



UNICEF supported WASH program in primary schools of Benshangul Gumuz ©UNICEF/Ethiopia/2018/ /Martha

ETHIOPIA

Humanitarian Situation Report



SitRep # 7– Reporting Period: July 2018

SITUATION IN NUMBERS

Highlights

- Renewed inter communal violence in Gedeo-West Guji since 3 June has displaced 1,010,934 people.
- The government and humanitarian partners have launched a multi-sector response plan for Gedeo-West Guji with a funding requirement of US\$ 117.7 million.
- With UNICEF's support, 140,720 children under five have received treatment for Severe Acute Malnutrition (SAM) between January and May 2018.
- The National Flood Contingency Plan, estimates that 2,550,512 people will be affected by flooding, including 637,628 who are likely to be displaced during the *kiremt* rainy season.

7.9 million* People in need of relief food/cash

350,111* Children in need of treatment for severe acute malnutrition

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

2.8 million** Internally displaced persons in Ethiopia (79 per cent displaced due to conflict)

923,863*** Registered refugees and asylum seekers in Ethiopia.

UNICEF's Response with Partners

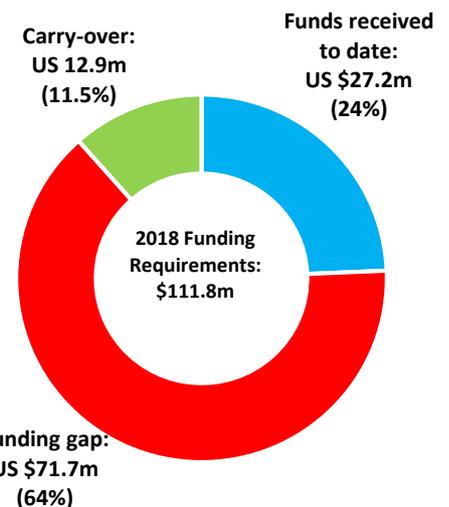
	UNICEF		Sector/Cluster	
	UNICEF Target	Total Results	Cluster Target	Total Results
Nutrition: children under 5 years with SAM admitted for treatment to therapeutic care programme	363,611*	140,720**	350,111	138,635
Health: people provided with access to essential and life-saving health care services	400,000	287,505		
WASH: people accessing safe water	3,110,000*	2,038,943	6,050,000	5,248,050
Child Protection: vulnerable children receiving psychosocial support	58,300*	21,606	30,000	10,130
Education: school-aged children with access to emergency education	300,000*	14,789	2,190,000	1,612,269

*2018 Humanitarian and Disaster Resilience Plan for Ethiopia, March 2018

** DTM Ethiopia National Dashboard Round 11, (IOM MAY – JUNE 2018)

*** Ethiopia, refugee and asylum seekers (UNHCR, June 2018),

Funding Status 2018**



*UNICEF targets and results include refugee population

**SAM admission is for January to May 2018

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

Situation Overview and Humanitarian Needs

Since June, renewed Gedeo-West Guji inter-communal violence has displaced 1,010,934 people. There are 822,187 displaced people (113,760 households) in Gedeo zone, Southern Nations, Nationalities, and People's Region (SNNPR) alone.¹ The IDPs are spread across 183 sites in Bule, Dilla Zuria, Kochere, Gedeb, Wanago, Yirgachefe Woredas and Dilla and Yirgachefe Towns. In West Guji zone (Oromia), zonal authorities confirm at least 188,747 people are displaced across 28 sites in Abaya, Birbirs Kojowa, Bule Hora, Gelana, Hambela Wamena and Kercha Woredas, 30 per cent of whom are female-headed households. On 22 June, the National Disaster Risk Management Commission (NDRMC) and humanitarian partners launched a Multi-Sector Response Plan² with a budget requirement of US\$117.7 million targeting 818,250 people displaced by the Gedeo-West Guji violence. The Plan aims to address life-saving needs, ensure dignified temporary living conditions, mitigate/prepare for potential public health outbreaks, including measles and Acute Watery Diarrhoea (AWD), and ensure protection of vulnerable groups.

