



Successful pump test of a borehole in Somali region, Bisle kebele ©UNICEF Ethiopia/2017/Godfrey

SitRep # 6 – Reporting Period 20 April – 5 May 2017

ETHIOPIA Humanitarian Situation Report



SITUATION IN NUMBERS

Highlights:

- The National Disaster Risk Management Commission (NDRMC) estimates that the number of drought affected people will reach 7.6 million, an increase by 2 million from the number of 5.6 million beneficiaries estimated in the January 2017 HRD.
- As part of the joint partners' AWD response in Somali region, UNICEF is deploying four multi-sectoral teams in four priority zones and has deployed an additional health specialist to support case treatment centre (CTC) set-up and infection prevention interventions. A total of 31 CTC kits are already pre-positioned in Somali region.
- UNICEF dispatched 62 emergency drug kits to Somali region for 29 mobile health nutrition teams which can support a minimum of 155,000 people to access medical services for three months.
- UNHCR is projecting a huge influx of South Sudanese refugees (100,000 – 250,000) over the coming weeks. UNICEF is preparing a contingency plan for the potential influx of 100,000 refugees.

5.6 million people* require relief food assistance in 2017

303,000 children* are expected to require treatment for SAM in 2017

9.2 million people* require access to safe drinking water and sanitation services

2 million school-aged children* require emergency school feeding and learning materials assistance

There are **829,925** refugees in Ethiopia (UNHCR, April 2017)

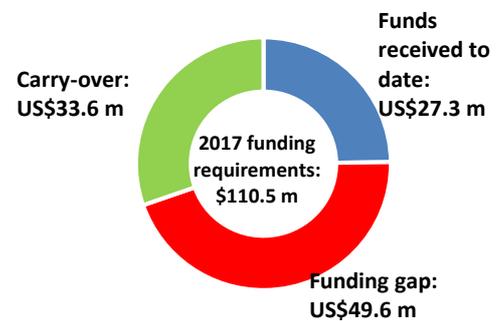
*HRD, January 2017

UNICEF's Key Response with Partners in 2017

Indicators	UNICEF & Partners		Sector/Cluster	
	UNICEF Target	Cumulative results (#)	Cluster Target	Cumulative results (#)
WASH: People accessing safe water	1,460,000	645,000	9,200,000	2,446,000
Nutrition: Children under 5 years with SAM admitted for treatment to therapeutic care programmes	304,300	51,184	303,000	51,184
Health: People provided with access to essential and life-saving health care services	400,000	64,190		
Education: School-aged children with access to emergency education programmes	630,000	150,104	2,000,000	1,700,000
Child Protection: Vulnerable children receiving psychosocial support	30,000	16,599	45,000	11,222

See Annex 1 for more information on programme results for 2017

**UNICEF Appeal
US\$110.5 million
2017 Funds available****



**Funds available include funding received for the current appeal year as well as carry-over from 2016

Situation Overview and Humanitarian Needs

The National Disaster Risk Management Commission (NDRMC) reports that the current number of food beneficiaries has reached 7.6 million, an increase by 2 million from the 5.6 million beneficiaries estimated at the beginning of the year. The upcoming *Belg/Gu* seasonal assessment will verify this estimated increase in the number of people requiring food aid assistance. The NDRMC has reactivated the methodology sub-group to prepare for the *Belg/Gu* seasonal assessment, tentatively planned from 30 May to 15 June 2017. The assessment will cover all *Belg/Gu* rain receiving areas of Amhara, Tigray and Oromia and all parts of SNNP, Afar and Somali regions. The assessment findings will be the basis to review the Humanitarian Requirements Document (HRD) expected to be released on 4 July 2017. The early release of the revised HRD will capture the impact of the *Belg/Gu* rains and enable the Humanitarian Country Team to respond in a timely manner. It will also help mobilize resources and prevent any food pipeline break.

With the arrival of rains in some parts of the country, there is a need for essential targeting of household water treatment and mass chlorination of water sources in areas of high acute watery diarrhoea (AWD) risk. The high number of established case treatment centres (CTCs), particularly in Somali region, require additional WASH resources for infection prevention and control including water supply, water storage, and latrines at these new facilities. These new water supply demands necessitate increased water trucking to provide minimum levels of water for CTCs and units. The WASH Cluster is currently undertaking assessments of the WASH situation in CTCs for prioritized facilities, with a plan to initiate maintenance and rehabilitation.

