



Child on treatment for severe acute malnutrition, SNNPR
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ETHIOPIA

Humanitarian Situation Report



SitRep # 1 – Reporting Period January 2018

SITUATION IN NUMBERS

Highlights

- Due to drought and large-scale displacement in the southern and south-eastern lowland areas of Ethiopia, humanitarian needs remain significant.
- Ethiopia is the second largest refugee-hosting country in Africa, with 892,555 registered refugees and asylum seekers, 58 percent of whom are children.
- In 2018, an estimated 320,000 children will need treatment for severe acute malnutrition, while outbreaks of malaria, measles and Acute Watery Diarrhoea (AWD) will continue to threaten children’s well-being. 7.4 million people will require access to safe water and 600,000 people will need protection services.
- With improved access to internally displaced people in Oromia and Somali Regions, UNICEF has provided life-saving interventions through Government and humanitarian partners. Since January 2018, UNICEF has provided medical treatment for 4,360 IDPs including 2,724 children.
- UNICEF’s provision of technical support and prepositioned WASH supplies has contributed to a sharp decline in the reported number of cases of acute watery diarrhoea in the Somali Region. However, critical needs remain unmet.

320,000* Children in need of treatment for severe acute malnutrition in 2018

7 million* People in need of access to safe drinking water and sanitation services

2.2 million* School-aged children, including adolescents, in need of emergency school feeding and learning material assistance

1.696 million** Number of internally displaced people in Ethiopia (64 percent displaced due to conflict)

892,555*** Registered refugees and asylum seekers in Ethiopia.

*2018 draft Humanitarian Requirement Document (7.02.18)

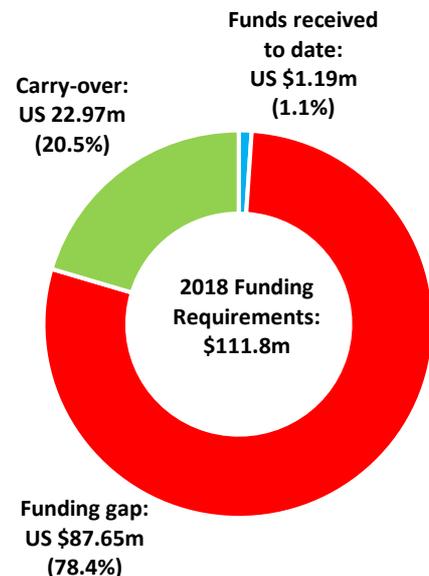
**Ethiopia: Conflict displacement situation report, January 2018, NDRMC and OCHA

*** Registered refugees in Ethiopia (UNHCR, December 2017)

UNICEF’s Response with Partners

	UNICEF		Sector/Cluster	
	UNICEF Target*	Total Results	Cluster Target**	Total Results
Nutrition: Children under 5 years with SAM admitted for treatment to therapeutic care programme	333,500	-	320,000	-
Health: Women and children under 5 accessing essential maternal and child health services	400,000	62,335		
WASH: People accessing safe water	3,110,000	203,649	5,331,010	203,649
Child Protection: Vulnerable children receiving psychosocial support	58,300	-	-	-
Education: School aged children with access to emergency education	300,000	-	2,200,000	-

Funding Status 2018*



*UNICEF target includes 320,000 Ethiopian children with SAM and 13,500 refugees.

**2018 draft Humanitarian Requirement Document (7.02.18)

*Funds available includes funding received for the current appeal year as well as carry-forward from the previous year.

Situation Overview and Humanitarian Needs

Ethiopia is currently faced with a complex crisis of drought and conflict displaced populations. As of December 2017, approximately 1.69 million people were estimated to be internally displaced. An estimated one million people have been displaced because of conflict along the Somali-Oromia regional borders while more than 528,000 are displaced because of climate induced¹ factors. The populations have been displaced in areas that are already experiencing ongoing drought. Below average rainfall, triggered by La Niña, is projected in parts of the south, south-east and north-east during the Feb – May 2018 rainy season which will further exacerbate existing vulnerabilities of the displaced, especially populations in pastoral and agro-pastoral areas.

