

Nutrition supplies being loaded on a truck to be dispatched to the field ©UNICEF Ethiopia/2017/Beauregard SitRep # 5 – Reporting Period 6-19 April 2017

Highlights:

- In 2017, so far, 51,184 children have been admitted for treatment of severe acute malnutrition (SAM). There is an 18 per cent increase in SAM admissions from January (23,523) to February (27,661). Drought affected areas show a worrying level of SAM admissions.
- With worsening food and water shortage and rise in acute watery diarrhoea (AWD) outbreak, the malnutrition situation is expected to aggravate in coming months. Rapid response team personnel are deployed to strengthen AWD management and UNICEF is collaborating with WHO to provide operational guidance on managing SAM cases with AWD in the Somali region.
- In response to the AWD outbreak in Somali region, the Regional Water Bureau with UNICEF support has started mass chlorination of water sources.

UNICEF's Key Response with Partners in 2017

Indicators	UNICEF 8	& Partners	Sector/Cluster		
muicators	UNICEF Target	Cumulative results (#)	Cluster Target	Cumulative results (#)	
WASH: People accessing safe water	1,460,000	217,000	9,200,000	1,300,000	
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	141,800	2,000,000	1,700,000	
Child Protection: Vulnerable children receiving psychosocial support	30,000	9,765	45,000	9,765	

See Annex 1 for more information on programme results for 2017

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SITUATION IN NUMBERS

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

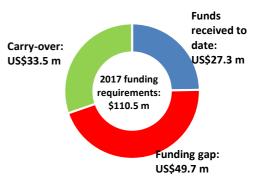
2 million school-aged children*

require emergency school feeding and learning materials assistance

There are **811,555** refugees in Ethiopia (UNHCR, February 2017)

*HRD, January 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

In March 2017, below normal rainfall was recorded in Afar, southern parts of Oromia, SNNP and most of Somali region. Seasonal rainfall performance to-date has been erratic and below normal although it is anticipated to improve during mid-April to May. The National Meteorological Agency predicts that rainfall in much of the *Belg*-growing areas of the country will be close to normal with a possibility of below normal rainfall in some areas. Below normal rainfall is expected to be more pronounced in southern and south-eastern parts of the country, where *Belg* is the major rainy season.

The National Disaster Risk Management Commission (NDRMC) is currently revising the estimated number of people in need of emergency food aid. Findings of a joint rapid assessment by WFP, OCHA, IOM and UNICEF indicate that there are increasing needs beyond those identified in the 2017 Humanitarian Requirements Document (HRD). In addition to the number of beneficiaries in the 2017 HRD, in Oromia, more than 1.1 million and in SNNP 122,000 people are receiving food aid. The increase in food aid beneficiaries is partly attributed to *Meher* harvest loss due to frost in Borena, East Hararge, Guji, West Guji as well as in the lowlands of Bale zones in Oromia region and the South Omo zone of SNNP region. Humanitarian needs are also expected to increase in areas where *Belg* rains are expected to perform poorly, particularly in south-eastern parts of the country.

Refugees continue to arrive in Ethiopia, the majority being South Sudanese, Somali and Eritrean. Between 1 January and 13 April 2017, 4,768 new Somali asylum seekers were registered as refugees and relocated to the Kobe, Hilaweyn, Buramino, Bokolmanyo and Melkadida refugee camps in Ethiopia's Somali region. Of the total new arrivals, 70.4 per cent are children. In Gambella region, between 1 and 12 April, 3,346 South Sudanese refugees arrived bringing the total number of new arrivals since September 2016 to 81,720. In March 2017 there was high influx of refugees with 16,274 arrivals of South Sudanese refugees compared to 5,570 arrivals in February 2017. Of the new arrivals registered since September 2016, 65 per cent are children, including 18,297 unaccompanied and separated children. In October 2016, UNHCR and the Ethiopian Administration for Refugees and Returnees Affairs (ARRA) opened a new camp, Nguenyyiel, which is currently accommodating 54,177 refugees. A new site to be developed as a refugee camp has been identified in an area bordering Benishangul-Gumuz and Oromia regions, with a capacity to accommodate 30,000 refugees.



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 will target priority hotspot *woredas*.

In Somali region, the Ministry of Health is leading the current AWD response while WHO has deployed a (senior) surge team which is based in Jijiga, Somali Region. WHO is also strengthening the Health Cluster leadership at national and Somali region levels. UNICEF is collaborating and coordinating actions with the new WHO team.

