HIGHLIGHTS (22 Mar 2021)

- Humanitarians have assisted over 1 million people with complete food baskets out of 3.5 million in accessible or partially accessible areas and transported above 1,160MT of cargo.

- With the new notification system of international staff deployments to Tigray, partners have been able to step up their activities and reach previously inaccessible areas.

- With ongoing clashes continuing across Tigray, the humanitarian situation is alarming. Looting, vandalism, and occupation of civilian infrastructure continue to be reported.

- Many displaced people arriving in towns are visibly malnourished while assessments in Abi-Adi, Adwa, Axum, and Shire revealed the extremely dire situation of displaced people.

- It is vital that additional funding is immediately released to enable humanitarians to increase the scale and scope of the response.

KEY FIGURES

<table>
<thead>
<tr>
<th>People in need of aid before the conflict</th>
<th>Projected additional people to need aid</th>
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<tbody>
<tr>
<td>950,000</td>
<td>1.3M</td>
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62,032 Refugees in Sudan since 7 November

FUNDING (2020)

<table>
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<th>Received</th>
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</thead>
<tbody>
<tr>
<td>$1.3B</td>
<td>$734.7M</td>
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59% Progress

FTS: https://fts.unocha.org/appeals/936/summary

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BACKGROUND (22 Mar 2021)

SITUATION OVERVIEW
Active hostilities continued to be reported across Tigray Region, and the humanitarian situation remains of deep concern. Aid workers have described a deliberate and widespread targeting of health-care facilities in the Region, which is having a devastating impact on the people, especially those in rural areas. At least 12 health facilities were looted by armed actors in the past two weeks, according to the Emergency Coordination Centre (ECC) meeting on 12 March. Preliminary results from a rapid nutrition assessment conducted early March in various areas in Tigray indicate that among screened children under age 5, there was a very high proportion of children affected by acute malnutrition. In all areas assessed across six woredas, the proportion of Global Acute Malnutrition based on Mid-Upper Arm Circumference exceeded the emergency thresholds. The UNICEF Executive Director, on 19 March, stressed that as families continue to flee for their lives, parties to the conflict must ensure that children are protected from harm at all times and that basic service outlets, such as health centers, must be protected.

The number of newly displaced people across the Region continued to increase, with at least 1,000 people arriving daily in Shire, according to partners on the ground. The majority of the displaced have reportedly fled from Western Tigray to Shire, Adigrat, Axum and Shiraro, with an additional influx recorded from parts of North Western and Central zones, where they are reportedly being expelled by armed actors. While it is currently not possible to identify the full scale of the displacement, the regional government Early Warning Response department reports that more than 140,000 people have been displaced from Western Tigray Zone since the Amhara occupation.

Shelter Cluster partners have raised concerns over the poor living conditions for displaced people in Adwa, Axum, Shire and Abi-Adi, where up to 60 people are reportedly staying per single classroom. Further, while some people are taking shelter in overcrowded schools, churches and among host communities, many are forced to stay in open air, exposing women and girls to gender-based violence (GBV), in addition to other health and protection-related concerns. Aid workers stress that the lack of shelter is especially concerning given the upcoming rainy season, which threatens to aggravate the plight of many displaced people already exposed to inadequate conditions. The assessment team highlighted that the situation in Abi-Adi is particularly concerning, given that people have been displaced multiple times due to recurrent episodes of fighting, while receiving very little assistance. Similarly, an estimated 107,000 displaced people who arrived in Adwa over the past four months have so far only received very limited humanitarian assistance of any kind.

The GBV prevalence in Tigray Region in areas affected by the conflict is reportedly high, with the ECC on 12 March reporting that there have been at least 516 self-reported GBV cases across the Region since the beginning of the conflict. ECC notes that these reports are likely only "the tip of the iceberg", while partners add that the young age of many victims and the level of violence is concerning. GBV risks in displacement settings are growing, with overcrowded conditions, insecurity and limited assistance exacerbating the vulnerability of people.

Beyond GBV, displaced people express serious concerns for their safety due to the presence of military elements who are reportedly interfering with people's interactions with aid workers in some sites. According to partners on the ground, many displaced people are hiding the assistance they have received for fear of looting. Amid concerns about limited assistance, protection actors also received concerning reports of displaced people in host communities engaging in survival sex due to an inability to pay for their shelter.

In Western Tigray, amid reports of grave human rights violations and of forceful relocation of Tigrayan communities on ethnic grounds, partners on the ground indicate that several major towns are now empty of Tigrayan people, with new residents occupying vacated houses. The heavy presence of Amhara Special Forces along the Tekeze River and logistical challenges have restricted access to the Western Zone from the rest of the Region. Currently, access to Western Tigray is only possible through the Amhara Region. Similarly, parts of Tigray's Southern Zone are only accessible through Amhara, with Amhara forces reportedly managing the security.
The growing needs in the Region now vastly exceed the preliminary response plan that was developed by the humanitarian community in the first weeks of the conflict in November 2020. However, partners are increasingly able to reach more people in need and to move more supplies and personnel into the Region. The 2021 Humanitarian Needs Overview launched by the humanitarian community on 5 March estimates that about 4.5 million people are currently in need of humanitarian assistance in Tigray. More than 3.5 million people are estimated to be in accessible and partially accessible areas who are in immediate need of life-saving assistance, of whom 1 million have been reached with complete food baskets and more than 631,500 with water. Over 1,160 metric tons of non-food humanitarian cargo has also been transported to Tigray. The humanitarian community will continue to update the needs as more assessments become possible in the Region.

The United States Secretary of State, on 18 March, announced that it is providing an additional nearly US$ 52 million, mostly on food assistance, to respond to the humanitarian crisis in Tigray. Further resources are urgently needed to increase the scale and scope of the response and ensure it is commensurate with needs.