According to draft 2018 Humanitarian Requirement Document (HRD)², in 2018, an estimated 320,000 children will need treatment for severe acute malnutrition, while outbreaks of malaria, measles and Acute Watery Diarrhoea (AWD) will continue to threaten children's well-being. 7.4 million people will require access to safe water and 600,000 people will need protection services. Some 2.2 million school aged children will need school meals, water and sanitation services and educational materials to go and stay in school.

Evolving political and emergency situations in neighbouring countries has led to an increase in people seeking refuge in Ethiopia. As of 31 December 2017, 892,555 refugees were living in the country with the majority being South Sudanese, Somalis, Eritreans and Sudanese.

Humanitarian Leadership and Coordination

The humanitarian response in Ethiopia is led by the National Disaster Risk Management Commission through the federal and regional Disaster Risk Management Technical Working Groups (DRMTWGs). UNOCHA coordinates the humanitarian response with UN agencies and NGOs to support the Government-led humanitarian response. The Government prioritizes its emergency response based on target hotspot *woredas* (districts).³

UNICEF continues to provide the Government of Ethiopia with crucial support to cluster coordination at varying administrative levels in water, sanitation and hygiene, nutrition, and education with Save the Children International. UNICEF also provides coordination support to the child protection and gender-based violence sub-clusters and plays a key supporting role with the World Health Organisation (WHO) in Health Cluster Coordination. UNICEF has eight field offices in Afar, Amhara, Benishangul Gumuz, Gambella, Oromia, Southern Nations, Nationalities and People's (SNNP) Region, Somali and Tigray regions serving the population through regional and zonal interventions.

Humanitarian Strategy: Prepositioning and Partnerships

The HRD⁴ for 2018 is currently being finalized and represents a first step in the development of a multiyear planning framework. More specifically, the HRD will seek to increase the quality and predictable delivery of a required multi-sectoral humanitarian response, mitigate future needs in areas that experience recurrent climate induced shock, and support the strengthening of national service provision to address chronic and acute needs and the recovery of affected communities. The current HRD seeks to provide assistance across three pillars: Pillar 1: Prevention and Mitigation; Pillar 2: Response and Response Preparedness and Pillar 3: National System Strengthening and Recovery.

In line with its Core Commitments for Children in Humanitarian Action, UNICEF will support the Government under Pillar 2 to respond to humanitarian situations and through its regular programming activities contribute to Pillars 1 and 3. UNICEF is working with all partners to ensure children have access to health, nutrition, education, protection, safe water, sanitation and hygiene services during emergencies.

To respond to any rapid onset of a crisis in a timely manner, UNICEF Ethiopia has pre-positioned supplies, to meet the immediate life-saving needs of 120,000 individuals. Prepositioned stocks are kept in Addis Ababa and in two regional hubs in Gambella and Somali Regions.

Summary Analysis of the Programme Response

Nutrition

UNICEF in 2018 will support the Government of Ethiopia to effectively treat and manage severe acute malnutrition (SAM) in children under 5, provide technical and logistical support for Community Management of Acute Malnutrition, improve access to infant and young child feeding and counselling and support the Nutrition Cluster, led by the Emergency Nutrition Coordinating Unit.

¹ Through collaboration with the NDRMC, displacement caused by environmental factors such as drought, seasonal floods, flash floods and landslides have been categorized as "Climate Induced" IDPs.

² Draft 2018 HRD 7.02.2018

³ A *woredas* is an administrative unit under zone. The administrative hierarchy in Ethiopia is Region, Zone, *Woreda* and *Kebele*.

⁴ Draft 7.02.2018

The recently completed hotspot priority listing of *woredas* describes a critical situation in already drought affected regions in Ethiopia. In the Somali Region, for example, 81 of its 97 *woredas* are classified as priority one and 10 as priority two. Following the official release of the hotspot classification, the SAM caseload estimation exercise led by UNICEF and the Nutrition Strategic Advisory Group (SAG) took place in January. An estimated 333,500 children with SAM are expected to be treated in 2018, which includes 13,500 South Sudanese refugee children. It is very likely though that this figure will be revised mid-year.

