

The Cholera Outbreak in Sudan: Causes and Prevention

(Translated)

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The World Health Organization (WHO) has recorded 120 deaths and 1,102 cases of cholera in Sudan, a country suffering from a severe deterioration in its health sector due to the war that has been raging for over three years between the army and the Rapid Support Forces. This current cholera wave is the third in three years, occurring just two months after the declaration that a previous outbreak had ended last March.

Government figures indicate that more than 124,400 people contracted cholera, and 3,500 died during the most recent wave between July 2024 and last March. Shible Sahbani, the WHO representative in Sudan, stated, endemic to the northeast African country, cholera used to come "in a cyclic manner every three years," but now the country faces near-continuous outbreaks "due to the conflict, constraints in access and limited supplies" (The New Arab).

WHO reports state that most hospitals in Sudan are either fully or partially out of service. Sahbani noted that "Forty per cent of health facilities are non-functional at all, and the remaining almost 60 per cent are only partially functioning, meaning they are providing only a few services, or not enough to patients in the area."

The catastrophic conditions facing the people of Sudan stem not only from the devastating war instigated by the United States but also from a deepening crisis and systemic failures in state healthcare. Organizations have issued repeated appeals, warning of health disasters in the country; the WHO has launched a vaccination campaign against the cholera epidemic, which threatens the lives of thousands of people, particularly children. Hala Khaddari, Deputy WHO Representative in Sudan, stated that "the cholera epidemic, which began spreading in Kassala State in late July 2024, has extended to all 18 of the country's states." She confirmed that over 113,600 cases and more than 3,000 deaths have been recorded to date—an alarming mortality rate (WHO website). Yet, these warnings have fallen on deaf ears.

A report by Al Jazeera Arabic from February 1, 2026, noted the spread of cholera across more than 18 states, with approximately 3,500 deaths recorded. This is in addition to dengue fever, which claimed 1,084 lives, and over 2.7 million recorded cases of malaria, alongside a worsening hunger and malnutrition crisis.

On August 3, 2025, the UN website reported—citing a UNICEF press release—that the five Darfur states had recorded a total of nearly 2,140 cholera cases and at least 80 deaths by July 30. Beyond cholera, the lives of more than 640,000 children under the age of five are at heightened risk from violence, disease, and hunger.

On August 19, 2025, Doctors Without Borders (Médecins Sans Frontières or MSF) highlighted in a report that cholera was spreading rapidly in the Darfur region, resulting in 40 deaths in a single week. MSF teams reported treating over 2,300 cholera patients during the preceding seven days. Amidst a senseless war between

two generals serving America's agenda in Sudan, the spread of cholera has compounded the suffering of the Sudanese people—adding insult to injury. The healthcare system has faced repeated attacks throughout the conflict, targeting hospitals, ambulances, and healthcare providers; this has resulted in the destruction of facilities and equipment, as well as numerous deaths and injuries among health workers and even patients—such as the incident at Al-Fashir Hospital. Over a period of two and a half years, the World Health Organization recorded approximately 2,002 attacks on the health sector, resulting in the deaths of 1,883 healthcare workers.

Despite these catastrophes, the government downplays and trivializes the situation, even denying the very existence of the disease. On March 3, 2026, the Federal Ministry of Health announced on its website that the country was free of the cholera epidemic, asserting that no cases had been recorded in any state since January 14. The government has gone even further in attempting to evade its responsibilities toward the public; Minni Arko Minnawi, the Governor of Darfur (currently based in Port Sudan), stated that the outbreak is concentrated largely in areas occupied by the Rapid Support Forces (RSF). In a statement to the Sudan Now program on DW Arabic, Minnawi said, “Those suffering from cholera are located outside the government's service areas, with most of them living in areas controlled by the so-called RSF which have taken over these areas but are unable to provide services there.”

Islam views healthcare as effective, continuous care that fulfills the ideal state for the individual and society—specifically, satisfying the individual's need for physical and emotional well-being. Shariah Law placed the responsibility for healthcare directly upon the State and the Khaleefah (Caliph); the Prophet (saw) said, «الإِمَامُ رَاعٍ وَمَسْئُولٌ عَنْ رَعِيَّتِهِ» **“The Imam is a guardian and is responsible for his subjects.”** The current situation in Sudan—characterized by the outbreak of epidemics and the absence of the state—is a danger signal that cannot be ignored. What is required is not merely the provision of medicine, but the establishment of a genuine state of guardianship that prioritizes human life and addresses the root causes of the crisis rather than just its symptoms—a state that recognizes the value of the human being and human life. The only state capable of effectively addressing healthcare issues through its implemented health system is the Second Khilafah Rashidah (Rightly-Guided Caliphate) on the Method of the Prophethood, which will—by the permission of Allah (swt)—be established soon.