ANALYSIS (22 Mar 2021)

CROSS-BORDER IMPACT

The conflict along the border between Sudan and Ethiopia remains active, with Sudanese Armed Forces and Ethiopian—including Amhara militias – and Eritrean forces deployed around Barkhat settlement in Greater Fashaga and clashes reported since early March.

The number of refugees arriving in Sudan has been low in the past weeks as many Ethiopian asylum seekers are reportedly blocked from crossing the border into Sudan by armed actors. UNHCR and partners are working with local authorities assisting nearly 62,000 people who are currently seeking refuge in the eastern Sudanese states of Kassala and Gederaf. Relocation from Hamdayet and Village 8 to Tunaybah camp is on hold after more than 41,000 people were relocated. Over 20,000 refugees in Hamdayet and Village 8 are living in proximity to various armed actors, raising protection concerns for safe asylum.

VISUAL (12 Feb 2021)

PEOPLE TARGETED FOR HUMANITARIAN ASSISTANCE IN TIGRAY
EMERGENCY RESPONSE  (22 Mar 2021)

HUMANITARIAN PREPAREDNESS AND RESPONSE

Following the transition in early March to a notification system for international staff travel to Tigray, the humanitarian community has stepped up their presence and activities in Tigray. The UN estimates that there are currently around 240 UN staff in Tigray, with hundreds more aid workers with international and national NGOs present across the Region. The new notification arrangement for humanitarian cargo movements is also speeding up the provision of assistance to those in need.

Humanitarian organizations continue to increase efforts to deploy additional international staff to support the scale up of operations and ensure protection-by-presence amid reports of ongoing atrocities against civilians. During the reporting period coordination presence has scaled up in Shire, while in Mekelle all Clusters have coordinators. Partners note the urgency to decentralize their presence and provide relief in areas that have not been previously reached to mitigate secondary displacements, which threaten to further increase people's vulnerability.
In the past week, access to parts of Eastern Tigray Zone continued to improve as heavy fighting reportedly largely subsided, and partners reached at least four previously inaccessible woredas of Erob, Saesie, Tsaeda Emba and Atsibi. In Central Zone, access to Abi-Adi town and surrounding areas also improved, and partners were able to reach Kola Temben, Ahferom and Keyhe Tekli woredas. Abergele, Tanqua Melashe, Edaga Arbi, Endafelasi and Hahayle woredas, however, remain inaccessible. In North Western Tigray Zone, despite ongoing confrontations that continue to limit partners’ access to people in need, aid workers were able to access the former refugee camps of Hitsaats and Shimelba for the first time since the beginning of the conflict, confirming that all humanitarian facilities in the camps have been destroyed by parties to the conflict, and the camps are empty. More partners were also able to reach Sheraro without major difficulties. On the other hand, active hostilities intensified in South Eastern and Southern zones over the past week, limiting partners’ access to people in need. Despite ongoing clashes of varying degrees, the main road between Alamata, Mekelle and Shire remains accessible.

Partners across all Clusters continue to stress that the lack of communications in most of Tigray seriously undermines efforts to scale up the response and ensure principled humanitarian action. Since the beginning of the conflict, power has been available only intermittently in main towns. Last week, power was restored in Adigrat, Axum and Shire, although it remains unreliable, and some parts of Shire Town is now accessing water services. It is estimated that some 4.5 million people in rural areas have been without access to electricity, communications and other essential services for more than four months.

Amid the ongoing influx of new arrivals to main towns, such as Shire and Mekelle, government officials are reporting serious challenges in registering displaced people due to limited staffing and lack of IT equipment. This is particularly concerning given that distribution of food aid is currently limited to registered displaced people who are a very small fraction of the overall number of displaced people. In Shire, authorities are forming volunteers to increase registration capacity, and partners are engaging with local authorities to identify and prepare additional sites for displaced people, as well as to address protection concerns, including intimidation and threats by military actors on sites. Humanitarians are also providing, and working to scale up, critical assistance such as water services and emergency shelter support, to newly arrived people.

Considering plans to re-open schools in the Region, the Protection Cluster is working closely with Camp Coordination and Camp Management actors to support the planned relocation of displaced people from school compounds and ensure safe, dignified and informed relocations to adequate alternative sites. With the arrival of many new actors on the ground, the Protection Cluster is also working to strengthen the prevention of sexual exploitation and abuse (PSEA) component across the response by delivering trainings and distributing relevant materials, including on providing support to GBV survivors for non-specialized actors.

CLUSTER STATUS (13 Mar 2021)

AGRICULTURE

Needs

- The Agricultural systems have been devastated by months of fighting and extensive looting and destruction. Crops and animals have been looted or burned, particularly in the Eastern and Central zones. Farmers are becoming increasingly desperate, with partners describing their food security status as catastrophic. Livestock production across the Tigray Region has also been devastated due to the lack of feeding, water and health services, with outbreaks of foot and mouth disease (FMD) in at least two woredas in East and South East zones.
Field assessments conducted in four zones (South, South East, East and Central zones) found that Office of Agriculture employees at the woreda level are unable to fully operate since all office vehicles and equipment have been looted, although many of the personnel have resumed their work. Offices in one third of the assessed woredas have also had their animal clinic equipment destroyed, and drugs and vaccines looted. The total extent of the impact and gravity of the situation remains unknown in other unassessed parts of the Region, such as in Northern and Western Tigray.

**Response**

- The Cluster has finalized and endorsed the input distribution guideline, which outlines the required amount of support for each affected household.
- In consultation with Crop, Livestock and Input Directorates, the Agriculture Cluster has conducted an emergency seed (grain and forage) availability assessment.
- The Agricultural Cluster has conducted field assessments in 21 woredas across four zones.
- The sub-national Agriculture Cluster was re-activated and held its first meeting on 11 March.