To support the Government of Ethiopia's capacity to identify, treat and provide therapeutic care to children with SAM, UNICEF supported the facilitation of a national level Training of Trainers exercise for 36 health workers selected from all regions and two administrative councils (Addis Ababa and Dire Dawa) in January 2018.

In areas where access can be unpredictable due to sporadic conflict, UNICEF and WHO, together with NGOs, are supporting mobile health teams to provide outreach services that offer flexibility and agility to deliver services if, and when access is available or where communities are hard to reach or have poor access to fixed site services.

Within the Nutrition Cluster, significant funding gaps are anticipated in the first half of 2018. Further, a delay in the approval of therapeutic feeding programme (TFP) data is a major challenge for programme decision-making. The November 2017 TFP data has just been approved with no approved TFP data for December 2017 or January 2018.

Health

Key findings from the IOM Displacement Tracking Matrix (DTM) Round 8 data showed that more than 80 per cent of IDPs have access to health services, nearly 60 per cent of health facilities are located less than three kilometers from IDP sites, and nearly 50 per cent of health facilities accessible to IDPs had medicines. However, there have been reported measles outbreaks and reported cases of acute watery diarrhoea (AWD) where IDPs have settled.

While a decrease in the number of confirmed cases of AWD has been reported, reports are still occurring particularly in the Shabeele Zone in the Somali region. Low coverage of safe drinking water along with poor hygiene and sanitary practices continue to drive the outbreaks. UNICEF and WHO with the Regional Health Bureau are leading surveillance, awareness raising, response, treatment and containment efforts. Both the Federal and the Somali regional health command posts have been reactivated.

Scabies outbreaks have been reported in Amhara, Benishangul-Gumuz, Oromia, SNNP and Tigray regions, driven by a lack of awareness to identify and treat coupled with poor hygiene practices. Response to the situation is ongoing with health partners strengthening active surveillance, case finding, treatment of patients with scabies and their close contacts complemented by community for development initiatives through social mobilization to promote correct hygiene practices. In January 2018, UNICEF provided 12,600 anti-scabies lotions to the East and West Haraghe zones of the Oromia region.

During the first three weeks of January 2018, 108 suspected cases of measles (zero deaths) were reported by ESRHB from Dollo, Korahey, Jarar and Fafan. An integrated polio and measles campaign in Somali region, including in Dollo, Korahey and Jarar, which started in the third week of January 2018 is ongoing and expected to be able to control the ongoing measles transmission. The integrated polio and measles campaign in Dollo zone covers 56 sites including 32 IDP sites and 24 *kebeles* which were identified as measles hot spots.

To effectively respond to health and nutritional needs of children and women in hard-to-reach communities, UNICEF is supporting the deployment of 29 Mobile Health and Nutrition Teams (MHNTs) in Afar and Somali regions. Further, UNICEF provided Essential Drug Kits to 11 NGO-run MHNTs and 6 MHNTs run by the Regional Health Bureau in the Somali region. The MHNTs have proven to be relevant, effective, context-sensitive and culturally acceptable interventions in pastoralist areas. The teams provide case management support, logistical assistance, coordination, and capacity building of health workers in planning and responding to emergencies. In January 2018, in the Afar and Somali regions, the MHNTs provided essential health and nutrition services to 62,335 people, including 24,934 children.

In support of the IDP response, the regional health bureaus with support from health partners including UNICEF provided medical treatment for 4,360 IDPs including 2,724 children. UNICEF supplied Emergency Drug Kits.

In the Gambella region, 2,257 newly-arrived South Sudanese refugee children received polio vaccinations while 2,149 children received measles vaccination and Vitamin A supplementation.

The Health Cluster has identified significant funding gaps to respond to the current climate-induced and conflict-driven displacement.