Together with the GoE, UNICEF continues to provide cluster leadership for WASH and nutrition as well as coleadership with Save the Children International (SCI) for education. In addition, UNICEF provides sub-cluster coleadership 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

The nutrition status of children is deteriorating, especially in drought affected areas. Between January and February 2017, 51,184 children were admitted for treatment of SAM. Admissions grew by 18 per cent from January (23,523) to February (27,661) (Figure 1). The increase, which follows a seasonal trend, is seen in all regions except Tigray. However, areas affected by the drought show a worrying level of SAM admissions.

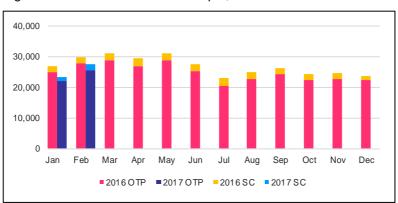


Figure 1. SAM Admissions in Ethiopia, 2016-2017

In Somali region, admissions continued to soar from 3,817 in December 2016 to 5,942 in January 2017, and then to 6,619 in February 2017. With the worsening food and water shortage and the acute watery diarrhoea (AWD) outbreak on the rise, the malnutrition situation is expected to aggravate in the coming months. UNICEF is supporting the Somali Regional Health Bureau (RHB) in establishing and operating temporary treatment centres (TTCs) to provide key emergency nutrition services to displaced populations. Rapid response team personnel is deployed to strengthen AWD management and UNICEF is collaborating with WHO to provide operational guidance on managing SAM cases with AWD.

Rise in malnutrition is also seen in the drought-affected lowlands of Afar, Oromia and SNNPR. In SNNPR, in particular South Omo zone, the lack of skilled health personnel plus the region's vast geographic area constitute major challenges for quality service provision. The Emergency Nutrition Coordination Unit (ENCU) is galvanising partner support and expediting project commencement, with UNICEF supporting the gap *woredas*.

In all drought affected regions, monthly nutritional screening is implemented for nutrition surveillance, however, the quality and coverage remain inadequate. UNICEF is advocating with the Government at federal and regional levels for stronger monitoring and supervision.

With the possibility of poor spring *Belg* rains becoming more imminent, both ENCU and UNICEF are supporting the NDRMC in preliminary planning for the impact of rain failure on malnutrition.

Health

AWD persists in Afar, Oromia and Somali regions. SNNP and Tigray regions are currently reporting zero cases. The Ministry of Health (MoH) stated that the public needs to improve hygiene and sanitation to prevent a potential national outbreak of AWD during this rainy season. While consistent prevention and control interventions, including strengthened surveillance, are ongoing, water shortage continues to contribute to the lingering AWD outbreak.

Somali region is the most affected with 40 *woredas* in Dollo, Erer, Jarar, Korahe, Shebele, Liben, Fafan and Nogob zones currently reporting active AWD cases and accounting for 88 per cent of cases reported in Ethiopia in 2017. The MoH, RHB and health partners are increasing their efforts to provide treatment for AWD patients through the establishment of temporary clinics, health education, and strengthened surveillance. To support the AWD response in Somali region, MoH has deployed over 1,000 health professionals (including doctors and nurses) from the Federal MoH, as well as Amhara, Harari and Tigray regions. UNICEF continues to provide technical assistance and support to the establishment of temporary clinics through the provision of tents, beds, drugs and medical materials. Since July 2016, when the outbreak of AWD re-emerged, UNICEF provided 80 case treatment centre (CTC) kits (an additional 20 kits since the last reporting period), which include tents, beds, drugs and medical materials. UNICEF has deployed four health professionals in Somali region working on capacity building on CTC set-up and case management in affected areas.

Health services for remote populations in Afar and Somali regions are provided through 49 Government-led mobile health and nutrition teams (MHNTs). UNICEF provides MHNTs with supplies that include household water treatment chemicals, drugs and nutrition supplies as well as technical assistance. In Somali region, UNICEF has supported RHB to establish comprehensive treatment centres in temporary resettlement sites providing more than 37,000 families with access to health care services together with MHNTs and static health facilities.