**Gaps**

- Partners report that resource mobilization is constrained by the lack of declaration of the agriculture emergency in Tigray as a crisis at the regional or national level.
- Essential office equipment has been looted from woreda and kebele-level offices of agriculture and the offices have not been re-equipped hindering full operations in the office. Funding to re-equip the office of agriculture at woreda-level, in addition to providing emergency agricultural inputs (seed, fertilizer, chemicals and animal drugs), is an urgent priority.
- Limited communications with woredas, as well as security issues, pose significant challenges to the response.

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**CLUSTER STATUS (22 Mar 2021)**

**Education**

**Needs**

- Approximately 1.3 million children need protective services and safe education in Tigray and neighbouring areas, as the conflict disrupted their learning process. According to the Ministry of Education, approximately 25 per cent of schools in Tigray have been damaged, and about 48,500 teachers need psychosocial support.
- Considering emerging protection concerns over the school re-opening process, there is a pressing need to further engage with communities and facilitate grassroots-level discussion to sufficiently take into consideration their needs and priorities. According to the Emergency Coordination Centre (ECC) in Mekelle, there are significant safety concerns over the school re-opening process, which became apparent when 55 primary school teachers did not attend the planned training the previous week due to fear of attack. Ensuring the safety of children and teachers at schools is of paramount importance.
Many schools across the Region are currently being used as temporary shelters for displaced people, as well as by various security forces. There are about 5,000 displaced people sheltering in eight schools in Mekelle Town alone, according to UNICEF field reports.

Poor water, sanitation and hygiene services in the learning spaces continue to be a major concern for the safe reopening of schools amid the COVID-19 pandemic and other disease outbreaks.

Increasing food insecurity is also considered a barrier to continuing education, according to the Education Cluster.

Response

As the Tigray Regional Education Bureau (REB) plans to move forward with school re-opening, partners are engaging with teacher training and community mobilization. Procurement of Temporary Learning Spaces (TLS) materials to reach 3,200 children are ongoing, while a new partnership agreement is under development with a partner to install 15 TLS and provide Accelerated School Readiness and Accelerated Learning Programme services for 3,600 out-of-school children in Tigray.

At least 26 enumerators were deployed in February to conduct rapid needs assessments in five sub-cities in Mekelle, while additional assessments outside Mekelle started in early March.

The Education Cluster continues to engage with the Protection Cluster in joint advocacy on safe school reopening/evacuation to ensure a safe relocation of displaced people currently sheltering in schools.

The Afar REB, in collaboration with UNICEF, conducted an assessment to understand the impact of conflict on education and the needs of displaced people currently in Afar. Findings of the assessment indicate that approximately 14,240 students were affected by the conflict, while learning and teaching in 72 schools were disrupted and, until recently, were closed for up to three months.

The sub-national Cluster has been re-activated and has resumed its weekly meetings. Partners are working closely with the REB.

Gaps

According to partners, teachers are declining to attend trainings in fear of attacks, raising serious concerns over the safety of students and teachers should schools re-open. Partners also report difficulties in engaging with the community in this regard due to weak grassroots structures.

Many schools in major cities are hosting displaced people, adding complexities to the school re-opening plans. In addition, at least two learning facilities are currently occupied by armed forces.

Funding remains a critical challenge, according to the ECC. The REB is reportedly facing resource constraints to address the needs identified before re-opening of schools.

CLUSTER STATUS (22 Mar 2021)

Emergency Shelter & Non-Food Items

Needs
The conflict has uprooted hundreds of thousands of people across Tigray, leaving people in urgent need of emergency shelter and basic household items, including kitchen utensils, blankets, mats, among others. While most displaced people are seeking shelter with relatives and friends, thousands are also living in overcrowded collective centres in different parts of Tigray. During the reporting period, partners highlight a marked increase in the number of newly arriving displaced people in Shire, Adwa, Mekelle in Axum.

Cluster-led rapid assessments in Adwa, Axum, Shire and Abi-Adi from 11 to 15 March further revealed a dire situation for newly displaced people. Large numbers of displaced people are taking shelter in schools, churches and host communities, though many are forced to stay in open air, exposing women and girls in particular to gender-based violence (GBV), in addition to other health and protection-related concerns. This situation is especially concerning given the upcoming rainy season, which threatens to aggravate the plight of displaced people in inadequate shelters. Partners highlighted that the situation in Abi-Adi is particularly alarming, given that people have been displaced multiple times given recurrent episodes of fighting, while receiving very little humanitarian assistance. The response remains sub-optimal in all woredas visited, with sometimes up to 60 people staying in a single classroom. Findings from these recent assessments reflected many of the concerns highlighted by previous assessments in Mekelle, where people are sheltering in over-crowded classrooms, many of which have broken doors and windows and lack adequate lighting and sanitation facilities.

In view of imminent plans to re-open schools and universities, which have been used as shelters for displaced people, partners operating in both Mekelle and Shire underscore the urgent need to identify and ensure adequate living conditions in alternative shelters. Meanwhile, authorities also report an increasing number of new arrivals in other major towns.

**Response**

- Since the beginning of the conflict, the Cluster has reached more than 95,000 displaced people with emergency shelter and core relief items, and distribution is ongoing for a further 63,800 people.
- In the reporting period, the International Committee of the Red Cross started the distribution of ES/NFI (emergency shelter and non-food items) kits for 1,900 households in Axum and 2,100 households in Adwa, while the International Organization for Migration started distributing 1,000 ES/NFI kits to newly arriving people in Mekelle. Distribution of 1,000 ES/NFI kits in Adwa by ASDEPO is ongoing, as is the distribution of 1,000 kits in Tseada Amba by Concern Worldwide. Samaritan Purse started the distribution of 600 NFI (non-food item) kits in Adwa, while Action Against Hunger distributed some 1,700 ESNFI kits in Abi-Adi and nearly 950 NFI kits in Samre. A national NGO, Development for Peace Organization, started the distribution of 1,000 kits in Edaga Hamus.
- Partners continue to mobilize resources to construct communal shelters in relocation sites in Adigrat, Adwa, Shire and Mekelle. The Cluster had recently completed the selection and planning of relocation sites in Mekelle, as well as participating in site assessments in Adigrat and Shire.
- There are currently 22 national, international NGOs and UN agencies operational across 7 Zones in Tigray, 4 Zones in Amhara and 4 Zones in Afar. Partners are engaged with several life-saving activities, including the distribution of ES/NFI kits, cash-for-rent and cash-for-NFIs activities and the rehabilitation of communal centres.
- The sub-national Shelter Cluster, which was activated on 26 January in Mekelle, continues to hold weekly meetings. In response to the significant influx of new displaced people into Shire, the Cluster deployed a full-time sub-national Cluster Coordinator to provide on-site coordination support to partners.