WASH

The Government weather forecasts indicate that in the first quarter of the year, there will be below normal rainfall for the lowland areas including Afar, Oromia, SNNP and Somali regions. With little rainfall, there will be an increased demand for access to safe water. While water trucking has provided an immediate and viable lifesaving intervention, it is costly and unsustainable. At current capacity, the demands for water trucking nationwide far outweigh water trucking capacities and the current resources available. To mitigate the immediate needs, UNICEF on behalf of the cluster is preparing a US\$5 million proposal to CERF. Along with water trucking, UNICEF continues to focus on the rehabilitation and maintenance of non-functional water supply systems and the construction of new systems to improve the resilience of communities.

In the Oromia region, UNICEF has started a water trucking operation with 30 trucks in 16 *woredas* in East and West Hararghe and Bale zones reaching 176,149 IDPs and host communities; three water trucking monitors have been deployed to monitor the quality of water distributed and that the affected population has received water. Thirty-six water storage tanks have already been distributed to the sites and procurement of 48 additional tanks is under process. Furthermore, with UNICEF's financial support, the Oromia Regional Water Bureau has completed rehabilitation and maintenance of 11 motorized schemes in Borena (4 schemes), East Hararghe (3 schemes), West Hararghe (3 schemes) and Guji (1 scheme) benefiting approximately 27,500 people. In addition, to strengthen sub-national technical capacity, two sessions of trainings were conducted on water quality monitoring and information management, by the Regional Water Bureau, to strengthen the capacity of staff at *woreda* and zonal levels (67 officers participated in the trainings). Hygiene promotion/community mobilization is also ongoing in the region in areas affected by scabies.

In SNNPR, drilling of one borehole was completed in Hamer and Benatsemay *woredas* early in January. Construction of one multi-village water supply system is ongoing in Halaba, Mareko, and Bolososore *woredas* and Tercha Town in Dawro zone. These interventions will bring much needed, durable water solutions to these communities.

In Afar region, procurement is under way for 14 pumps and more than 10 generators to support the rehabilitation and maintenance of water supply schemes and in support of the chronic drought situation. The revision of the detailed design of Suula Manda Daba multi-village scheme has been completed and bidding is in process. UNICEF released five emergency water treatment (EMWAT) kits, four collapsible bladders with a capacity of 5,000 liters and more than 600,000 water purification tablets to improve access to safe water to affected communities in Afar region. In Gambella region where the majority of South Sudanese refugees are hosted, UNICEF continues to support the operation of the Itang water supply system.

UNICEF, in partnership with a local NGO the Ogaden Welfare and Development Association (OWDA), and the Regional Health Bureau have continued sanitation interventions in 17 IDP camps in Afder, Doollo and Korahey zones. OWDA, with UNICEF support, has completed 60 blocks of latrines in Doollo and Korahey zone, while the Regional Health Bureau, with UNICEF support, has completed 12 blocks of latrines in Afder zone. These latrines are estimated to benefit 5,800 IDPs. Likewise, construction of 11 blocks by the Regional Health Bureau is underway in Jarar zone with UNICEF support.

In response to the continued AWD reports in the Somali region, UNICEF has contributed WASH supplies to the affected areas and is planning to recruit 10 roving WASH teams. UNICEF, with the support of Save the Children International, has sent WASH supplies, including 570,240 sachets of household water treatment chemicals, 250 jerry cans with a tap for handwashing to health facilities and 20,000 bars of soap for individuals in Qalafo, Mustahil, Godey, Ferfer and Adadle *woredas* in the Shabeele zone, Somali region.

Lack of funding is the main limiting factor to scale up UNICEF and the cluster partner's emergency response. The needs for emergency sanitation in IDP sites are significant, as well as for hygiene promotion in densely populated settlements at risk of AWD and other disease outbreaks. Some of the current WASH NFI stocks (and those in the pipeline) are expected to be depleted by May 2018. There is a gap of 454 water trucks for the entire country which is likely to increase in the coming months. The large number of IDPs puts additional pressure on the existing water resources and it is imperative to work on the development of more permanent/semi-permanent infrastructures.