The Ethiopian Ministry of Foreign Affairs announced that it expects at least 200,000 Ethiopian citizens to be repatriated from Saudi Arabia within the next two months. These Ethiopians are living in Saudi Arabia without residence and work permits and will be repatriated following the Saudi Government's campaign of a 90-day amnesty period to help them leave the country without penalties. UNICEF is preparing a contingency plan to support the Government in receiving these returnees. In 2013, a similar situation occurred when more than 170,000 Ethiopians were repatriated from Saudi Arabia. Among the returnees, 40 per cent were women in addition to a significant number of children, unaccompanied minors, and migrants with serious health conditions. UNICEF supported the 2013 returnees with post arrival medical (provision of emergency drug kits) and psychological services, established breast feeding centres at the reception site in the Addis Ababa airport and had supported the Government, in coordination with IOM, in family tracing and reunification.

There have been reports of ongoing fighting in Jonglei state, South Sudan, which has triggered the movement of people towards the Ethiopian border. Whilst the inflows have been consistently recorded at the Pagak entry point over the past weeks on a smaller scale, information from Akobo indicates that a majority of the affected population have settled within South Sudan, along the Ethiopian border. UNHCR is projecting a huge influx (100,000 – 250,000) over the coming weeks. UNICEF is preparing a contingency plan for the potential influx of 100,000 South Sudanese refugees. Since September 2016, 85,072 new refugees have arrived. A new refugee camp, Gure Shembola camp in Benishangul-Gumuz region, is being established and will have an initial reception capacity of 15,000 refugees. Ethiopia hosts more than 361,991 South Sudanese refugees in the Gambella region. In Somali region of Ethiopia, a total of 4,859 Somali refugees have arrived, on average 44 persons daily between 1 January and 28 April 2017. To date, Ethiopia hosts some 247,000 registered Somali refugees in Somali region. The Government's Administration for Refugees and Returnees Affairs and UNHCR with support from humanitarian partners including UNICEF continue to provide assistance to the nearly 830,000 refugees in the country. The majority of refugees come from South Sudan, Somalia, Eritrea and Sudan.



Humanitarian Leadership and Coordination

There are currently a number of UN agencies and NGOs that are supporting the Government-led humanitarian response. The Government of Ethiopia's (GoE) NDRMC leads the overall humanitarian coordination through the federal and regional level Disaster Risk Management Technical Working Groups (DRMTWGs) and brings together various taskforces and sector cluster partners to coordinate emergency response efforts. Humanitarian partners target priority hotspot *woredas* (districts).

In the Somali region, the Ministry of Health is leading the current AWD response while the World Health Organization (WHO) has deployed a (senior) surge team, now based in Jigjiga, Somali Region. WHO is also strengthening health cluster leadership at national and Somali region level. UNICEF is collaborating and coordinating actions with the new WHO team.

Together with GoE, UNICEF continues to provide cluster leadership for WASH and nutrition as well as co-leadership with Save the Children International (SCI) for education. In addition, UNICEF provides sub-cluster co-leadership with UNFPA for child protection and gender based violence and plays a key role in the health cluster coordination.

As a cross-cutting strategy, UNICEF continues to support Communication for Development (C4D) interventions, including strengthening communication coordination mechanisms, enhancing capacity of social mobilization networks, and dissemination of context specific key messages through multiple channels and platforms.



Humanitarian Strategy: Prepositioning and Partnerships

The 2017 humanitarian response is based on three strategic objectives which will inform sector specific operational plans. These strategic objectives are:

1. Save lives and reduce morbidity due to drought and acute food insecurity
2. Protect and restore livelihoods
3. Prepare for, and respond to other humanitarian shocks – natural disasters, conflict and displacement

In line with its Core Commitments for Children in Humanitarian Action, UNICEF is supporting the GoE to achieve objectives one and three. UNICEF is working with all partners to ensure children have access to health and nutrition care, education, protection and safe water, sanitation and hygiene services during emergencies.

To respond to any rapid onset crises in a timely manner, UNICEF prepositioned non-food item (NFI) stocks in Addis Ababa and at two regional hubs for 120,000 people.

In the refugee response context, UNICEF supports UNHCR and the GoE's ARRA to spearhead emergency response coordination. The partnership is based on a new Memorandum of Understanding which was signed in 2016 between the two sister agencies and a tripartite agreement signed in 2007 with ARRA and UNHCR to establish a framework of collaboration for the delivery of services and assistance to refugees.