Based on the current incidence of floods and forecasts by the National Metrological Agency (NMA) during the *kiremt* season, the NDRMC and humanitarian partners developed a National Flood Alert, which was revised thrice, with the latest revision in June 2018 to update information on probable weather conditions during the 2018 *kiremt* season. The Alert identifies areas likely to be affected to enable timely mitigation, preparedness and response measures. Accordingly, a contingency plan developed jointly by the NDRMC and humanitarian partners based the most likely scenario on heavy rain in low lying areas. It is estimated that 2,550,512 people would be affected by river and flash floods in the 2018 *kiremt* season which runs from June to September. Out of these, 637,628 people across the country are likely to be displaced.

FEWSNET analysis shows that the 2018 *Gu/Genna* rains performed very well across most of southern and south-eastern, Somali region between March and May, with an early start of 10 to 20 days in some areas and cumulative rainfall exceeding annual average rainfall. Areas where seasonal rainfall performed particularly well include large parts of Jarar, Dollo, Liben, Gode, and Afder zones, as well as most pastoral and agro-pastoral areas of southern SNNPR, and far southern and eastern Oromia region. Generally, above-average rainfall throughout the season has contributed to significant improvements in the availability of pasture and water for livestock in most south-eastern pastoral areas. The *Belg/Gu/Genna* assessment results are under compilation which will inform the hotspot priority classification in each region. UNICEF, through the Emergency Nutrition Coordination Unit (ENCUC), will compile and review the regional hotspot priority classification which will be followed by the revision of severe acute malnutrition (SAM) and moderate acute malnutrition (MAM) caseloads and all other sector needs to be included in the Mid-Year Review of the Humanitarian and Disaster Resilience Plan (HDRP) 2018.

An AWD outbreak is ongoing in Tigray region as well as Afambo, Mille and Asayita *woredas* of Afar region. Overall, the number of AWD cases reported in 2018 is significantly lower compared to the same period last year.

The situation on the border with South Sudan remains calm though unpredictable. In the month of July, total arrivals were given as 22 by UNHCR compared to 885 in June and 1,841 in May. The reason for the sudden decrease is not yet clear. Gambella Region in Ethiopia now hosts 426,550 South Sudanese refugees with 17,514 having arrived in 2018 so far.

Humanitarian Leadership and Coordination

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

UNICEF continues to provide the Government with crucial support in cluster coordination at federal and regional levels in water, sanitation and hygiene (WASH), nutrition, and education (with Save the Children International). UNICEF also provides coordination support to the Child Protection and Gender-based Violence Sub-Cluster and plays a key supporting role in Health Cluster coordination with WHO.

In response to the reported floods in parts of the country, the National Flood Task Force has been activated.

Humanitarian Strategy

UNICEF works with the Government and partners to reach affected populations with critical child protection, education, nutrition, water, sanitation and hygiene (WASH) and health interventions. As co-lead of the Education, WASH, and Nutrition Clusters and Child Protection Sub-cluster, UNICEF supports coordinated humanitarian responses.

Access to SAM treatment is being expanded and the early detection of acute malnutrition is being improved through community mobilization. UNICEF continues to strengthen the capacities of local health personnel to promote Infant and

¹ Gedeo- West Guji Displacement Crisis Situation Update No 6, UNOCHA, 19 July 2018

² Response plan to Internal displacement around Gedeo (SNNPR) and West Guji (Oromia) zones, 22 June 2018

Young Child Feeding in Emergencies through related trainings including on integrated Community based Management of Acute Malnutrition (CMAM). UNICEF supports mobile teams to provide life-saving health and nutrition services in Afar and Somali regions. To better facilitate responses to disease outbreaks, UNICEF is strengthening related prevention, preparedness and response mechanisms through training, supplies and emergency operations. The WASH response is focussing both on life-saving activities and building resilient water and sanitation infrastructure, particularly for displaced populations. Children and women are receiving protection risk mitigation, prevention and response interventions, including for gender based violence. Access to quality education in safe environments is being expanded for displaced and refugee children through the provision of school supplies in the construction of temporary learning spaces and teacher training.