Child Protection

The conflict along the Oromia and Somali regional borders has exacerbated existing protection risks and is creating new ones. Though the exact number is unknown, displacement has resulted in the separation of children from their parents in both the Oromia and Somali regions. Multi sectoral assessments reveal cases of sexual violence against girls and women and practice of child marriage in the IDP sites. Children engaged in work and children expressing symptoms of psychosocial distress can be observed.

In Gambella Region, Plan International Ethiopia, supported by UNICEF, continued identification and registration of new arrivals in Pamdong reception site. 195 (95 girls, 100 boys) separated children, 93 (48 girls, 45 boys) unaccompanied minors and 17 (7 girls, 10 boys) other vulnerable children were identified in this process and were relocated to Nguenyiel refugee camp. A child protection help desk has been established at Pamdong reception site to provide services for newly arrived children. The help desk facilitated referral of 43 (27 girls, 16 boys) children for health services. In the same site, 18 children (4 girls, 4 boys) who were found missing during the relocation were identified and reunified with their parents and 214 children (84 girls, 130 boys) received psychosocial support through a child-friendly space.

In the Oromia region, with UNICEF support, the Regional Bureau of Women and Children Affairs (BoWCA) organised training on child protection in emergencies for BoWCA staff and staff from key partner agencies from 12 target *woredas* and a BoWCA representative from 5 zones. In Oromia region 1,799 separated and 191 unaccompanied children have been identified and documented. Of those identified, 14 children were reunited with their parents in Fedis and Goro Gutu *woredas* of East Hararghe zone.

UNICEF continued to support the Child Protection sub cluster at the national level with an interim coordinator. The recruitment of a dedicated Child Protection Sub Cluster Coordinator at the national level and a Sub-Cluster Coordinator for the Somali region is complete and successful candidates will start in March.

Sub Cluster reported activities (from UNICEF and the Bureau of Women and Children Affairs-BoWCA) in three IDP sites in Somali region include family reunification, psycho-social support, and child protection case identification and response. In Qoloji IDP site in Somali region, a total of 160 beneficiaries accessed children and women's safe spaces, 103 children were identified as being at risk and requiring follow-up support, and 160 unaccompanied or separated children received assistance for family reunification or alternative care placement.

While efforts are being made by sub-cluster partners to meet the needs of IDPs, there is still a significant gap in the provision of protection services and real time monitoring of protection concerns to address and deliver on targeted, relevant needs. There is currently no analysis from existing data on site specific protection needs for the IDP population.

Education

The 2018 HRD⁵ indicates that 2.2 million children affected by emergencies including drought and conflict will need support in the provision of school meals, water and sanitation services and educational materials in 2018.

The Government has allocated US\$10.7 million for the provision of school meals in all regions. The SNNPR Education Bureau is currently providing school feeding to 140,469 emergency affected school children in 179 schools while WFP is providing school feeding to 87,860 school children (45,622 in Oromia region and 42,238 in SNNPR). UNICEF's implementing partner, Imagine One Day, provided training to 2,040 Parent Teachers Association members and 100 pre-school facilitators in the Oromia region to create awareness on school readiness.

Many schools in emergency affected areas have no water and there is a significant gap in the numbers of temporary learning spaces that are needed to accommodate the IDP population. Despite the urgent need to provide access to education for children affected by displacement in the Oromia and Somali regions, the education sector continues to be substantially underfunded.

Communications for Development (C4D)

The C4D focus in the Somali region has been on the prevention of AWD, integration of nutrition-related messages in IDP sites, and supporting the polio vaccination campaign. In response to the recent AWD outbreak in Shebelle and Sitti zones in the Somali region, the C4D team has worked with regional and zonal health bureaus to reactivate the social mobilization committees in hotspot *woredas*. Moreover, IEC materials that would support the social mobilization and interpersonal communication activities have been distributed to the affected *woredas*. New cases of AWD have declined significantly.

