The Ethiopian Government’s announcement of an immediate unilateral humanitarian ceasefire on June 28, 2021 has shifted the political dynamics in the Northern Ethiopian Region of Tigray drastically. Following the withdrawal of the Interim Government and the Ethiopian National Defense Forces (ENDF) from the capital, Mekelle, the Tigray People's Liberation Front (TPLF) took over control of major cities and roads in the region. Electricity and communications have been cut throughout Tigray since then, flights suspended, road movement restricted and two bridges have been destroyed further compromising humanitarian operations on the ground.

This changing context comes amid a dire humanitarian situation with nearly 91% of the region’s population\(^1\) in need of emergency aid and over 5.5 million people\(^2\) in Tigray and the neighboring regions of Afar and Amhara facing high levels of acute food insecurity. In the midst of the unfolding events, the United Nations and numerous governments have called for a ceasefire to be respected, especially to allow humanitarian aid to reach civilian populations.

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Situation Overview

Over the past two weeks, a series of events in the political arena has brought humanitarian operations to a halt in the Northern Region. Amidst a fluid and uncertain situation, the killing of three aid workers from MSF-Spain on June 25, deeply shocked the humanitarian community and prompted the evacuation of personnel and the suspension of operations in some parts of Tigray, further compromising the access to health care and life-saving assistance for the conflict-affected population.

The declaration of ceasefire by the Federal Government and the takeover of power by the Tigray People's Liberation Front brought a new shift in the regional dynamics and additional constraints for delivering life-saving aid in the region. The cut off of essential services, the communications blackout, restrictive checkpoints, as well as shortages of fuel and cash are major constraints for current humanitarian partners’ capacity and ability to resume operations across the region.

Situations remain uncertain for the nearly 2 million internally displaced people scattered across major cities in Tigray (see map) and the neighboring Afar and Amhara regions. After nearly a week on hold, assessments on the implications of the recent events are being conducted by humanitarian partners in order to resume operations as soon as the situation stabilizes, especially in hard-to-reach and previously not accessible areas.

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3 Tigray in Ethiopia: https://joshuaproject.net/people_groups/15481/ET
5 IOM-Displacement Tracking Matrix 6 (June 24, 2021): https://dtm.iom.int/reports/ethiopia—emergency-site-assessment-6-3—24-may-2021
The rising food insecurity in the Tigray Region is alarming where 1.8 million are on the brink of acute food insecurity and more than 400,000 people are estimated to have crossed the threshold into famine. In addition, there are an estimated 3.8 million people in need of health care while the health system’s capacity has been seriously diminished after widespread damaged and looting by armed groups. Despite the scale up efforts, the main barriers to build back capacity for health care provision continue to be the severe lack of staff (26%), medical supplies and equipment (56%) and lack of training of health staff (14%), as reported by HeRAMS-WHO. Protection concerns for vulnerable populations caught at the crossfire of armed clashes or airstrikes, as well as the persistent reporting on serious sexual and gender-based violence cases, outline the current protection crisis in Tigray. Current reported cases of sexual and gender-based violence are likely only a fraction of the actual cases as stigma, shame, fear of reprisals, as well as the lack of health, legal/police and psychosocial services continues to drive underreporting in the region. The Minimum Initial Service Package (MISP) calculator methodology indicates that at least 26,000 survivors of sexual violence are expected to seek clinical management of rape services in the coming months while the proportion of health facilities partially available to provide care in the region is 29%.

UNFPA is currently assessing the security and operational situation to resume the scale up of implementation of relief activities across the region, including the relocation of international surge capacity. UNFPA’s Preparedness and Response Plan for the Tigray crisis focuses on preventing and responding to gender-based violence, bridging protection, gender equality and MHPSS, while building back capacity on sexual and reproductive health and rights in the conflict-affected regions in Northern Ethiopia. UNFPA has presence in Mekelle (Tigray), Semera (Afar) and Bahir Dar (Amhara) with 17 deployed International Surge Capacity Specialists and 7 National Specialists for the Tigray Response.