**Gaps**
Despite progress, the shelter response is not yet meeting needs, particularly in North Western, Central and South Eastern Zones. This gap is due to access constraints, limited resources, as well as the rapidly rising number of displaced people arriving in Shire from Western Tigray.

Partners highlight that the number of new arrivals continue to increase in Shire and Adwa Towns.

CLUSTER STATUS (22 Mar 2021)

Food

Needs

- With the harvest and markets disrupted by the conflict, there is a risk of a further deterioration of food insecurity across Tigray. While many internally displaced people seek refuge in public institutions, most newly displaced families across the Region are seeking refuge with relatives and host communities, putting an incredible strain on their already stretched food resources. Food assistance from the Government and partners remains the main source of food for most families in the Region.

- Partners on the ground report serious concerns about poor targeting and, in some areas, food not reaching those in greatest need, particularly in the rural areas, according to the regional ECC on 19 February and 5 March. These reports highlight the urgent need to strengthen the targeting and monitoring system and focus on exclusion and inclusion errors. Insufficient food distribution in sites for displaced people have also led to increased tensions among the displaced people, according to aid workers on the ground.

Response

- The National Disaster Risk Management Commission (NDRMC), in collaboration with the Food Security Coordination Directorate (FSCD), the Joint Emergency Operation Program (JEOP) through its partner Relief Society of Tigray (REST), World Food Programme (WFP) and other partners are involved in the food response across Tigray.

- As of 9 March, the Government’s report on food dispatched and distributed for the second round indicates that 11,918 tons have been moved to Tigray. The first round of assistance was reportedly completed in all woredas except Chile, Ahsea and Adet in Central Zone and Tselemti, Maekel Adiyabo, Laley Tselemti and Mai Tsebri Town in North Western Zone where distributions are being delayed due to access challenges.

- As of 13 March, JEOP has reached 1,022,250 people with double food rations to cover three months. JEOP was able to deliver food aid in all allocated woredas. To ensure that all food insecure people receive assistance in all of JEOP operational woredas, and through the one food operator per woreda principle, JEOP started dispatching and distributing food for Productive Safety Net Programme clients and has included 14,462 clients with a double-round food basket.

- WFP has secured sufficient internal resources to start food response in 14 woredas. 520 tons of food has been dispatched to and is being distributed in the two priority woredas of Atsbi Endeselassie and Endga Hamus.

- WFP’s dispatch of food to Mai Ayni and Adi Harush camps is completed for March distribution, and distribution is due to start next week. At least 28,000 refugees were reached during the month of February in the two camps. In Shire Town, Eritrean refugees continue to be assisted with high energy biscuits as they transit to the two southern camps.
The Food Cluster Monitoring Working Group held its second meeting on 12 March. The Working Group includes participants from NDRMC, FSCD, JEOP, WFP, World Bank and USAID and will work to strengthen the targeting and monitoring of food response in the Region.

**Gaps**

- With no internet, limited telephone communications and banking services outside Mekelle, partners report serious difficulties in communicating with staff across the Region and in gathering and monitoring information on food dispatches and distributions.
- Access continues to be a challenge in certain parts of Tigray, including but not limited to Werelehe, Saharti Samre, Hawzein and Kola Temben woredas where partners were unable to smoothly distribute food.
- There continues to be requests from partners to improve on monitoring of food distributions in the Region. Similarly, the latest Emergency Coordination Centre (ECC) meeting on 12 March also stressed the need for all government officials to adhere to distribution guidelines. The newly established Monitoring Working Group is working to address this issue and support the Cluster on improving the monitoring process and ensure principled humanitarian action.
- Partners continue to underscore the need to ensure the adequacy of the food basket and that a full and nutrition-rich basket is delivered. The ECC, on 5 and 12 March, stressed that children under age 5 and pregnant and lactating women are exposed to heightened risk of malnutrition in woredas that are inaccessible for regular food in distributions or where an incomplete food basket was distributed.
- Limited functionality of government structures at the district level, lack of targeting, and insecurity continue to affect food delivery, according to the ECC on 12 March.

**CLUSTER STATUS (22 Mar 2021)**

**Health**

**Needs**

- Health care services in Tigray are extremely limited, leaving hundreds of thousands of people, including those who are chronically ill and others who were injured during the fighting, without adequate access to essential medicines and basic services. Although the 2 referral hospitals in the Region have resumed operations despite some limitations, only 6 of the 14 general hospitals and 6 of the 24 primary hospitals are fully functional, according to the latest Emergency Coordination Centre meeting on 12 March. Further, of the nearly 230 health centres in Tigray, only 29 are fully functional, while 5 are partially functional, according to the Emergency Coordination Center. Ongoing assessments by WHO indicate that 141 of the 198 assessed hospitals and health centres were either partially or fully damaged. All hospitals and centres urgently need more medical supplies, drugs and equipment, according to WHO, and partners report continued looting of health facilities, with 12 further incidents of looting by armed actors reported in the past two weeks.
- Child and maternal services have been drastically disrupted. Less than 16 per cent of the health facilities are providing vaccination services, while only 17 per cent are providing maternal services, such as antenatal care and birth delivery, according to health partners. Access to drugs also remains critically low at 16 per cent of the facilities. Most woreda health offices are not yet functional, according to the Health Cluster.
People living in overcrowded conditions in displacement centres face tremendous health challenges. The rapid assessment conducted by the Bureau of Labour and Social Affairs (BoLSA) and humanitarians in displacement centres in Mekelle Town, for example, showed a high number of diarrheal diseases and women delivering in the camps, as no emergency services are provided during the night. Although free basic attention is being provided, displaced people face challenges to access medicines due to the lack of essential drugs in the hospitals.