A C4D plan which focuses on nutrition and integrates messaging on health, hygiene and sanitation, and child protection in 42 IDP sites in Somali region has been finalized and implementation has begun with the first Safe Space established in the Qoloji camp that serves approximately 70,000 IDPs. The plan will focus on 42 IDP sites in total with an estimated 16,222 households reached. The intervention is expected to benefit 32,444 caregivers, of which 5,058 are expected to be women with children under 3. Within the Safe Spaces, over 10,800 children under 5 should benefit from optimal feeding practices and 56,194 adolescents and adults, of which 3379 are pregnant women, will be reached with relevant information on infant and young child feeding.

UNICEF Ethiopia supported the recent polio campaign in Somali region by equipping 148 social mobilizers and team supervisors on effective interpersonal communication strategies and techniques, enabling them to better support community mobilization efforts in line with the campaign. Public service announcements on polio vaccination were aired for a week via regional television and radio. Moreover, the regional Islamic Affairs Supreme Council reached religious leaders and an estimated 1.5 million people through public announcements during prayers reaching.

Media and External Communication

UNICEF Ethiopia actively monitors external media coverage to keep track of trends and highlight UNICEF Ethiopia's activities. Together with UNOCHA, UNICEF Ethiopia emphasized the role of donors in the humanitarian context as well as the nexus between development and emergency in media interviews. UNICEF attends the Ethiopia Humanitarian Country Team (EHCT) Emergency Communications working group and is supporting preparations for the launch of the 2018 HRD. In addition, UNICEF Ethiopia is planning to host a visit to the Afar region of key donors from the Humanitarian Resilience Donor Group (HRDG) and the donors' Development Assistance Group to witness the New Ways of Working (NWoW) in the areas of education and WASH. UNICEF Norway will also visit key nutrition and WASH activities in early February.

Funding

UNICEF Ethiopia is appealing for US\$111.8 million for its emergency interventions in 2018. The amount includes US\$15.3 million for the response to refugees.

UNICEF Ethiopia received US\$1.19 million from the Government of Canada in January 2018 to support its humanitarian action. The funding complements nutrition supplies with a value of US\$10 million carried over from 2017. UNICEF also received a loan of US\$3 million from UNICEF HQ to rapidly scale up its response to the urgent and critical needs of IDPs in the Oromia and Somali regions.

⁵ Draft 7.02.2018

UNICEF Ethiopia funding status as of 31 January 2018

Appeal Sector	Requirements US\$	Funds available US\$**		Funding gap	
		Funds Received Current Year	Carry over*	\$	%
Nutrition	41,610,000	216,000	14,381,419	27,012,581	65%
Health	14,036,440	324,000	1,806,857	11,905,583	85%
WASH	43,475,500	540,000	3,562,190	39,373,310	91%
Child Protection	3,829,863	0	1,339,971	2,489,892	65%
Education	8,859,136	110,476	1,877,840	6,870,820	78%
Total	111,810,939	1,190,476	22,968,277	87,652,186	78%

*Includes Nutrition supplies valued at US\$10 million, the carry-forward figures are provisional and subject to change.

** Funds available includes funding received against current appeal as well as carry-forward from the previous year.

*** In addition to the above funding, to fill critical gap in the response for IDPs, UNICEF Ethiopia received a loan in the amount of US\$3 million, from the Emergency Programme Fund of UNICEF Head Quarters.

Next SitRep: 28 February 2018

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SUMMARY OF PROGRAMME RESULTS 2017⁶