Summary Analysis of Programme Response

Nutrition

Preliminary March 2017 Nutrition data for admission of children with severe acute malnutrition (SAM) shows increasing trends of admission in the drought affected regions. With ongoing seasonal rains, the increased risk of AWD spreading could have potential implications on SAM admissions. In addition, in Somali region, the acute watery diarrhoea (AWD) outbreak is posing a serious burden on the regional health system and is a threat to an effective SAM response. In collaboration with WHO, UNICEF is supporting a training on detection and management of SAM in CTCs. A training of trainers was held in Jijiga for 30 medical doctors and health staff, and the training will be cascaded to 160 staff in total, from the four priority zones, namely Jarar, Nogob, Doollo and Korahe. The trained health workers are expected to provide on the job training/mentoring at CTCs.

As limited access to safe water and inadequate sanitation remains a major concern in CTCs, affecting the nutritional status of already vulnerable AWD patients, UNICEF is seeking to provide energy-dense and fortified food (BP5) to CTCs. Funds are secured to procure a total of 16,000 cartons of BP5 and 2,400 cartons of high energy biscuits for the AWD response in Somali region.

To ensure quality of care, Community Management of Acute Malnutrition and Infant and Young Child Feeding (CMAM/ IYCF) monitors continue to conduct regular visits to frontline health facilities and staff and provide capacity building through on-the-job training and CMAM training. In April 2017, CMAM/ IYCF monitors provided training on CMAM to 229 health extension workers (HEWs) in April, in two drought-affected zones (South Omo and Segen) in SNNP region.

In Oromia, UNICEF facilitated a Blended Integrated Nutrition Learning Material (BINLM) training, a comprehensive training on nutrition prevention and treatment, to 40 health extension workers.

All nutrition supplies were sent to regions and zones by UNICEF in a timely manner. To strengthen the monitoring of nutrition supply status at health facilities, UNICEF has developed a monitoring tool which will require partners' support to report on stock at facility level in order to improve utilization and ensure accountability to beneficiaries. In 2017, in support of the CMAM programme, UNICEF dispatched to all regions, ready-to-use-therapeutic-food (RUTF), drugs and therapeutic milk to cover the needs of the first two quarters of the year. More than 102,000 cartons of RUTF were sent to the regions and will be enough for the treatment of an estimated 19,000 children with SAM per month, for six months.

Health

UNICEF dispatched 62 emergency drug kits to Somali region for distribution to the 29 mobile health and nutrition teams (MHNTs) that are operating in remote areas across the region. Each kit contains drugs and medical supplies that can support the medical needs of an estimated 2,500 people for three months. Supported by UNICEF, the Somali Regional Health Bureau (RHB) is operating these MHNTs to provide basic health care services to affected populations.

AWD continues to be reported in Amhara, Afar, Oromia and Somali regions. Although Somali region is the most affected, cases are now decreasing. A coordinated health, WASH and Communication for Development (C4D) response continues by partners, led by the Ministry of Health and RHBs. As part of the joint partners' AWD response in Somali region, UNICEF, together with WHO, is deploying four multi-sectoral teams in four priority zones (Dollo, Jarar, Korahe and Shabelle). UNICEF has deployed an additional health specialist to support CTC set-up and infection prevention interventions. This health specialist also monitors hygiene practices in treatment centres, including adequate isolation of sick patients, availability of water and cleaning of tents previously used as treatment centres. This HR support is critical in preventing the spread of AWD and reducing the death rate of sick patients. To support preparedness for a potential spread of AWD to more localities, UNICEF sent 13 additional CTC kits to Somali region during the reporting period. A total of 31 CTC kits are now pre-positioned at the region and can be quickly mobilized when needed. Each kit contains a tent, 10 beds, stretchers, water containers, soaps and medical materials and is established as a temporary clinic to isolate and treat patients with AWD.

UNICEF continues to support South Sudanese refugees in partnership with the Gambella RHB, UNHCR and ARRA through the provision of emergency health services, disease surveillance, clinical consultation and patient referral at entry points. UNICEF also provides technical and supply assistance to refugees in camps for the provision of primary health services. In 2017, to prevent occurrence of vaccine preventable diseases, UNICEF supported the Gambella RHB to vaccinate 27,599 children (aged 0-15 years) at Akobo and Pagak entry points against polio and 25,675 children (aged from 6 months to 15 years) were vaccinated against measles.