Response

In the reporting period, WHO provided orientation for 33 woreda health office surveillance focal points on the integration of mobile clinic activities into woreda health office and primary healthcare interventions. It also provided technical support to re-start the COVID-19 treatment facility, and a facility for moderate to severe cases is expected to re-open next week. In addition, WHO is working with partners to review gaps especially for displaced people in Mekelle, Adigrat, Shire and Adwa. WHO, in collaboration with the Regional Health Bureau (RHB), also completed the ‘Standardization of mobile health and nutrition implementation guide’, which aims to improve access to essential services.

RHB finalized 10 mobile teams, two of which were deployed to Zana and Hawzen woredas. RHB will prioritize Eastern, Central and North Western Zones. According to the ECC on 12 March, there are currently 42 active mobile health and nutrition teams (MHNTs) operating in a total of 37 woredas.

According to the Health Cluster, since the beginning of the conflict, partners have conducted a cumulative total of 46,254 outpatient department services as part of their response in Tigray.

UNICEF delivered 20 Solar Direct Drive freezers and refrigerators, 6 case treatment centre kits and 10 Emergency Drug Kits to RHB, in addition to sending 36 tents to Shire through MSF-H. UNICEF also conducted needs assessments of displaced people in Shire, Axum and Adwa.

UNFPA deployed three midwives to Wolkait, Mitseberi and Alamata hospitals for emergency sexual and reproductive health (SRH) and maternal health services, while four midwives and a midwife coordinator recruited by Ethiopia Red Cross Society with the financial support of UNFPA is expected to be deployed shortly. International SRH specialist has been deployed to Mekelle and has been providing technical assistance, facilitating SRH programmes and engaging in various sub-national coordination forums. UNFPA also provided emergency reproductive health kits, post-rape treatments kits, clinical management of rape services and family planning commodities in partnership with MSF-H mobile health teams.

The International Organization for Migration (IOM) continued to provide emergency health services in Mekelle and Gondar, in addition to initiating a response in Shire and in a camp for displaced people in Tsehaye. IOM currently provides health services in eight sites for displaced people in Mekelle, two sites in Gondar, and through one clinic in Shire. IOM also identified health needs in five sites for displaced people in Adwa and is working to plan a response. An IOM-led scabies campaign is ongoing in Gondar.

International Medical Corps (IMC) provided consultations and treatment for 1,288 adults and children under age 5, as well as delivery services to 3 women in Wolkayit, Tsegede and Kafta woredas. At least 88 people received mental health and psychosocial support (MHPSS), and 77 women in childbearing age received modern contraceptives. IMC, together with community mobilizers who have been recently hired, also conducted health promotion and awareness-raising activities on commonly communicable diseases for 283 people in Wolkite woredas.

In the reporting period, Mothers and Children Multisectoral Development Organization (MCMDO) provided emergency health response in 7 woredas through their MHNTs and has reached a total of 5,128 people through primary healthcare services.

MSF-Spain reached a total of 742 patients through its outreach mobile clinics in Endagahamus, Endamosa, Nabalet, Guhagot and Sebeya woredas.
• Save the Children deployed one MHNT reaching 1,657 people, in addition to providing primary health care services in Adigrat. Save the Children also transported Emergency Drug Kits from Mekelle to Adigrat warehouse and rehabilitated the Tekli Siwuat health care in Adigrat.

• Concern Worldwide deployed one MHNT to Tsaeda Emba and plans to deploy three more teams in the coming two weeks to Hawzen, Erob and Atsbi.

• Action Against Hunger (AAH) resumed mobile health and nutrition activities and provided clinical consultations for 131 children under age 5 and 66 adults in Ruba Kaza health centre and Selam health post. AAH also delivered antenatal care consultations for 13 pregnant women, in addition to facilitating the referral of six severely critical patients from Ruba Kaza health centre to Abi Adi health centre for further treatment.

• Catholic Relief Services (CRS) is operating through its MHNTs as well as static sites, such as Catholic health facilities and Missionaries of Charities (MOC). These health facilities and MOCs are providing life-saving assistance to communities in the catchment areas. CRS is also operating in Erob, one of the most remote woredas bordering Eritrea.

• Marie Stopes Ethiopia established two MHNTs for 10 sites for displaced people in Mekelle. In addition to providing information, counselling and SRH services, it delivered an orientation workshop on SRH to approximately 30 volunteers.

**Gaps**

• According to the Health Cluster, health facilities across much of the Region are not functioning due to the absence of power and water supplies. Similarly, ECC reports that most of the health posts remain closed, and the lack of health office structures at the zonal and woreda-level continues to undermine a coordinated response.

• Given access constraints and various operational challenges and despite recent progress, the ECC reports that MHNTs are only present in about half of the targeted woredas, leaving thousands of people without access to health services. Partners are stressing the urgent need for more MHNTs to be operational across the Region, as well as for these teams to reach more woredas. It is critical that MHNTs are better equipped with enough medical supplies, notably readymade kits. While partners are committed to continue scaling up the response, inadequate funding remains a major challenge.

• According to the ECC on 12 March, the presence and activities of Eritrean troops are posing huge challenges in the health response. Abi Adi hospital, which had previously been occupied by the Ethiopian National Defense Force, is now reportedly occupied by Eritrean forces. Military occupation of the hospital is preventing up to 500,000 people from accessing health services, according to partners on the ground.

• The increasing influx of displaced people from Western Tigray Zone into Shire, Adwa and Axum Towns is overwhelming the capacity of health facilities and partners in the towns.

