December 2023. Our teams in Chad treated over 800 wounded people in just three days as thousands of Masalit civilians fled El Geneina after the Rapid Support Forces seized the city. Survivors told us how simply belonging to the Masalit community had become a death sentence.

In South Darfur, throughout 2024, our teams provided care to 385 survivors of sexual violence. The vast majority – including some younger than five – had been raped, often by armed men. Nearly half were assaulted while working in the fields. Women and girls are not merely unprotected; they are being brutally targeted.

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Madam President,

MSF is operating medical programs in more than 22 hospitals and 42 primary health facilities across 11 of Sudan's 18 states. In Khartoum, South Kordofan, greater Darfur, and Gedaref – across most of our projects – severe malnutrition is at critical levels. Our therapeutic feeding centers have been stretched beyond their capacity. At the same time, we are seeing a spike in vaccine-preventable diseases, including measles, cholera, and diphtheria.

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Violence against civilians is driving humanitarian needs. This is not a mere byproduct of the conflict – it is central to how this war is being waged across Sudan, a war being further fueled from the outside.

Its devastating impacts are compounded by restrictions on humanitarian access whether deliberately imposed or the result of bureaucratic paralysis, insecurity, or the breakdown of governance and coordination.

We have seen some progress on some fronts: cross-border access to Darfur through Adre; improved visa processing for international staff; the opening of specific airstrips for humanitarian flights in Dongola and Kassala.

However, the gains remain negligible compared to the overwhelming scale of needs.

Despite the clear urgency of the situation, the delivery of humanitarian assistance in Sudan remains exceedingly and, in some cases, deliberately complex.

Securing travel permits remains challenging, crossline access requires grueling negotiations, and despite prior agreements, vital UN humanitarian hubs in Darfur remain blocked.

In Rapid Support Forces-controlled areas, the armed group and its affiliates have arbitrarily delayed aid convoys – sometimes for weeks – and imposed unjustifiable tolls and taxes. To transport one 60-ton consignment of humanitarian assistance from N’Djamena in Chad to Tawila in North Darfur costs a staggering \$18,000, over a third of which must be paid on the road. Through the Sudanese Agency for Relief and Humanitarian Operations or SARHO, the Rapid Support Forces are imposing crippling bureaucratic hurdles.

Aid organizations trying to deliver aid in Rapid Support Forces-controlled areas face an impossible choice: comply with SARHO’s demands to formalize their presence and risk expulsion by the authorities in Port Sudan, or refuse and have their operations shut down by SARHO. Either way, lifesaving assistance hangs in the balance.

Assertions of sovereignty cannot continue to be weaponized to restrict the flow of aid.

Aid and aid agencies cannot continue to be exploited to derive legitimacy.

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Madam President,

Despite the courage and dedication of local and international humanitarian workers, the response remains inadequate. The system is mired in tactical thinking, endlessly negotiating narrow exceptions when it should be driving a response that truly meets the scale of the crisis.

Consider the Adre crossing – open for cross-border humanitarian supplies for six months, yet only about 1,100 trucks have reached Darfur—an average of just six per day for all of the Darfur region. In our estimate, 13 trucks per day are required to meet the nutrition needs in Zamzam alone.

Another example is the Mornei bridge, a vital passage for aid moving from West Darfur to Central and South Darfur. It collapsed in August 2024. 217 days later, it remains unrepaired, making it more difficult for millions to access assistance.

How is it that such fundamental obstacles to humanitarian aid remain unaddressed?

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Madam president,

This Council has repeatedly called for an end to the conflict, for adherence to international humanitarian law, for the protection of civilians, and for the unimpeded delivery of humanitarian aid.

Yet your calls ring hollow.

While statements are made in this chamber, civilians remain unseen, unprotected, bombed, besieged, raped, displaced, deprived of food, of medical care, of dignity.

The humanitarian response falters, crippled by bureaucracy, by insecurity, by hesitation, and by what threatens to become the largest divestment in the history of humanitarian aid.

To my colleagues in Khartoum, in Tawila, in Nyala – to our patients across Sudan – this Council's failure to translate its own demands into action feels like abandonment to violence and deprivation.

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Madam President,

The Jeddah Declaration of Commitment to Protect the Civilians of Sudan, which this Council often invokes, should have been a watershed moment.

Yet, without monitoring, without accountability, and without leadership, the agreement has become little more than a convenient rhetorical shield – invoked to signal concern while absolving those with responsibility and influence from taking real action.

What is needed today is a new compact – one founded on a shared commitment to civilian protection. A compact that guarantees aid organizations the operational space they need, that enforces a moratorium on all restrictions on humanitarian assistance, and that ensures the response remains independent from political interference. It must replace the current system of gatekeeping with one that upholds the survival and dignity of the Sudanese people.

Such a compact requires both the political will and the leadership capable of bringing the warring parties into alignment with humanitarian imperatives. It must be independently monitored and underpinned by a robust accountability mechanism that ensures that all parties to the conflict are held to their commitments.

However, even the strongest agreement will falter without the full engagement of donors and a more proactive approach from the UN Secretariat. To member states: the response must be bolstered by increased and sustained funding. To the UN Secretary-General: full redeployment of UN humanitarian agencies must be mandated in Darfur and across Sudan.

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Madam President,

The rainy season looms large. The hunger gap will widen.

The crisis in Sudan demands a fundamental shift away from the failed approaches of the past. Millions of lives depend on it.

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