The RHB is also providing emergency consultations to newly arrived refugees and host communities at the clinics established at entry points with technical, financial and supplies assistance provided by UNICEF. Between January and May 2017, 2,939 patients (1,838 refugees and 1,101 host community members) were provided with medical services. UNICEF provided emergency drug kits, soap, plastic buckets and jerry cans to these clinics.

Water, Sanitation and Hygiene (WASH)

Seasonal rains, although late and insufficient at this stage, are providing water for unprotected water sources that are more difficult to monitor for chlorination as part of the AWD response. While demand for water trucking is increasing due to the drought and the established CTCs, financial limitations have proven challenging for this costly intervention. Currently, out of the total 736 water trucks needed in the country, only 437 trucks are deployed to 157 *woredas*. These trucks are collecting water from functioning water supply systems and distributing to more than 2 million people affected by the drought in Afar, Oromia, SNNP and Somali regions. Through a programme cooperation agreement with UNICEF, Oxfam has started water trucking in Somali region. Under the agreement, 167,000 people in temporary resettlement sites, schools, and health facilities will have access to safe water.

In Somali region, the Regional Water Bureau, IRC, UNICEF and Akvo (software provider) are updating real-time information on the functionality of boreholes and including additional data collection tools for monitoring of WASH in CTCs and chlorine monitoring. The findings will help prioritize partners' interventions, including rehabilitation of non-functional schemes, provision of water and sanitation services in CTCs and chlorination of water points. UNICEF is supporting the Somali Regional Water Bureau with four mobile maintenance teams that are deployed across the region to rehabilitate non-functional water schemes. In Oromia, 13 water schemes benefiting a population of 53,000 were rehabilitated.

In response to the AWD outbreak in Somali region, the Regional Water Bureau and UNICEF are undertaking a campaign for mass chlorination of water sources. The Regional Water Bureau has deployed teams to Dollo, Erer, Jarar, Korahe, Nogob and Shebelle zones while UNICEF has deployed a WASH Specialist to support the campaign. UNICEF has trained 88 Government staff and borehole attendants in chlorine dosing, turbidity measurements, and residual chlorine monitoring. UNICEF has deployed a Deputy Regional WASH Cluster Coordinator and is in the process of deploying six additional Information Management Officers to monitor WASH in CTCs, chlorination activities, and distribution of household hygiene and water treatment chemicals. During the reporting period, UNICEF has supplied Somali region with 300 drums of granular chlorine, 60 water storage tanks with 10,000 litres of capacity each, 1,000 handwashing stations, 1,500 buckets (20 litre), 16,022 jerry cans (20 litre), 50 pool testers for monitoring residual chlorine levels, and 100 packs of Diethyl-p-phenylene diamine (DPD) tablets for monitoring residual chlorine levels. In Oromia, 102 water storage tanks were distributed, and granular chlorine (310 drums) was distributed to AWD affected *woredas*. UNICEF also distributed 70 pool testers and packs of DPD tablets for residual chlorine monitoring.

In Gambella, UNICEF supported the establishment of the Itang permanent water system and, in partnership with IRC, is currently providing water to an estimated 140,000 South Sudanese refugees in Kule, Tierkidi and Nguenyiel refugee camps and host communities in the surrounding areas. Additional work is being undertaken on this water system and the construction of 14 water delivery points in Itang town is completed.

Oxfam, through a programme cooperation agreement with UNICEF, completed the construction of 151 blocks of latrines in Nguenyiel camp, each of the blocks has four stances. This is providing access to latrines to an estimated 6,000 South Sudanese refugees.

Education

In Gambella region, through a UNICEF programme cooperation agreement with Plan International and Save the Children, some 2,976 refugee children in lower primary school and 5,328 refugee children in early childhood care and development (ECCD) programme are accessing education services in three refugee camps (Nguenyiel, Tierkidi and Jewi). A total of 40 semi-permanent class rooms are currently under construction in Nguenyiel, Jewi and Tierkidi camps for both ECCD and education in emergencies programmes to support South Sudanese refugee children. In addition, 11 blocks of sex segregated latrines with WASH facilities are under construction. UNICEF provided additional two tents to Plan International to establish classrooms for ECCD children.

Plan International also provided training to 21 centre management committee members and six community leaders on duties and responsibilities, community mobilization, sense of ownership and how to support ECCD centres and 152 national and incentive teachers from ARRA are being trained on basic pedagogy, psychosocial support and teachers' code of conduct.

