

(English version)

Priority question for written answer P-002936/26
to the Vice-President of the Commission/High Representative of the Union for Foreign Affairs and Security Policy
Sebastião Bugalho (PPE)
(15 July 2026)

Subject: Worsening humanitarian crisis in Sudan: combating health crises

Three years since war broke out in Sudan, the humanitarian situation is devastating. More than 33 million people are in need of humanitarian assistance, and around 65% of the population has no access to essential healthcare. The lack of clean water and sanitation and the collapse of health services have created conditions likely to aggravate epidemics, including the current cholera outbreak, which has already caused more than a hundred deaths and could worsen with the rainy season.

The Council's recent adoption of measures targeting the war economy is a positive sign. However, it is crucial to ensure that the health dimension of the crisis is not forgotten. As one of Sudan's largest humanitarian donors, the EU will play a key role in strengthening the health response.

We therefore ask the Commission:

1. What measures are being taken to support the response to the cholera outbreak — including by strengthening health services, vaccination and access to clean water — and prevent further outbreaks?
2. How are the EU, the UN and humanitarian partners on the ground coordinating to strengthen epidemiological surveillance and respond to future health emergencies?

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Answer given by Ms Lahbib on behalf of the European Commission
(20 August 2026)

In 2026, the EU allocated EUR 276.3 million to the humanitarian response related to the Sudan crisis, including EUR 162 million for Sudan only.

About 30% of the amount is dedicated to the support of the health sector, local resilience and access to basic services as health, water-sanitation (WASH) and protection for the most vulnerable population groups.

Development funding complements the humanitarian one through a EUR 40 million measure adopted in 2023 under the Neighbourhood, Development and International Cooperation Instrument (NDICI) — Global Europe, supporting quality primary healthcare, nutrition and WASH services and support local systems.

To adapt to a challenging context, with serious access constraints, the Commission anticipated the outbreaks' response, through funding for timely procurement and prepositioning of supplies.

Most of the funded actions include a 'crisis modifier', enabling the reallocation of resources, increasing even further the agility of the response.

The Commission is one of the Vaccine Alliance (GAVI) top donors (EUR 360 million for the 2026-2030 cycle). GAVI's International Coordinating Group mechanism has recently approved support for a reactive oral cholera vaccine (OCV) campaign in West Kordofan, with the partial approval of 675 351 doses.

The EU, the UN, humanitarian and development partners, assist in building local health information systems that feed into the national reporting and prepare for improved epidemiological surveillance.

The Health Cluster, led by the World Health Organisation, is centralising the data and follows the implementation of the National Cholera Prevention and Response Strategy.

A 2026 Rainy Season Partner Support Plan, targeting the Darfur Regions, was also elaborated by the cluster and shared with all partners active in the response.