UNICEF Ethiopia has developed IDP response plans to support our response to IDP in Somali, Oromia and SNNP regions. The Gedeo-West Guji IDP response plan will target 615,000 people at a total cost of US\$ 14,434,638, of which US\$ 8.9 million is currently unfunded.

To respond to rapid onset crises in a timely manner, UNICEF has pre-positioned supplies in Addis Ababa and in two regional hubs in Gambella and Somali regions to meet the immediate life-saving needs of 120,000 people.

Summary Analysis of the Programme Response

Nutrition

The nutrition status of children and women in Ethiopia continues to be threatened by complex emergencies, including inter-communal conflicts and compounding impact of previous droughts. UNICEF's nutrition programme is working closely with the Ministry of Health and the ENCU/NDRMC to ensure life-saving nutrition treatment services are delivered to all affected children, and that efficiency and effectiveness are maximized.

From January to May, UNICEF supported the treatment of 140,720 children with Severe Acute Malnutrition (SAM). 138,635 were from the host communities and 2,085 children in refugee camps (no new data available since the last update). The admissions level was in line with the estimated caseload, reaching 101 per cent of the projected admissions for the same period reflected in the HDRP 2018. UNICEF through the cluster has been supporting surveys in West Guji and Gedeo to understand the nutritional status of women and children in these locations. The survey results are yet to be shared. Given the increased needs and considering supply procurement lead times, UNICEF is facing a funding gap in its pipeline for SAM treatment supplies for 2019.

With limited access to food and basic services, the nutrition situation among the IDP children and women is expected to deteriorate rapidly in Gedeo and West Guji zones. In response, UNICEF has prepositioned SAM treatment supplies in both zones for the third quarter of 2018 (including 3,129 cartons of RUTF, 149 cartons of therapeutic milk, and 47 stabilization centre treatment kits); deployed one international UNICEF staff to manage cluster coordination as well as internal UNICEF programming and six third-party CMAM monitors and Zonal Coordinators to strengthen technical support and zonal-level coordination. UNICEF is supporting the respective Health Bureaus to conduct nutritional screening in host communities and among IDPs, referring children with SAM for treatment. In Gedeo zone, 98,890 children aged 6-59 months received nutrition screening, among whom 2,093 were identified with SAM and 29,151 with MAM. In West Guji, 626 children were identified with SAM and 5,172 with MAM out of 23,913 screened. UNICEF is also supporting the ENCU to advocate for a surge in government health workers and Health Extension Workers to promote SAM-MAM continuum of care and ensure acute malnutrition treatment facilities are adequately staffed.

Health

AWD remains a public health hazard in the country, particularly in areas where there are water shortages. From mid-June to mid-July, 381 AWD cases were recorded (350 in Afar and 31 in Tigray) with one death reported in Afar. Generally, the number of AWD cases reported in 2018 is significantly lower than during the same period last year. In response to the AWD outbreak, UNICEF is closely working with Regional Health Bureaus and WHO on AWD kit set-up, case management, and social mobilization.

Preparation for a measles vaccination campaign is underway targeting 1,464,077 internally displaced children aged six months to 15 years (475,139 IDP children and 988,938 from host communities) in West Guji (Oromia region) and Gedeo (SNNPR). The campaign is expected to begin on 3rd August. To achieve universal coverage, 1,625,126 doses of measles vaccine will be required. UNICEF has placed a procurement order of 725,000 doses using CERF funds, leaving a shortfall of 900,126 doses (55 per cent of the total requirement) which the Ministry of Health plans to meet. UNICEF has deployed three technical experts to support the measles immunization campaign in Oromia and two in SNNPR. In support of the IDP response in Gedeo and West Guji, UNICEF distributed 23 emergency drug kits sufficient to treat 57,500 people for three months.

In June, Mobile Health and Nutrition Teams deployed in Afar and Somali regions provided medical consultations to 32,892 individuals, bringing the total cumulative number of consultations for the year to 287,505 (74 percent are children under five and women). Moreover, UNICEF is supporting the over-stretched health system to build its capacity and resilience through

the Sustainable Outreach Service (SOS) strategy in 15 *woredas* of the Somali region. In June, 28,259 medical consultations were provided through the SOS strategy.