For South Sudanese asylum seekers, UNICEF continues to provide vaccination at the two main entry points of Pagak and Akobo in Gambella region in order to prevent vaccine-preventable diseases and enhance the overall health status of new arrivals. Since January 2017, in coordination with Gambella RHB, UNICEF-supported teams vaccinated upon arrival 23,242 refugee children (under 15 years) against polio and 21,408 refugee children (6 months to 15 years) against measles. The Gambella RHB also provides emergency clinical consultation services to host communities and new refugee arrivals in these two entry points through supplies (emergency drugs kit, jerry cans, plastic buckets, soaps, etc.) and financial support from UNICEF. In the first two weeks of April 2017, 281 clinical consultations were provided, of which 47 per cent were for children under five.

Water, Sanitation and Hygiene (WASH)

While seasonal rains have provided much needed water in many parts of the country, rains remain insufficient particularly in drought affected *woredas* of Oromia, SNNP and most of Somali region (in nine of eleven zones of the region). While demand for water trucking is increasing, financial limitations provide challenges to this costly intervention. Currently, out of the total 736 trucks needed in the country, only 379 trucks are deployed. These trucks are collecting water from functioning water supply systems and distributing to an estimated 1.3 million people affected by the drought in Afar, Oromia, SNNP and Somali regions. Under the partnership agreement with UNICEF, Oxfam has started water trucking in Somali region targeting 198,700 people in temporary resettlement sites, schools and health facilities to have access to safe water.

UNICEF, as the WASH Cluster lead, is prioritising water trucking for areas that are both drought affected and at high risk of AWD. Other key interventions supported by UNICEF include distribution of household water treatment chemicals, drilling of new boreholes as needed/feasible and repair of non-functional water points to help people recover and build community resilience to cope with future shocks. In Somali region, the Regional Water Bureau, IRC, UNICEF and Akvo (software provider) are working to obtain real-time information on the functionality of boreholes. Phase 1 (baseline survey) is completed and teams have so far collected data on 341 boreholes. Based on this information, mobile maintenance teams undertake borehole rehabilitation and preventative maintenance. 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 SNNP region, the UNICEF-supported construction of Lalo-Gerbe water supply project in East Badawacho *woreda* is completed; 6,700 people and two schools are benefiting from this water supply system.

In response to the AWD outbreak in Somali region, the Regional Water Bureau with UNICEF support has started 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.

Education

Out of the two million children requiring school feeding assistance, GoE is implementing a school feeding programme for 1.2 million students and an additional half a million are assisted by partners. The Ministry of Education has called for support to meet the needs of all identified children.

The Somali Regional Education Bureau has reprogrammed some of its development budget for the emergency response. The reprogrammed funds will be prioritized for the procurement of water storage tanks for schools that do not have reservoirs. Water availability is critical for drinking and hygiene purposes and also for preparation of school meals.

Child Protection

In response to the emergency's adverse impact on the psychosocial wellbeing and development of children, UNICEF is supporting regional Bureaus of Women and Children Affairs to address issues of child protection, gender based violence and psychosocial support to affected children. UNICEF continues to support child friendly spaces and community based structures, building on local community networks and practices and that present a sustainable platform to provide psychosocial support and deal with issues of child protection.

in the drought affected areas of Oromia region, community-based child protection systems and social workers identified 214 children (93 girls, 121 boys) subjected to child abuse and separation. They are now registered and receiving follow-up support. In the same region, 165 (75 girls, 90 boys) separated and unaccompanied children were reunified with their families while 2,088 children (973 girls, 1,115 boys) received psychosocial support at child friendly spaces and community-based structures. In addition, 1,957 women and men were reached through community mobilization and awareness raising activities to promote child protection issues. Child protection in emergency training was also provided to 1,028 members of community-based structures to prevent child protection issues.

In SNNP region, child protection in emergency training was also provided to 81 (29 women, 52 men) members of community-based structures to prevent child protection cases. 233 parents (281 women, 15 men) received parenting skill training.

The Somali Region Bureau of Women and Children Affairs distributed dignity kits (which contain hygiene supplies for women and girls of reproductive age), shoes and clothes to 440 individuals, of which 140 are children. In Sitti zone, child protection in emergencies interventions have been discontinued due to lack of funds. UNICEF is discussing with GoE on how to continue these interventions using existing human resources and through engaging parents-teachers associations. Ending the project will result in children being exposed to child protection risks.