	Overall needs	Cluster Response			UNICEF and IPs		
		2017 Target	Total Results	Change since last report ▲ ▼	2017 Target	Total Results ⁷	Change since last report ▲ ▼
NUTRITION							
Children under 5 years with SAM admitted for treatment to therapeutic care programmes	376,397	376,397	315,222	59,599	389,397	321,040	65,417
Caregivers of children 0-23 months accessing infant and young child feeding counselling ⁸	1,550,000	1,550,000	2,319,705 ⁹	-	1,550,000	2,319,705	-
HEALTH							
People provided with access to essential and life-saving health care services					400,000	483,701 ¹⁰	-
People with access to treatment for diarrhoeal disease					45,000	48,732	-
South Sudanese refugee children aged 6 months to 14 years vaccinated against measles					68,400	53,231 ¹¹	-
South Sudanese refugee children vaccinated against polio					177,485	111,321	-
WATER, SANITATION & HYGIENE¹²							
People accessing safe water	10,475,645	10,475,645	9,876,515	3,403,515	4,393,171	4,286,770 ¹³	1,886,770
People reached with key messages on hygiene practices	5,222,307	5,222,307	5,492,497	13,497	2,208,000	3,059,394 ¹⁴	996,394
CHILD PROTECTION							
Separated and unaccompanied children receiving appropriate care and protection services	25,000	25,000	5,458 ¹⁵	-	10,000	7,519 ¹⁶	66
Vulnerable children receiving psychosocial support	45,000	45,000	18,465 ¹⁷	-	50,000	25,868	1,854
EDUCATION							
School-aged children with access to emergency education programmes	1,971,891	1,971,891	1,700,000 ¹⁸	-	622,000	163,337	3,000

6 2017 results table is added to capture results not included in the final 2017 Sitrep because of late partners reporting and time needed to compile regional data.

7 UNICEF Results include refugee response results, which means UNICEF results in some sectors will be higher than the cluster results

8 Includes caregivers of children 0-23 months accessing infant and young child feeding counselling and pregnant and lactating women

9 Growth monitoring and promotion (GMP) data is used as a proxy for the indicator "caregivers of children 0-23 months accessing infant and young child feeding counselling" and data is compiled within regions with 2 to 3 months' delay. UNICEF has reached more than its target as it is using this proxy-indicator.

10 The MHNT data is shared on monthly basis and data includes January to November consultations.

11 Correction, this was missed to be update in line with the narrative in the end year Sitrep.

12 WASH figures are updated monthly

13 Figure includes water trucking, expansion of water schemes, installation of water storage, rehabilitation of water schemes, and water treatment chemical distributions.

14 Extensive C4D activity particularly in the AWD outbreak response in Somali region enabled UNICEF and partners to reach a high number of people.

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

16 UNICEF data includes 'refugee population' as well.

17 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.

18 The GOE and NGOs have reached 1.7 million children with school feeding programme during the academic year that ended June 2017.

SUMMARY OF PROGRAMME RESULTS 2018

	Overall needs*	Cluster Response			UNICEF and IPs		
		2018 Target	Total Results	Change since last report ▲▼	2018 Target	Total Results	Change since last report ▲▼
NUTRITION							
Children under 5, including refugee children, treated for SAM	320,000	320,000	-	-	333,500**	-	-
Children received vitamin A supplementation	-	-	-	-	10,500,000	-	-
HEALTH							
Women and children under 5 accessing essential maternal and child health services					400,000	62,335	62,335
People affected by acute watery diarrhoea accessing life-saving curative interventions					38,000	90	90
Children immunized against measles					56,000	2,149	2,149
WATER, SANITATION & HYGIENE							
People accessing sufficient water of appropriate quality and quantity for drinking, cooking and maintaining personal hygiene (more than 1 million through permanent infrastructure)	5,331,010	5,331,010	203,649	203,649	3,110,000	203,649	203,649
People reached with key messages on hygiene practices	3,675,750	3,675,750	-	-	1,760,000	-	-
CHILD PROTECTION							
Girls and boys provided with psychosocial support, including access to child-friendly spaces with multi-sectoral programming interventions			-	-	58,300	-	-
Unaccompanied and separated girls and boys reunified with their families and/or placed in appropriate alternative care	5,000	5,000	-	-	12,760***	-	-
Children and women provided with risk mitigation, prevention or response interventions to address gender-based violence					20,000		
EDUCATION							
School-aged children, including adolescents, accessing quality education	2,200,000	2,200,000	-	-	300,000	-	-

*Refers to draft HRD 2018, this is subject to change with the final HRD. Cluster needs and target figures for some sectors will also be available with the launch of the HRD.

** UNICEF nutrition target is higher than the cluster target as it includes 13,500 South Sudanese refugee children.

***UNICEF child protection target also includes refugee children