UNICEF continues to support the Gambella Regional Health Bureau to vaccinate refugee children from South Sudan at entry points. In July, 603 children under 15 years of age received vaccinations against polio while 571 were vaccinated against measles. Since January, 10,947 refugee children from South Sudan have received polio vaccines while 10,255 children have been vaccinated against measles upon arrival at the border.

Scabies continued to be reported in Addis Ababa, Amhara, Benishangul-Gumuz, Tigray, Oromia and SNNP, with the latter two regions reporting the highest number of cases.

WASH

Preliminary assessments for the Gedeo and West Guji response highlight large needs for NFIs and water and sanitation facilities. In response, UNICEF supplied safe drinking water to 478,000 IDPs and host community members in East and West Hararghe, Bale, West Guji and Guji zones through water trucking. UNICEF is currently distributing NFIs to IDPs in Gedeo and West Guji zones. Additional items are in the pipeline for distribution to the affected population. In Tigray, drilling of six deep wells is ongoing in line with UNICEF's approach towards durable solutions.

In addition, UNICEF aims to build 500 blocks (7 cubicles per block) of child-friendly emergency latrines to benefit 350,000 IDPs in West Guji and Gedeo. The latrine construction is planned with recently-allocated funding from the Central Emergency Response Fund. However, finding space for latrine construction in densely populated IDP sites remains a big challenge. The WASH cluster is working on modalities to address this challenge.

UNICEF activated the WASH sub-cluster in Gedeo and West Guji and, thus, a well-coordinated response is being delivered to IDPs in these zones. This activation was possible through the deployment of two WASH specialists to support incident management and coordination. Further support has been sought from the Global WASH cluster to provide two full-time cluster coordinators for both Gedeo and West Guji.

Hygiene promotion in both Gedeo and West Guji has been slow as partners are waiting for resources to scale up their efforts to meet the needs. In the interim, UNICEF, IOM and NGO partners are ensuring delivery of hygiene messages and distribution of information and education materials in both locations.

UNICEF, through the Oromia Regional Health Bureau, is constructing emergency latrines to support 24,000 beneficiaries in Kercha Town (West Guji), while NFI monitors in cooperation with the Woreda Health Office equipped 21,000 IDPs from displacement sites and host communities to deliver key information including on household water treatment, safe water storage, personal hygiene, and safe excreta management.

UNICEF, through its interventions in Gambella Region, is currently providing safe water to 223,000 South Sudanese refugees in Nguennyiel, Tierkidi, and Kule camps.

Child Protection

In the Oromia region, UNICEF supported the Bureau of Women and Children Affairs (BoWCA) to reunify 13 unaccompanied and separated children (9 girls, 4 boys) with their families and place 85 (36 girls, 49 boys) in appropriate alternative care arrangements. A total of 2,684 children (1,662 girls, 1,022 boys) in the IDP sites were provided with psychosocial support (PSS) through child-friendly spaces, while 2,010 community members (735 women, 1,275 men) were reached with key messages to address gender-based violence.

In 10 IDP sites in Oromia, 312 separated children (130 girls, 182 boys) were identified and documented for the provision of support through a referral mechanism led by BoWCA and 778 children (309 girls, 469 boys) accessed community-based PSS integrated with an accelerated school readiness program.

In the Somali region, 352 unaccompanied and separated children (159 girls, 193 boys) were placed in alternative care arrangements. In the same region, awareness raising sessions were organized on CP and GBV related concerns including harmful traditional practices which reached 310 community members (148 women and 162 men).

In the SNNP region, UNICEF deployed short term surge to support the IDP response in Gedeo zone. UNICEF technically supported BoWCA to develop a regional CP GBV Response Plan and to strengthen the capacity of the Bureau to respond to protection needs. UNICEF is supporting the recruitment of seven social workers and 40 community service workers in prioritized sites across seven *woredas* hosting IDPs. The social workers and community service workers will support BoWCA in identification and registration of unaccompanied and separated children and other vulnerable children, facilitate referrals of cases for case management services, manage child-friendly spaces, and conduct community mobilization activities.