Of the people in need:

1,300,000 are women of reproductive age
117,846 are currently pregnant women
13,094 expected births per month
624,000 are adolescent girls (10-19)

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6 USAID - Ethiopia, Tigray Crisis, Fact Sheet #9 (June 16, 2021): https://reliefweb.int/sites/reliefweb.int/files/resources/2021_06_16%20USG%20Tigray%20Crisis%20Fact%20Sheet%20%239.pdf
8 HeRAMS Ethiopia (Tigray): https://herams.org/project/46?parent_id=553&page_id=563
9 Based on Minimum Essential Service Package (MISP) calculator: https://iawg.net/resources/misp-calculator
10 HeRAMS Ethiopia (Tigray): https://herams.org/project/46?parent_id=553&page_id=563
11 Based on Minimum Essential Service Package (MISP) calculator: https://iawg.net/resources/misp-calculator

https://ethiopia.unfpa.org
• Conducted a 2-day Clinical Management of Rape (CMR) training in collaboration with Save the Children International for 50 health care workers (23 in Adigrat and 27 in Axum) working in 15 hospitals and emergency health units in Tigray Region.

• 22 health care providers were trained in sexual and reproductive health and management of miscarriage in collaboration with the Ethiopian Midwives Association (EMwA) in Dubti Hospital, Afar Region.

• Distributed 34 SHR Kits to provide services for 12,750 individuals, including reusable materials for 10 midwives and 2 hospitals. The distribution was done in partnership with the Ethiopian Red Cross Society (ERCS) to the following health facilities in Amhara Region:
  o 2 SRH Kits distributed to Wolkayt Hospital;
  o 15 SHR Kits provided to Awra Health Centre;
  o 7 SHR Kits distributed to Beaker Health Centre;
  o 10 SHR Kits provided to Kafta - Humera Health Centre

• Mobilized USD 449,633.27 from OCHA Ethiopia Humanitarian Fund (EHF) for procurement and provision of emergency RH kits to health facilities across conflict-affected areas in Tigray, Amhara and Benishangul Gumuz regions. More than half of the approved budget will be used for the strengthening of MH/SRH and GBV service provision in the Northern Ethiopia’s emergency response.

### AT A GLANCE

#### MIDWIFERY SERVICE PROVISION (*To date*)

<table>
<thead>
<tr>
<th>REGION</th>
<th>SERVICE PROVIDED</th>
<th>FROM 16 - 30 JUNE</th>
<th>GRAND TOTAL (SINCE MARCH 2021)</th>
</tr>
</thead>
<tbody>
<tr>
<td>AFAR</td>
<td># deliveries attended to by skilled provider</td>
<td>34</td>
<td>205</td>
</tr>
<tr>
<td></td>
<td># outpatients for post-natal care (PNC) within 42 hr.</td>
<td>35</td>
<td>209</td>
</tr>
<tr>
<td></td>
<td># outpatients for antenatal care consultations (ANC)</td>
<td>86</td>
<td>472</td>
</tr>
<tr>
<td></td>
<td># outpatient visits for family planning (male and female)</td>
<td>35</td>
<td>466</td>
</tr>
<tr>
<td></td>
<td># visits for STI/HIV counseling, screening, testing or other treatment</td>
<td>68</td>
<td>183</td>
</tr>
<tr>
<td></td>
<td># referrals for higher level of obstetric care/emergency (mother/newborn)</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td># of ANC outpatients visits, including PMTCT</td>
<td>86</td>
<td>490</td>
</tr>
<tr>
<td></td>
<td><strong>TOTAL AFAR</strong></td>
<td><strong>344</strong></td>
<td><strong>2,030</strong></td>
</tr>
<tr>
<td>AMHARA</td>
<td># deliveries attended to by skilled provider</td>
<td>11</td>
<td>63</td>
</tr>
<tr>
<td></td>
<td># outpatients for post-natal care (PNC) within 42 hr.</td>
<td>23</td>
<td>136</td>
</tr>
<tr>
<td></td>
<td># outpatients for antenatal care consultations (ANC)</td>
<td>134</td>
<td>501</td>
</tr>
<tr>
<td></td>
<td># outpatient visits for family planning (male and female)</td>
<td>126</td>
<td>511</td>
</tr>
<tr>
<td></td>
<td># visits for STI/HIV counseling, screening, testing or other treatment</td>
<td>120</td>
<td>496</td>
</tr>
<tr>
<td></td>
<td># of referrals for higher level of obstetric care/emergency (mother/newborn)</td>
<td>5</td>
<td>34</td>
</tr>
<tr>
<td></td>
<td># of clinical management of rape visits completed within 72 hours of assaults</td>
<td>0</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td># of ANC outpatients visits, including PMTCT</td>
<td>13</td>
<td>327</td>
</tr>
<tr>
<td></td>
<td><strong>TOTAL AMHARA</strong></td>
<td><strong>432</strong></td>
<td><strong>2,080</strong></td>
</tr>
</tbody>
</table>
Of the people targeted:

26,000 estimated women of reproductive age (15-49) are expected to seek services for SGBV based on MISP Calculation Methodology\textsuperscript{12}

- **1,300 young women and girls living at IDP camps** - 300 in Adwa, 300 in Axum and 700 in Shire - were trained (through Women and Girls Safe Spaces) for two days on psychosocial support and GBV referral pathways. This was done in collaboration with Mums for Mums and Organization for Social Services, Health and Development (OSSHD).

- **Conducted a three-day training for 34 social workers on psychosocial support (PSS) and GBV referral pathways** in collaboration with Mekelle University and the Bureau of Women and Children Affairs in Mekelle, Tigray. The attendants were 24 existing and 10 newly recruited staff for the One-Stop Centers (OSC) at Axum, Adigrat, Idar, Shire, Maychew, and Mekelle (Tigray).

- **Provided financial support through the Regional Bureau of Women and Children Affairs to 30 GBV survivors** requiring services at One-Stop Centers across Tigray.

- **Developed the Scale Up Capacity Building Framework** for WGSS and OSC staff to be implemented across the Northern Ethiopia’s Response.

\textsuperscript{12} Based on Minimum Essential Service Package (MISP) calculator: \url{https://iawg.net/resources/misp-calculator}

*Note: Due to a persistent communication blackout in some areas of Tigray, the reporting of midwifery services is inconsistent and challenging over time.*
- Supported the finalization of the of the MHPSS 4Ws/Mapping tool for MHPSS services developed by IOM and UNFPA to strengthen coordination and reporting across the multi-sectoral response in the Tigray crisis.
- Trained 19 health care providers in collaboration with the Ethiopian Midwives Association (EMwA) on Psychosocial First Aid (PFA) to provide services at health facilities and OSCs in Amhara Region in areas bordering Tigray.
- Update the roll-out plan on Psychological First Aid (PFA) training sessions for 230 GBV service providers at 23 IDP sites in collaboration with OSSHD. The training sessions will include the 'para-counsellors' who were trained by Regional Health Bureau and UNFPA in linking up and promoting the strengthening of MHPSS responses in the region.
UNFPA Ethiopia Response to the Tigray Crisis

Situation Report_ 15 to 30 June 2021

Logistics and Distributions

3,000 Dignity Kits
dispacted to UNICEF to
be distributed across
Tigray

28 emergency reproductive health
kits dispatched to 4 Implementing
Partners in Amhara and Tigray
Regions

- Requested the stock transfer from Adama to Mekelle warehouse of nearly 40 metric tons of supplies through the Logistics Cluster. Due to the changing regional dynamics the transport of supplies into the region by the Logistics Cluster, the dispatch of cargo is currently on hold and discussions are underway to revisit the transport guidelines last signed back in November last year.

- Submitted the Procurement Request for commodities and medical supplies funded under CERF, USAID, Danish MFA, EHF, Norway and UNFPA for the scale up response to the Tigray crisis.

- **Dispatched on site 11 SRH Kits and other medical equipment** to MSF-Belgium, MSF-Spain and Tigray Regional Health Bureau in Mekelle, Tigray.

- **Provided 3 tents from WHO to the Organization of Social Services, Development and Health (OSSHD)** for the establishment of Women and Girls’ Friendly Spaces at IDP sites in the Tigray Region.