Child Protection

In Oromia region, 127 children (53 girls, 74 boys) who were subjected to child abuse and separation, were identified by community based child protection structures and social workers. From these, 71 separated and unaccompanied children (14 girls, 57 boys) were reunified with their families. In the same region, with UNICEF support, 1,457 children (712 girls, 745 boys) were provided with psychosocial support services at the child friendly spaces. In addition, 279 community members were reached through community mobilization activities to create awareness on child protection. During the reporting period in Oromia region, 100 participants (45 women, 55 men) from the community care structures were trained to prevent violence and exploitation against children.

During the reporting period 1,086 unaccompanied and separated children among the newly arrived South Sudan refugees were placed in alternative care and 5,377 children received psychosocial support services through structured activities in child friendly spaces and through community based psychosocial support services including outreach services to the families most affected by the displacement from their country, providing psychosocial support to caregivers in the community and engaging religious leaders to facilitate discourses to overcome trauma and distress.

Communication for development (C4D)

UNICEF is engaging communities in the prevention of AWD with behavioural change communication, social mobilization and advocacy to communicate messages about AWD, its prevention and treatment. UNICEF has been communicating the message to affected people that AWD can be treated and that a person with diarrhoea and vomiting should go as soon as possible to a health facility. On the prevention side, messages on washing hands before and after eating, on eating well-cooked food, on boiling or disinfecting and keeping water safe and on using latrines are also disseminated.

Partnering with the media, UNICEF has supported disseminating public information on AWD. During the reporting period, the Oromia Regional Health Bureau, with UNICEF support, conducted AWD and scabies sensitization and awareness raising training for media personnel from Oromia regional and zonal print and electronic media staff. This training will inform the media about the emergency situation and their role in the control of the outbreak through disseminating of accurate information to the public, including how to prevent AWD, transmission and where to get treatment. In Somali region, UNICEF continues to communicate message about AWD on local radio and the BBC Somali. The dissemination of public information will help people know how to prevent transmission, identify early symptoms and seek medical help and is vital to the containment and prevention of AWD.

In SNNP region, UNICEF conducted trainings on scabies prevention and control (56 *woreda* sector office staff, 36 *woreda* health office staff, 67 health professionals, and 48 HEWs in Damot Pulasa *woreda*) and sensitized 3,890 community members and 5,437 students. As part of its multi-pronged communication strategy, UNICEF continues to ensure public awareness through the production and dissemination of leaflets and posters. In SNNP, UNICEF distributed 300 posters and 2,500 brochures. In Somali region, UNICEF deployed 10 C4D staff to the zonal levels and a regional coordinator to support AWD prevention and control messaging.

Media and External Communication

UNICEF Ethiopia has highlighted the Horn of Africa drought emergency on media platforms through the use of human interest stories and photos. External media coverage is being monitored and media outlets have been approached to share stories.

UNICEF attends the Ethiopia Humanitarian Country Team (EHCT) Emergency Communications working group to ensure streamlined messaging and advocacy efforts. From the combined efforts of this working group, an international media trip has been approved by the GoE to visit drought-affected areas and is being organized for 16 May. The press trip will visit two locations, in Oromia and SNNP regions.

Funding

UNICEF Ethiopia requires US\$110.5 million for its humanitarian programme in Ethiopia in 2017. Of this, US\$93.1 million is to respond to the drought emergency in Ethiopia while the remaining is to assist refugee response in the country.

UNICEF is currently responding to the emergency situation in the country using US\$33.56 million carried over from 2016 and US\$27.3 million received in 2017. In 2017, UNICEF has received funds from the HRF, CERF, ECHO, the Governments of Canada, Japan, Sweden and USA and the Swedish Committee for UNICEF. During the reporting period, UNICEF has received US\$50,769 from the Swedish Committee for UNICEF. UNICEF Ethiopia still has a critical gap for nutrition, child protection and learning and development programmes.

The table below shows the funding status as of 4 May 2017:

Appeal Sector	Requirements* US\$	Funds available** US\$	Funding gap	
			US\$	per cent
Nutrition	41,600,000	14,907,855	26,692,145	64%
Health	13,200,000	11,679,797	1,520,203	12%
WASH	36,700,000	29,021,269	7,678,731	21%
Child Protection	3,900,000	309,073	3,590,927	92%
Learning & Dev	11,600,000	5,001,001	6,598,999	57%
Cluster coordination	3,500,000	0	3,500,000	100%
Total	110,500,000	60,918,995	49,581,005	45%

*Requirements reflected in this table for the drought response are part of the HAC 2017.