In the Gambella region, to strengthen the integration of CP and GBV programme components in the nutrition centers in Kule, Ngunyiel and Pugnido refugee camps, Plan International, with UNICEF funding, organized a three-day refresher training on child protection, PSS and therapeutic feeding practices for 18 social workers (5 females and 13 males) working in therapeutic feeding centers. Some 31 nutrition animators and 80 mother group members, all women, were equipped with knowledge on basic child protection concepts. The training has improved skills of social workers in providing PSS services and increased case reporting from the therapeutic feeding centers to CP and GBV partners. With support from UNICEF, routine awareness-raising activities were undertaken by International Medical Corps in the GBV programme using various community mobilization strategies such as group discussions, home visits, and dialogue sessions in the community. A total of 5,965 community members (3,860 women, 2,105 men) were equipped with the information required to facilitate rapid reporting of GBV cases and to navigate through existing referral systems.

UNICEF continues to support BoWCA to establish CP/GBV Sub-Clusters at regional, zonal, and *woreda* levels in conflict IDP hosting regions. The CP-GBV Sub-Cluster was activated and strengthened in SNNP and Oromia regions as the sub-cluster further cascaded its support in Gedeo and West Guji zones. Thus, the newly functioning CP/GBV Sub-Cluster supported the Protection Cluster Assessment to West Guji and Gedeo Zones from 9-12 July. The assessment expressed concerns about unaccompanied and separated children, children requiring psychosocial support and the obvious lack of protection services. Gender violence-based risks were also identified. There are no separated or safe spaces for women and girls and water and firewood are insufficient, prompting girls, especially adolescent girls, to leave IDP sites and heightening the risks to GBV.

Education

Of the people displaced in Gedeo and West Guji, 193,845 (20 per cent) are estimated to be school-aged children. According to data from the West Guji Zonal Education Office, 18 schools were either partially or completely damaged due to the conflict and there are real concerns about access to education for children when schools resume at the beginning of September. Moreover, the education cluster estimates that 80,000 school-aged children have been displaced due to inter-regional and flood emergencies in Somali and Oromia regions.

UNICEF is working with non-government partners to restore education, employing accelerated and innovative education service delivery approaches. IDP education response programmes in Somali and Oromia regions, are focused on accelerated learning. The Accelerated School Readiness (ASR) Programme is a school preparedness initiative that facilitates the participation of young children who have never attended school to receive quality pre-primary classes for three months from trained facilitators. ASR is complemented by a Child-to-Child Programme which delivers developmentally-appropriate play and early learning activities for pre-primary aged children and is facilitated by older children in grades five, six or seven. Quality early childhood education interventions include playful, educational activities (songs, puzzles, learning games) that help children recover from trauma while they learn to read and write, communicate, and gain confidence for formal schooling.

UNICEF provided technical support to the reactivation of the education sub-clusters at regional and zonal levels in SNNPR and a six-month regional education cluster contingency plan has been developed.

UNICEF will deploy surge staff to support the IDP education response and support sector coordination.

Communication for Development (C4D)

Following recent polio cases reported in neighboring Somalia, UNICEF supported the successful activation of 42 social mobilization committees in the border areas to prevent its spread into Ethiopia. UNICEF facilitated discussions between community groups and these social mobilization committees on critical issues such as importance of vaccination, hygiene promotion, AWD prevention, recommended Infant and Young Child Feeding practices, harmful traditional practices, and other child protection risks.

UNICEF continues to provide support to the ongoing AWD outbreak in Afar region. Partners from various organizations have been coordinated to mobilize available resources for the affected communities by the regional social mobilization team led by the RHB and co-led by UNICEF. UNICEF has also provided technical support in developing and rolling out the social mobilization response plan. UNICEF has supported the development of messages and training of 79 Health Extension Workers, local administrators, religious leaders and municipality staff in community mobilization and effective message delivery, contributing to reduced AWD cases.