• The volatile security situation continues to disrupt the transportation of essential medicine, nutrition supplies (Ready-to-Use Therapeutic Food) and other supplies. Partners continue to report a critical shortage and stock-outs in medicines and supplies. Health partners are still unable to access hard-to-reach areas due to the security situation.
As partners access and conduct screenings in more woredas, they are raising alarms about an extremely concerning malnutrition situation across the Region.

Preliminary results from the UNICEF-supported regional Emergency Nutrition Coordination Unit’s (ENCU) Rapid Nutrition Assessment (RNA) conducted in the first week of March indicate that among screened children under age 5, the proportion of those affected by Global Acute Malnutrition (GAM) greatly exceeded the emergency threshold of 15 per cent in all six woredas assessed: 34.5 per cent in Endamehoni, 34.3 per cent in Kilite Awulao, 31 per cent in Hintalo, 29.8 per cent in Enderta, 25.5 per cent in Tseada Amaba, and 23.8 per cent in Raya Azebo. Other nutrition partners also screened 3,067 children under age 5 in the first week of March, out of which 52 and 343 children were identified with severe acute malnutrition (SAM) and moderate acute malnutrition (MAM), respectively. Since the beginning of the conflict, more than 400 SAM admissions have been reported across the Region.

More than half of the 605 pregnant and lactating women (PLWs) screened in ten woredas in early March were identified with MAM. Partners are raising concerns about the unfolding of an intergenerational cycle of nutrition in the Region, which can manifest as increased stillbirths, miscarriages, and risk of maternal and neonatal mortality.

With 346 children aged 6-23 months and 333 PLWs recently reached in Ganta Afeshom woreda, WFP and partners have so far reached a total of 23,463 people, three per cent of the targeted people, with blanket supplementary feeding programme (BSFP).

In the second week of March, GOAL Ethiopia supported the re-establishment of four outpatient therapeutic feeding programme locations in Kolla Temben, Hintalo and Sase and two stabilization centres in Kola Temben and Enderta. Since the beginning of the conflict, Nutrition Cluster partners have re-established 51 outpatient therapeutic programmes and 11 stabilization centres. It has also mentored a total of 73 health facilities on nutrition service and provided on-the-job training for 113 health workers.

UNICEF provided financial and technical support to the regional ENCU in conducting RNA in the six woredas of Endamehoni, Kilite Awulao, Hintalo, Enderta, Tseada Amaba and Raya Azebo.

The sub-national nutrition Cluster continues to meet weekly, and the partners’ mapping has been completed.

Most health facilities across the Region are not yet functional, and there continues to be a shortage of health workers and health extension workers. Looting of health facilities and destroyed Health Management Information System are hindering the scale up of the response.

Access remains a significant challenge, with a partner recently reporting that it was unable to access Sahrti and Samre due to insecurity.

Partners have not yet been able to conduct a comprehensive nutrition survey, and there is still a lack of information on the full scale of needs across Tigray. Available screening data nonetheless point to a serious malnutrition situation, and aid workers report that there is a pressing need to mobilize more resources to meet the high needs on the ground.
CLUSTER STATUS (22 Mar 2021)

Protection

**Needs**

- Gross violations and abuses against civilians, such as forced displacement and returns, killings, abductions, sexual violence including against children, allegedly perpetrated by various parties to the conflict, and reported since the beginning of the conflict, continue to reach the Cluster partners.

- Extremely concerning reports about the alarming prevalence of GBV during the conflict, in flight, and in places of displacement continue. The level of violence and the age of many victims calls for a robust mental health and psychosocial support (MHPSS) response, in addition to immediate access to medical services. The ECC noted on 12 March that there have been at least 516 self-reported cases of GBV. Given the stigma and shame surrounding GBV, survivors in rural and remote areas are less likely to access local or mobile clinics as they are less confidential. Further, since many areas in Tigray remain inaccessible, it is difficult for GBV survivors to receive urgent and life-saving medical care, GBV case management or MHPSS.

- Recent assessments in collective centres for displaced people in Mekelle, Adigrat and Shire towns showed that the severe lack of infrastructure leaves women and children exposed to a range of abuse, including GBV. Many are sheltering in unfinished or damaged buildings and most centres do not include separate spaces or latrines for women and men, doors or even windows. Another 90 unaccompanied and separated children were identified in these assessments.

- Many people report feeling unsafe in IDP sites, which do not have any form of access control. Protection partners and Food Security Cluster members report that many displaced people are hiding assistance received for fear of it being looted or stolen, while there is reportedly mounting tension between displaced people already in the sites and newly arriving people, who are seen as competing for already extremely scarce assistance. According to the Cluster, many displaced people, as a result, feel safer staying outside the sites in more rural areas or among host communities, which, however, create additional challenges to access assistance. Meanwhile, the Cluster also received reports of displaced people in host communities engaging in survival sex because they are unable to pay rent.

- Given these concerns, the Cluster expects that some displaced families may opt to find their own accommodation rather than relocate to the new sites, a situation which may further strain the capacity of hosting communities. At the same time, movements from host communities to the new sites may also occur, as hosting capacity is exhausted or as a result of the perception that more assistance may be provided at these sites. This underscores the importance of needs-based targeting that includes IDPs living in communities and vulnerable host community members.

- As of 18 February, 724 unaccompanied and separated children were registered by the Bureau of Labour and Social Affairs (BoLSA) and Protection partners in Mekelle, Adigrat and Axum Towns. These children are at increased risk of violence and abuse, including GBV, child labour, trafficking and exploitation. With government officials and social workers impacted by the conflict, as well as very limited access to internet, pre-existing mechanisms for restoring family links have been and remain severely weakened.