**Funds available include funding received in 2017 (US\$27.3 million) against current appeal as well as carry-forward (US\$33.56 million). In addition, nutrition supplies valued at US\$9.4 million have also been moved to 2017.

Next SitRep: 19 May 2017



Who to contact for further information:

Gillian Mellso
Representative
UNICEF Ethiopia
Tel: +251 11 5184001
Fax: +251 11 5511628
Email: gmellso@unicef.org

Alhaji Bah
Chief-Field Operations and
Emergency
UNICEF Ethiopia
Tel: +251 11 5184082
Fax: +251 11 5511628
Email: abah@unicef.org

Frehiwot Yilma
OIC-Communication, Advocacy,
Partnerships
UNICEF Ethiopia
Tel: +251 11 5184065
Fax: +251 11 5511628
Email: fyilma@unicef.org

Annex 1

2017 UNICEF results table

	Overall needs	Cluster Response			UNICEF and IPs		
		2017 Target	Total Results	Change since last report ▲▼	2017 Target	Total Results	Change since last report ▲▼
NUTRITION							
Children under 5 years with SAM admitted for treatment to therapeutic care programmes	303,000	303,000	51,184	-	304,300 ¹	51,184	-
Caregivers of children 0-23 months accessing infant and young child feeding counselling	1,000,000	1,000,000	-	-	1,000,000	-	-
HEALTH							
People provided with access to essential and life-saving health care services					400,000	64,190	-
People with access to treatment for diarrhoeal disease					35,000	28,679 ²	9,891
South Sudanese refugee children aged 6 months to 14 years vaccinated against measles					36,000	25,675	4,267
South Sudanese refugee children vaccinated against polio					143,000	27,599	4,357
WATER, SANITATION & HYGIENE							
People accessing safe water	9,200,000	9,200,000	2,446,000 ³	1,146,000	1,460,000	645,000 ³	428,000
People reached with key messages on hygiene practices	4,800,000	4,800,000	1,035,000	138,000	1,600,000	616,000	152,000
CHILD PROTECTION							
Separated and unaccompanied children receiving appropriate care and protection services	25,000	25,000	5,232 ⁴	71	10,000	7,012 ⁵	1,157
Vulnerable children receiving psychosocial support	45,000	45,000	11,222 ⁶	1,457	30,000	16,599	6,834
EDUCATION							
School-aged children with access to emergency education programmes	2,000,000	2,000,000	1,700,000 ⁷	-	630,000	150,104	8,304
OPERATIONAL PARTNERS							
Health	Regional Health Bureaus, Mercy Corps, SCI, ADRA, Ogaden Welfare and Development Association, Islamic Relief, MSF						
Nutrition	Ministry of Health, Regional Health Bureaus Federal and Regional, Emergency Nutrition Coordination Unit (under DRMFS), Concern Worldwide, International Medical Corps, World Vision, Action Against Hunger (ACF), Islamic Relief, Mercy Corps, SCI, MSF, ADRA, GOAL Ethiopia and Plan International Ethiopia						
WASH	Federal and Regional Mines and Water Bureaus, Oxfam Intermon, Adhorn, Ogaden Welfare and Development Association, SCI						
Education	Federal and Regional Education Bureaus, SCI, PIE, Ogaden Welfare and Development Association						
Child Protection	Regional Bureau of Labor and Social Affairs, Regional Bureau of Women, Children and Youth Affairs, SCI, Plan International Ethiopia, the Ethiopian Red Cross Society, GOAL Ethiopia						

¹ Nutrition target for UNICEF would be revised to 307,300 (303,000 for Ethiopia and 4,300 for refugees)

² Health cluster report as of 6 April 2017

³ Figure includes water trucking, expansion and rehabilitation of water schemes. It does not include water treatment chemicals distributions. The largest increase in safe water access is attributed to the rehabilitation of water schemes since the beginning of the year.

⁴ This information captures data against CP Sub Cluster indicator "CP cases identified, referred and responded to" which includes separated and unaccompanied children

⁵ UNICEF data includes 'refugee population' as well.

⁶ This captures data against CP Sub Cluster indicator "children receiving skills and support (including PSS) to prevent, mitigate or respond to CP risks" which includes vulnerable children receiving psychosocial support.

⁷ The GOE and NGOs have reached 1.7 million children with school feeding programme.