<p>| IMPLEMENTING PARTNERS FOR NORTHERN ETHIOPIA RESPONSE (*Cumulative numbers) |
|-------------------------------|-----------------|-----------------|-----------------|---------------|</p>
<table>
<thead>
<tr>
<th>#</th>
<th>Implementing Partner (IP)</th>
<th>Dignity Kits (DKs)</th>
<th>SRH Kits</th>
<th>Medical Equipment &amp; others</th>
<th>PPE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Afar Pastoralist Development Association (APDA)</td>
<td>3,600</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>2</td>
<td>Ethiopian Red Cross Society (ERCs)</td>
<td>89</td>
<td>41</td>
<td>4,064</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Food for the Hungry (FH)</td>
<td>250</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Inter-Agency Standing Committee (IASC)</td>
<td>12</td>
<td>615</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>International Medical Corps (IMC)</td>
<td>119</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>IOM</td>
<td>3,600</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>MSF-Holland</td>
<td></td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>MSF-Belgium</td>
<td></td>
<td>9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>MSF-Spain</td>
<td></td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Medical Teams International (MTI)</td>
<td></td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Mums for Mums</td>
<td>1,015</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>OSSHD</td>
<td>700</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Tigray Regional Health Bureau (TRHB)</td>
<td>20</td>
<td>3 (<em>Ayder Hospital)</em></td>
<td>4,811 items (<em>OSC)</em></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Mekelle University</td>
<td></td>
<td>119</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Save the Children International (SCI)</td>
<td></td>
<td>48</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>UNICEF</td>
<td>3,000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>UNHCR</td>
<td>2,769</td>
<td>56</td>
<td>6,934</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>UNFPA</td>
<td>250</td>
<td>36</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>15,184</strong></td>
<td><strong>403</strong></td>
<td><strong>4,974</strong></td>
<td><strong>11,613</strong></td>
<td></td>
</tr>
</tbody>
</table>
UNFPA Ethiopia Response to the Tigray Crisis

Situation Report_ 15 to 30 June 2021

Coordination and Partnerships

UNFPA:

- Led the efforts to fast-track the onboarding new implementing partners for UNFPA’s scale up plan in Tigray region - Food for the Hungry - FH, Medical Teams International - MTI, Action for the Needy in Ethiopia - ANE.

GBV AoR Coordination

UNFPA as the lead agency for GBV AoR coordination:

- Co-Facilitated jointly with the Ethiopian PSEA Network a two-day PSEA ToT training for 26 humanitarian workers in Shire, Tigray.
- Discussed and agreed with Trocaire and CST Group for the delivery of a full package of case management and Caring for Child Survivors (CCS) training to UNFPA’s implementing partners in Tigray.
- Met with delegates of IOM HQ to discuss their request to conduct a GBV mainstreaming training to the Camp Coordination and Camp Management (CCCM) and Shelter Cluster, including areas of further support on GBV programming and coordination.
- Finalized the GBV AoR Response Update on Tigray’s response for June 2021 showcasing GBV partners implementation and response across Tigray Region.

UNFPA and ERCS midwife monitoring fetal movement of a displaced pregnant woman in the Maternity Waiting Unit at Aba’ala Hospital in Zone 2, Afar Region.

Photo by © UNFPA Ethiopia/Tilahun Gemechu.
Produced a story to showcase the life-saving work of UNFPA and ERCS midwives across the Tigray Response.

- Tigray conflict decimates maternal health services, overwhelms health workers

**Resource Mobilization**

Special thanks to the major donors supporting @UNFPAEthiopia Response to the Tigray Crisis:

- CERF 2020 - 1,500,539 USD
- Emergency Fund - 1,511,256 USD
- Danish MFA - 1,600,000 USD
- CERF 2021 - 2,500,003 USD
- Iceland - 250,000 USD
- Friends of UNFPA - 4,000 USD
- Ethiopia Humanitarian Fund (EHF) - 449,633.27 USD

**Funding required: 15,581,865 USD**

- Funding received
- Funding gap*
Delivering a world where every pregnancy is wanted, every childbirth is safe and every young person’s potential is fulfilled

For further information:

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