8.4 million people in need of humanitarian assistance in Ethiopia

The 2020 Ethiopia Humanitarian Needs Overview (HNO) outlined that some 8.4 million Ethiopians are projected to have humanitarian needs in the year. Out of the 8.4 million, 74 per cent have acute needs that need to be addressed immediately. The majority of the people in need are in Oromia region (3.3 million), followed by Somali region (2.4 million) and Amhara region (1.0 million). In the Somali region alone 39 per cent of the population are in need of humanitarian aid in 2020. The needs identified in the HNO do not include clients from the Productive Safety Net Programme (PSNP) and the refugees hosted in Ethiopia.

Climatic shocks, internal displacement due to inter-communal violence, disease outbreaks and flooding are among the primary drivers for the current need. Crop and pasture loss due to desert locust infestations in parts of Afar, Amhara and Tigray regions was considered when calculating the people in need of food assistance in these regions although the likelihood the situation currently be deteriorating is high.

Over one third of the people in need face several types of challenges and have multiple needs. Some 33 per cent of the people in need live in woredas classified with high severity of need, while 4 per cent live in woredas classified with very high severity of need. There are some areas hosting IDPs or returnees, but of which there is limited data on the severity of their needs. At the time of publication of this document, available data indicated that persons with the most severe and compounded needs are found in Hudet, Moyale and Qada Duma woredas in Daawa zone (Somali region) and in Meda Welabu woreda in Bale zone (Oromia region).

The HNO has been consolidated by OCHA on behalf of humanitarian partners and in consultation with the Government of Ethiopia. Government and humanitarian partners are finalizing the 2020 Humanitarian Response Plan (HRP) which will determine the actual number of people who will be assisted in 2020 and requirement associated to it. The 2020 Humanitarian Needs Overview document is available at: https://bit.ly/2NqFBnu
UN Resident and Humanitarian Coordinator Dr. Catherine Sozi presents her credentials to Ethiopian Government

On 16 January 2020, the newly designated UN Resident and Humanitarian Coordinator (RC/HC) to Ethiopia, Dr. Catherine Sozi, presented her credentials to Ethiopian State Minister of Foreign Affairs H.E Ms. Hirut Zemene. “I am pleased to have the opportunity to represent the United Nations in Ethiopia at this momentous period when its people and the government are taking a new path to achieve lasting peace and sustainable development while laying down the foundation for stronger democracy,” said Dr. Sozi during her presentation. She reiterated the commitment of the UN Country Team to fully align all its development activities to the priorities of the Government to ensure Ethiopia’s continuous progress towards the 2030 Agenda.

OCHA Ethiopia, on behalf of the international humanitarian community, wishes the RC/HC to be very successful in her work in Ethiopia and expresses its commitment to provide her with maximum possible support.

Biography of Dr. Catherine Sozi

Dr. Catherine Sozi, a national of Uganda, has been the Director of the UNAIDS Regional Support Team for Eastern and Southern Africa since July 2017. Prior to that she was the UNAIDS Country Director in China (2014-2017); the UNAIDS Country Director in South Africa (2002-2014); the UNAIDS Country Coordinator in Zambia (2004-2008); Programme Adviser of the UNAIDS Intercountry Team for Eastern and Southern Africa (2000-2004). Before joining UNAIDS, Dr. Sozi has worked in the AIDS and health sector in the United Kingdom, South Africa and Uganda, within government, the private sector and non-governmental facilities.

New cases of cholera continue to be reported in Oromia, SNNP and Somali regions

A new outbreak of cholera was reported in Benatsemay, Hamer, Malle and Selamago woredas of South Omo zone, SNNPR, in the first week of January 2020. A similar outbreak was ongoing in two kebeles (Zeka Zalto and Oshale Shambara) of Uba Debretsehaye woreda and one kebele (Ada Shabe) of Zala woreda in Gofa zone, SNNPR, since the third week of December 2019. According to the Ethiopian Public Health Institute (EPHI), 126 new cholera cases and three deaths were reported from the affected woredas during the first week of January 2020 alone. This brought the total reported cases in the region since the outbreak started in December 2019 to 684 cases and 12 deaths (data as of 14 January 2020).

In Somali region, a cholera outbreak is ongoing in Kelafo woreda of Shabelle zone since 3 January 2020. The outbreak was first reported in Helobad kebele and now affects seven kebeles in Kelafo (Adisketema, Arjac, Balada Amin, Dariqo, Goble, Helo Bad, Kurtumale). At least 75 cases were so far registered at health facilities, and six community deaths occurred, with one death on 12 January 2020 according to EPHI.
HIGHLIGHTS

- Oromia, SNNP and Somali regions continue to report an outbreak of cholera which includes reports of deaths.

- A new wave of desert locust infestation has posed a considerable threat to food security and livelihoods in Ethiopia and neighboring Horn of Africa countries.

- FAO seeks US$6 million to contain desert locust before it becomes a food security and livelihood threat in Ethiopia.