- The Cluster is receiving reports that many who have been displaced in Western Tigray Zone, including Adi Goshu, Humera and other locations near the Sudanese border, are now struggling to reach Shire. These groups are in urgent need of unimpeded access to safe areas, as well as related assistance and protection. Most of the 45,000 people...
who have reached Shire in recent days are living in the open air, and there is a pressing need to immediately scale up the support for shelter and non-food items. Partners on the ground report that the pace and circumstances of displacement, together with humanitarian assistance, place these people at heightened protection risks.

- Reports of exclusion from food assistance are increasing. The Protection Cluster is receiving reports on alleged exclusion of female-headed households from food assistance unless accompanied by a male family member.

- Forced relocation of displaced people is also reported by protection actors on the ground. While advocacy by protection actors successfully halted the relocation of more than 30,000 people from Axum University to an unused prison in Shire, it is critical that these advocacy efforts continue in order to ensure that a suitable location is identified, that the displaced people are engaged and informed, and that the conditions for safe and dignified relocation are met.

- There have been alarming reports of death-threats to teachers and kidnappings of several students by parties to the conflict to deter school re-opening. Focus group discussions and assessments in Mekelle suggested the instrumentalization of education by different parties of the conflict, giving rise to an urgent need to balance the right to education and the non-derogative right to life, as outlined in the section on Education reporting.

- Overall, many people affected by the conflict in Tigray are traumatized, still face high protection risks and need urgent assistance, including mental health and psychological support. There is an immediate need for the Government to fulfil its responsibility to protect civilians, restore law and order, and bring perpetrators to account. Access to justice and protection of survivors and witnesses of violence are essential to ensure a favourable protection environment.

### Response

- The Protection Cluster, with 16 partners on the ground, is planning to assist 584,515 people, including with monitoring activities aimed at identifying risk groups and referring cases through established and strengthen pathways for specialized services, 246,685 with prevention of GBV programmes, 52,112 with child protection services, including awareness-raising, case management and psychosocial support services, and 145,671 people with housing, land and property services, such as awareness-raising, documentation and legal assistance.

- Mapping of services and referral pathways is ongoing across the Region. The scaling up of the response following the government’s shift to a notification system to access the Region has provided an opportunity for many protection actors to establish a team, and/or expand programming with an emphasis on reaching rural areas.

- In Mai Tsebri trainings on prevention of sexual exploitation and abuse (PSEA) are being planned. In Mekelle, the PSEA-Network has shared education and communication materials (in Tigrinya and English), as well as the GBV Pocket Guide on providing support to survivors for non-specialized aid workers and organizations.

- The Cluster has been working closely with Camp Coordination and Camp Management actors to support the planned relocation of displaced people from school compounds. A joint guidance note is under development in Mekelle, and community consultations will begin very soon, in order to provide clear, detailed information about the planned relocation and sites to displaced communities and better understand their views.

- In certain locations, displaced people are being required to present IDs, which many lost or left behind when they fled, or otherwise provide witnesses who can confirm their identity. In response, the Cluster is advocating that many IDPs who do not have identity documents should not be excluded from registration and assistance and is stressing the need for a system for re-issuing government documents.

- Partners continue to provide medical and psychosocial support to GBV survivors and women and girls at risk. Organization for Social Service, Health and Development provided GBV community outreach and awareness for women and girls in Ethio-China IDP site. UNFPA identified and addressed gaps in essential medical supplies to treat GBV survivors in Mekelle, and additional Clinical Management of Rape kits have been requested from pre-positioned
supplies available. Work across the AoR partners is underway to identify best place for expansion of safe shelter service for GBV survivors in Mekelle, and to expand the One Stop Centre modality across other zones in Tigray to ensure survivors have comprehensive access to medical, mental health and psychosocial, and legal assistance.

- Since January 2021, over 5,000 women, children and men have been reached by World Vision and International Rescue Committee with outreach and awareness raising activities in Mekelle, Indasillassie and May Tsebri Towns. Further, a total of 2,655 women and children have received psychosocial support and have been supported with Child Protection (CP) and GBV case management services from government, INGO and national NGO partners. 12,251 women and girls in Tigray have been supported with dignity kits to enhance their dignity and ensure basic needs are met.

- In the second week of March, Save the Children and Operation Rescue Ethiopia continue providing critical psychosocial support to children in Hadinet, Kisanet and Mekelle, while the Bureau of Justice also provided CP case management services. In parallel, the child protection referral pathway for Tigray was reviewed and updated. This pathway operates within the Ministry of Women, Children and Youth’s National Child Protection Case Management Framework (NCMF). It aims to connect and coordinate all service providers working with children across the different sectors and ensures a standardized and integrated system for child protection that is comprehensive and complementary to Ethiopia’s national policies and other legal frameworks.

- The Ethiopian Red Cross (ERC) is providing family reunification services, while other protection partners are also referring and identifying cases. In Mekelle, BoLSA has reportedly mobilized 150 social workers to engage in registration and family tracing for unaccompanied and separated children in cooperation with ERC.

- The Cluster recently finalized its input to the Joint Protection-Health Response Plan to address the Sexual and Gender-Based Violence and Mental Health and Psychosocial Support (MHPSS) needs across Tigray. The plan includes the scale up of the response in several areas, including legal aid support, case management, MHPSS and enhanced health services. It further outlines additional activities to be implemented through other clusters including Camp Coordination and Camp Management, Emergency Shelter, WASH and Education.

- The Protection Cluster and the Food Cluster continue to work together to develop a joint plan to mitigate the risk of food exclusion and reported threats at distribution points.

- Given the reported death-threats to teachers and kidnapping of students, the Protection Cluster continues to work closely with the Education Cluster to develop a common position to balance the right to education with the non-derogative right to life and is engaging with other humanitarian partners for advocacy. The Cluster will also work with relevant partners to address protection risks associated with back-to-school plans and ensure the voluntary, safe, and dignified relocation of displaced people currently sheltering in schools.

### Gaps

- Despite the gradual scale-up, the protection response remains insufficient compared to the scale of the needs and identified targets.