Communication for development (C4D)

UNICEF continues to use communication for development as a strategy in the prevention and control of AWD. In addition to access to safe water, provision of water treatment chemicals and water containers and soap, promotion of health and hygiene remains a key action in addressing risky behaviors and poor hygiene habits. In Somali region to create awareness, UNICEF reached 5,374 students (43 per cent girls) with key AWD messages in 23 schools in AWD affected *woredas*. UNICEF also reached 8,687 community members in temporary resettlement sites with AWD messages. These awareness sessions ensure that the affected community is aware of the relation between unsafe water and AWD, knows how to keep water safe and handle food safely. Moreover, UNICEF is currently preparing an integrated C4D response plan for Somali region. UNICEF has also started broadcasting information in Somali on AWD on local radio, BBC and VOA radio.

UNICEF has deployed six emergency C4D technical assistants in Afar, Amhara, Oromia, SNNP and Somali regions to strengthen the C4D response to AWD and scabies.

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. In February 2017, the group requested GoE to allow international media visits to drought affected areas as soon as possible; preparations are ongoing.

In the first week of April, ambassadors of Canada and Finland, along with Heads of development agencies for Sweden, Canada, Finland and Germany and the DFID Humanitarian Advisor, joined the UNICEF Representative in a visit to South Omo zone of SNNP for further understanding of how the drought is affecting this largely pastoralist zone. Regional and zonal ministers also joined and engaged in discussions on the needs, gaps and responses thus far.

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 the refugee response in the country.

UNICEF is currently responding to the emergency situation in the country using US\$33.5 million carry-over funds from 2016 and US\$ 27.3 million received in 2017. During the reporting period, an additional US\$2,148,228 is received from ECHO. In 2017, UNICEF has received funds from the HRF, CERF, ECHO and the Governments of Canada, Japan, Sweden and USA.

Rapid and flexible funds will enable UNICEF to deliver immediate response, when needs are most significant and critical as is the case for the ongoing AWD outbreak. In support of the AWD response, UNICEF also requires funds for water trucking, case management and C4D prioritizing in Somali region as well as affected zones/woredas in Oromia and Afar regions.

The table below shows the funding status as of 15 April 2017:

Appeal Sector	Requirements	Funds available*	Funding gap	
	US\$	US\$	US\$	per cent
Nutrition	41,600,000	14,888,116	26,711,884	64%
Health	13,200,000	11,673,533	1,526,467	12%
WASH	36,700,000	29,003,856	7,696,144	21%
Child Protection	3,900,000	307,222	3,592,778	92%
Learning & Dev	11,600,000	4,995,498	6,604,502	57%
Cluster coordination	3,500,000	0	3,500,000	100%
Total	110,500,000	60,868,225	49,631,775	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. *Carry forward figure is provisional and subject to change in case of adjustments following 2016 account closure.

Next SitRep: 5 May 2017



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UNICEF Ethiopia SITUATION REPORT

2017 UNICEF results table

		Cluster Response			UNICEF and IPs			
	Overall needs*	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	28,077	304,300¹	51,184	28,077	
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	21,982	
People with access to treatment for diarrhoeal disease					35,000	18,788²	14,401	
South Sudanese refugees children aged 6 months to 14 years vaccinated against measles					36,000	21,408	4,877	
South Sudanese refugee children vaccinated against polio					143,000	23,242	4,985	
WATER, SANITATION & HYGIENE								
People accessing safe water	9,200,000	9,200,000	1,300,000	0	1,460,000	217,000	-	
People reached with key messages on hygiene practices	4,800,000	4,800,000	897,000	114,000	1,600,000	464,000	114,000	
CHILD PROTECTION								
Separated and unaccompanied children receiving appropriate care and protection services	25,000	25,000	5,161 ³	875	10,000	5,855 ⁴	875	
Vulnerable children receiving psychosocial support	45,000	45,000	9,7655	4,404	30,000	9,765	4,388	
EDUCATION								
School-aged children with access to emergency education programmes	2,000,000	2,000,000	1,700,000 ⁶	-	630,000	141,800	0	
	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 DRMFSS), 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 This information captures data against CP Sub Cluster indicator "CP cases identified, referred and responded to" which includes separated and unaccompanied children

⁴ UNICEF data includes 'refugee population' as well.

⁵ 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.

⁶ The GOE has reached 1.7 million children with school feeding programme.