In Guji zone, Oromia region, 10 kebeles in 2 woredas, Adola rede, and Oddo shakiso have been affected by the outbreak. About 100 cholera cases and 7 deaths been reported so far. Reportedly, the case number is decreasing daily.

Ongoing Cholera Response

In South Omo, the SNNPR Government has established a multi-sector cholera monitoring and control task force. Health partners are supporting the Government to contain the spread of the outbreak. More specifically, an MSF team is on the ground since 13 January supporting case management, WaSH, logistics and supplies in Benatsemay and Malle woredas. UNICEF will support in risk communication/social mobilization (C4D) and WaSH. A WHO team was deployed on 15 January to support coordination, outbreak investigation, surveillance and water quality testing, trainings, and is ready to dispatch deploy additional treatment kits where and when required. IRC is ready to deploy a team to Hamer and Selamago woredas to case management, WaSH, and logistics and supplies using ERM funds. EPHI is considering to conduct an oral cholera vaccination campaign, and a micro plan is expected to be shared soon. SWAN Rapid Response Consortium is on standby to provide any additional support where and when needed.

In Shebelle, Somali region, a regional and woreda Rapid Response Team was deployed to affected kebeles. SOS and Save the Children also contributed vehicles and health professionals to the team. A cholera treatment center (CTC) was established, but with only 10 beds as of 14 January. Additional temporary plastic rooms were built for recovery, storage of supplies, staff duty room, screening and observation. The Regional Health Bureau and WHO have also pre-positioned one cholera kit and water purification chemicals in Kelafo woreda. Save the children provided some medical supplies, while the local NGO OWDA distributed 100 cartons of laundry soap. Daily coordination meetings are being held at woreda and zonal-level.

In Guji zone, Oromia region, UNICEF and WHO helped establish 2 CTCs in Adola Rede and Oda Shakiso, ensuring Integrated Food Security Phase Classification (IPC) and enhancing case management. OCHA in collaboration with the zone DRM is coordinating overall cholera response, particularly the integration and collaboration of health and WASH cluster and strengthening the coordination of multisectoral response with different committees at different levels.

FAO seeks US$6 million to contain desert locust before it becomes a food security and livelihood threat in Ethiopia

A new wave of desert locust infestation has posed a considerable threat to food security and livelihoods in Ethiopia and neighboring Horn of Africa countries. For Ethiopia response, the Food and Agricultural Organization (FAO) said it seeks a minimum of $6 million to scale up preventive and control measures including surveillance, monitoring, ground and aerial spraying, and community mobilization and awareness creation possibly until the end of June 2020. The priority for prevention and control is the Somali region where 94 square kilometres was affected between mid-November and end of December 2019, as well as the new invasion areas in Oromia and SSNNP region. More than 2,350 square kilometres of land in about 125 Woredas (up from 56 in October 2019) are affected by the invasion. Before the new wave of ‘numerous and very large’ swarms which began in late December and has continued to date, Afar, Amhara and Somali regions had already reported a potential crop and vegetation loss due to desert locust infestation that occurred in October and November 2019. The first Desert Locust mature swarms entered Ethiopia in June 2019.
The Story of Nadhi and Alemitu at the Darme IDPs site, Guji zone, Oromia region

Following recent fighting between unidentified armed groups (UAG) and Government security forces in various kebeles of Seba Boru woreda, Guji zone, Oromia region, hundreds of people have been displaced to the neighbouring Darme town, the capital of Darme woreda administration. The IDPs are now living in a deplorable situation in Darme town, about 200 kilometres from the zonal capital, Negele. Most of them live in temporary shelters, while others live within the host community and relatives. Most of the IDPs had no time to bring their properties with them because of the tense fighting between the UAG and Government forces. Nadhi, 35, and Alemitu, 51 were among the many women who left their areas of origin to come to Darme town.

“I decided to leave Figa kebele with my six children when I knew the security situation was deteriorating from time to time and protection of civilians was no more guaranteed,” said Nadhi. Nadhi and other members of the community witnessed women suffering from gender-based violence and other forms of attacks. Nadhi added, “We have not received any form of humanitarian assistance either from Government or humanitarian actors since we arrived here three months ago. The community here have no capacity to continue supporting us. My children go begging in the street so that they get something to buy bread.” She explains some of the other neighbors face problems where most girls are forced to drop out of school and do daily labour, including in mining in nearest woredas like Oddo Shakisso and Agawayu where they face violence like rape. For Nadhi and her family, food and clothing are urgent requirements although they also need other services, including shelter, health and WaSH.

Alemitu faces similar challenges in Darme town. “I came here with my seven children and I have nothing to feed them. Like many of the IDPs here my children are no more attending school. They go out looking for some jobs, but it is not easy to find some here,” says Alemitu. Getting money to purchase basic needs like food, clothes and shelter/plastic/ is not easy in Darme because IDPs don’t find jobs to generate income. Life is becoming increasingly difficult for IDPs in Darme, particularly to those female-headed IDPs households.

Note: We will continue to publish financial updates once the requirement for 2020 is released in the coming weeks.

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