Thirty-four participants from the Oromia region have participated in a Training of Trainers (ToT) course to increase their knowledge and skills on leading and developing emergency risk/prevention messaging and communication strategies. The participants were Zonal Health Promotion Focal Points, Health Extension Coordinators, and Public Health Emergency Management Officers. These trainees will cascade the training to all *woredas* in the region. Moreover, UNICEF supported a training on Ebola Risk Communication for 80 government officials, enabling them to strengthen the capacity of different levels of government in preventing and responding to disease outbreaks.

Media and External Communication

UNICEF organized two donor field missions with representatives from Italy to Afar region which included a visit to an AWD Case Treatment Center. A UNICEF-organized mission to Benishangul Gumuz with DFID visited a refugee camp supported by DFID under the Building Self-Reliance Programme (BSRP).

UNICEF participated in and facilitated an OCHA workshop of the Emergency Communications Working Group to develop key humanitarian advocacy and communication messages in support of the Ethiopia Humanitarian Country Team (EHCT).

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 and 14.7 M for the response in WestGuji/Gedeo. With the revision of the HAC being underway, it is envisaged that the funding needs for the country office will increase as the needs of women and children in Ethiopia will be revised upwards based on the prevailing environment.

In July 2018, UNICEF Ethiopia received US\$ 1.1 million from Sweden (SIDA) and US\$ 3.8 million was allocated from the Central Emergency Response Fund. With a total funding of US\$ 27.2 million received in 2018 and a carryover of US\$ 12.9 million, UNICEF Ethiopia currently has a funding gap of US\$ 71.7 million.

UNICEF Ethiopia funding status as of 31 July 2018

Appeal Sector	Requirements US\$	Funds available US\$*		Funding gap	
		Funds Received Current Year	Carry over*	\$	%
Nutrition	41,610,000	6,300,485	4,373,071	30,936,444	74%
Health	14,036,440	2,868,897	1,791,444	9,376,099	67%
WASH	43,475,500	14,638,232	3,542,307	25,294,961	58%
Child Protection	3,829,863	1,999,253	1,339,356	491,254	13%
Education	8,859,136	1,424,449	1,877,059	5,557,628	63%
Total	111,810,939	27,231,317	12,923,237	71,656,385	64%

* In addition, UNICEF Ethiopia has supplies for nutrition, carried over to 2018 valued at US\$10 million

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

Next SitRep: 30 August 2018

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UNICEF Ethiopia Humanitarian Action for Children Appeal: <https://www.unicef.org/appeals/ethiopia.html>

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	350,111	350,111	138,635*	0	363,611*	140,720**	0
Children received vitamin A supplementation	-	-	-	-	10,500,000	4,075,567	0
HEALTH							
Women and children under 5 accessing essential maternal and child health services					400,000	287,505***	55,976
People affected by acute watery diarrhoea accessing life-saving curative interventions					38,000	1,241	207
Children immunized against measles (refugee)					56,000	10,255	124
WATER, SANITATION & HYGIENE							
People have access to safe water of appropriate quality and quantity	10,239,130	6,050,000	5,248,050	671,304	3,110,000	2,038,943	132,819
People reached with key messages on hygiene practices	7,695,650	5,900,000	2,479,420	538,976	1,760,000	1,627,859	557,204
CHILD PROTECTION							
Girls and boys provided with psychosocial support, including access to child-friendly spaces with multi-sectoral programming interventions	30,000	30,000	10,130	3,462	58,300	21,606	3,462
Unaccompanied and separated girls and boys reunified with their families and/or placed in appropriate alternative care	5,000	5,000	911	453	12,760	1,114	455
Children and women provided with risk mitigation, prevention or response interventions to address gender-based violence	65,000	55,000	4,011	2,765	20,000	21,530	8,728
EDUCATION							
School-aged children, including adolescents, accessing quality education	2,190,000	2,190,000	1,612,269****	430,991	300,000	14,789	-

* UNICEF target includes 350,111 Ethiopian children (HDRP 2018 target) and 13,500 South Sudanese refugee children.

** Nutrition result covers January to May 2018.

*** Health result for MHNT is from January to June 2018

**** Provision of school feeding programme by the Government reached 1,595,966 children in all regions.