



📍 YABUS · BLUE NILE STATE · SUDAN

— GBV SERVICE MAPPING · VALIDATION WORKSHOP

A day of *listening*, validating & building together.

Yabus, Southern Kurmuk — Blue Nile State, Sudan. Over 30 stakeholders convened to validate findings and co-design a referral pathway for survivors.

WHY THIS WORK MATTERS

The world's worst humanitarian emergency.

Sudan's crisis has deepened sharply since late March 2026. In Blue Nile State, intensified hostilities around Kurmuk and Qaysan have triggered fresh waves of displacement — and women and girls face the heaviest protection burden.

33.7M

PEOPLE IN NEED

Sudan, 2026 HRP

9.04M

INTERNALLY DISPLACED

100% conflict-driven

12.07M

GBV PEOPLE IN NEED

Sudan, 2026 HRP

2,633+

HOUSEHOLDS NEWLY DISPLACED

Blue Nile, March 2026

2026 HRP FUNDING COVERAGE

17.3%

\$495.3M received of \$2.87B required.

GBV FINDINGS · YABUS, CHALI & WADAKA

A response environment under severe strain.

3 / 6

Mapped providers offer GBV-specific services

11

Dedicated GBV staff for the entire target population

0

Legal services, shelters or specialised MH support

GBV TYPOLOGY
Sexual violence as a weapon of war

Rape, sexual slavery and abduction reported along roads, water points and firewood routes — perpetrated primarily by armed groups.

SOCIAL NORMS
Early & forced marriage normalised

Girls from age 13 considered marriageable. Bride price systems incentivise families to view daughters as economic assets.

SERVICE GAP
Health response critically weak

Only one provider in Yabus offers CMR/PEP. PHCC staff untrained on GBV clinical care. No mobile outreach to Chali or Wadaka.

GEOGRAPHY
Yabus-centric coverage

Chali and Wadaka have minimal coverage. Cross-border referrals to Maban and Asosa lack formal protocols.

HIGH-RISK LOCATIONS IDENTIFIED

Yabus River water points

Firewood routes

Gold-mining areas

Border crossings

Markets at peak hours

Isolated latrines

Dark pathways

OUTCOMES OF THE DAY

From mapping to a working referral pathway.

30+

STAKEHOLDERS CONVENED

3

LOCALITIES COVERED

1

MULTI-SECTORAL PATHWAY

- 01 Validated active service providers — and the gaps.**
 Stakeholders confirmed the live mapping across Yabus, Chali and Wadaka, surfacing critical gaps in coverage.
- 02 Agreed a multi-sectoral referral pathway.**
 Designated focal persons across health, psychosocial, legal and protection sectors.
- 03 Established safe information-sharing principles.**
 Common rules of engagement among actors — anchored in survivor-centred practice.
- 04 Drafted an action plan for stronger coordination.**
 Concrete next steps to keep the GBV response coordinated beyond the workshop.

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Survivor-centred services start with the people closest to the survivor.

Grateful to every participant — service providers, community leaders, CBOs and local authorities — for their engagement and commitment in one of the most underserved areas of Sudan.

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