- The network of local and regional government protection services has been deeply disrupted by the conflict. Access to these services has been made much more difficult, and the situation is particularly concerning for displaced people across the Region. Assistance remains concentrated in towns along main roads, with rural areas receiving much less assistance.

- Government officials in Shire and Mekelle are reporting serious challenges in registering displaced people, due to limited staffing, lack of equipment, and large numbers of new arrivals particularly in Shire. There are also challenges in mapping the displaced communities, as people remain dispersed across the Region and many are afraid of presenting themselves at IDP sites.
CLUSTER STATUS (22 Mar 2021)

Water, Sanitation and Hygiene (WASH)

Needs

- With access to water, hygiene and sanitation (WASH) services largely disrupted across Tigray, communities are at heightened risk of disease outbreaks, including water-borne diseases and COVID-19. COVID-19 services have been drastically reduced and, according to WASH Cluster estimates, around 250 motorized water pumping systems in towns are out of order due to lack of fuel and electricity, damage, looting, and vandalizing. Concerningly, the status of some 11,000 hand pumps in rural areas is unknown due to access constraints. The situation is particularly dire in sites for internally displaced people. A rapid assessment carried out in nine displacement centres in Mekelle reported a shortage of water and WASH non-food items (NFIs), including buckets and jerry cans, as well as poor hygiene conditions. Open defecation was observed in some schools due to the limited number of latrines available and issues around utilization.

- Recent assessments on the status of boreholes led by the Tigray Regional Water Bureau, with support from UNICEF and WASH partners, found that only 4 of the 36 assessed towns have partially functioning water sources. Most of the equipment, notably electromechanical equipment, including switchboards, generators, pumps, solar panels, transformers, reservoirs and spare parts, were damaged or looted, while all water offices building had been looted or vandalized. In particular, the water office in Adigrat was found to be burned down.

Response

- The Cluster has cumulatively reached more than 631,500 people with water trucking, exceeding the initial target of approximately 347,100 people. The number of people targeted, however, continues to rise due to the ongoing fighting.

- In Shire, humanitarian partners have accessed and assessed all locations of the water supply system, including May Dumo raw water source, May Anbessa treatment plant and Enda Michael service reservoir. The Water Office has started repairing the infrastructure, while noting that the damage is more serious than previously assumed. International Rescue Committee will support with technical expertise and resources, as well as the transport of daily labourers. The rehabilitation of the water supply system will contribute to ensuring sustainable water supply across Shire town and in sites for displaced people, and provide for approximately 60,000 people with safe water per day.

- Since the last week of January, more than 90,000 people have been reached with the construction of emergency latrine and bathing/hand washing facilities.

- Since the beginning of the conflict, WASH partners have reached over 220,000 people with emergency WASH NFIs.

Gaps

- Beyond water trucking, the response remains critically low for emergency latrine, bathing and hand-washing facilities, and hygiene and sanitation items. Only 13 per cent of the targeted people have been reached with emergency latrine, bathing and hand-washing services, while 32 per cent have received WASH NFIs.
Lack of access to large parts of Tigray and movement restrictions continue to pose significant challenges to the response. Partners also report ongoing difficulties in finding enough transport suppliers and vehicles due to the volatile security situation. The security situation continues to disrupt efforts to conduct assessment and provide maintenance in many areas, including Abreha-Atsbeha well field near Wukro and Mai Dimu Dam near Shire.

Partners continue to stress the lack of electromechanical equipment and spare parts, as well as a shortage of water purification chemicals, such as chlorine and aqua tabs.

**CLUSTER STATUS** (22 Mar 2021)

**Logistics**

**Needs**

- While the Logistics Cluster has so far transported over 1,160 metric tons (MT) of non-food humanitarian cargo on behalf of its partners along the main routes into Tigray, primarily Gondar – Mai Tsebri – Shire routes, and from Kombolcha to Mekelle, secondary routes have yet to be serviced due to lack of requests from partners for delivering of cargo along these routes. Additional food operators are needed to complement ongoing efforts to deliver aid to areas that have not been reached for over three months.

- The supply of commercial trucks is expected to be further limited during the agricultural season—March to September—according to the Logistics Cluster Partners. Overall, increased capacity to mobilize humanitarian supplies and personnel, particularly to rural areas of Tigray, is needed to allow partners to scale up the response.

**Response**

- The Logistics Cluster is increasing its capacity and has now established six storage capacities and common transport from Addis Ababa, Adama, Kombolcha, Semera, Gondar, and Mekelle.

- Further, a 4,000 square metre facility with a 1,600 square metre warehouse has been established in Mekelle and is operational as of this week. In the coming month, the Cluster will be working to identify common storage for partners in Shire.

- In the reporting period (10 to 17 March), the Logistics Cluster facilitated the transport of 305 MT of cargo from Addis Ababa to Tigray for six partners. Among the material facilitated by the Logistics Cluster were 164 MT of cargo (health, WASH and nutrition items) from Addis Ababa to Mekelle, 67 MT of cargo (WASH and education items) from Addis Ababa to Shire for one partner, and another 44 MT of cargo (WASH and shelter items) from Addis Ababa to Shire for one partner.

- The Cluster currently supports 31 partners in the Tigray response and is on standby to facilitate access to a dedicated WFP fleet to support the humanitarian community, should commercial transport become unavailable.

**Gaps**

- Ongoing insecurity is the main challenge of the response.
COORDINATION (22 Mar 2021)

REGULAR MEETINGS

The Inter-Cluster Coordination Groups (ICCG) have been activated in Mekelle and Shire and are holding regular meetings. Clusters have mobilized sub-cluster coordinators to Mekelle as well as to Shire, and cluster meetings have started to take place. Meanwhile, the Interim Administration-led Tigray ECC continues to meet weekly with joint sector meetings with the humanitarian community and held its latest meeting on 12 March.

VISUAL (8 Mar 2021)

Funding Update