

Inside the Camps: Health, Humanity, and My Journey as a Volunteer Doctor

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Humanitarian Situation in Camps

- As of 2024, over **10 million** people displaced in Sudan, making it the world's largest displacement crisis (UN OCHA, 2024).
- IDP camps are **overcrowded** with inadequate shelter, water, and sanitation.
- Health challenges:
 - ❑ High prevalence of **malnutrition** (especially among children under 5 and pregnant women).
 - ❑ Frequent outbreaks of **cholera, malaria, and diarrheal diseases** (WHO, 2024).
 - ❑ **Limited** access to maternal and child health services.

Humanitarian Situation in Camps

- **Psychological toll:** trauma, depression, and increased suicide risk are common among displaced populations (UNHCR, 2023).
- Camps rely heavily on volunteer and community-led initiatives due to **limited** humanitarian access and resource gaps.



My Story



Displacement Journey

- After the fall of Madani and later Singa in sinnar state, I was forced to flee with thousands of others.
- Families walked **long distances**, uncertain of where to go.
- Reached Al-Gabaleen in White Nile State, where camps of displaced people were **overcrowded, insecure, and undersupplied**.
- Faced **uncertainty** about my own family's safety while serving others.

Life in the Camp

- **Overcrowded shelters:** limited tents, many families sleeping in the open.
- **Food insecurity:** malnutrition common, especially among children and pregnant women.
- **Poor sanitation:** diarrheal disease outbreaks and other infections spread rapidly.
- **Psychological distress:** many suffering from trauma; witnessed 3–4 suicide attempts per month.
- **Security threats:** more than 20 civilians killed near the area, including a doctor from a neighboring village.





My Role in the Camp

- Set up **daily** medical consultations inside the camp.
- Treated up to **100 patients** per day alone.
- Reached **5,000+ displaced** patients in total.
- Focused on **child** health, maternal emergencies, and infectious disease care.
- Provided **counseling sessions** for psychological support.
- Despite **lack** of medicines, improvised with what was available.



Humanitarian Initiatives

- Founded “Shelter and Food Initiative”:
- Kitchen supported 500 families for 6 months.
- Provided 60 tents for 80+ extended families (including 35+ pregnant women).
- Launched economic recovery initiative:
- Gave small grants (50k–200k SDGs).
- Supported 250–300 new businesses.
- Maintained connection with donors by walking across the border to South Sudan to access internet.

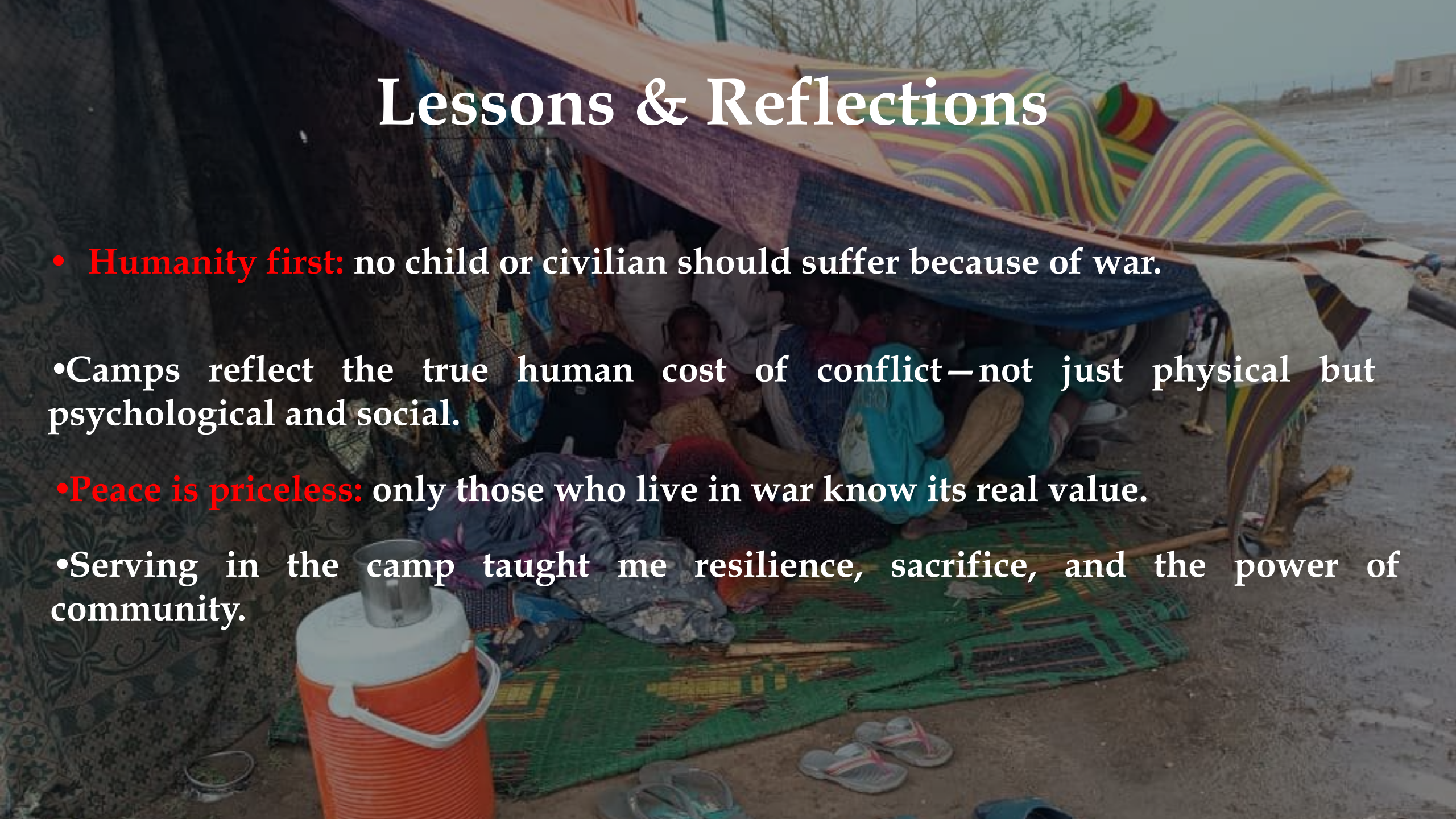
Challenges

- **Severe** scarcity of medicines, IV fluids, and basic medical tools.
- At times, rationed 100 ml IV fluid per patient to save lives.
- No internet → relied on traveling by foot to secure donations.
- Constant security threats around the camp.



Lessons & Reflections

- **Humanity first:** no child or civilian should suffer because of war.
- Camps reflect the true human cost of conflict—not just physical but psychological and social.
- **Peace is priceless:** only those who live in war know its real value.
- Serving in the camp taught me resilience, sacrifice, and the power of community.



A group of smiling people, including children and an adult man, in a camp setting. The image is overlaid with a semi-transparent dark grey filter. The text is white and positioned in the upper half of the image.

Call to Action

- Support IDPs with food, shelter, and healthcare.
- Strengthen primary health care and public health in camps.
- Mobilize psychological support programs for war-affected populations.
- International and local actors must coordinate better to prevent humanitarian collapse.

Thank you

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