

UNICEF HUMANITARIAN ACTION

ERITREA

DONOR UPDATE 14 December 2004

- The situation of drought persists and acute malnutrition continues to be a main risk to proper child development in the country
- Poor rainfall over four years of drought has resulted in a lack of recharge of the water table
- Nearly half of all malnourished children receive supplementary food, but expansion is needed to cover more children and include greater numbers of pregnant women.
- US\$ 13 million in emergency funding is required for 2005.

1. Emergency Overview

Rains have continued to be sporadic and ill-distributed in Eritrea throughout the rainy season of 2004. The drought has contributed to the continuation of food insecurity, market instability and reduced access to potable water throughout most parts of the country. Preliminary results of the FAO/WFP Crop Assessments show production yields of less than the CAP estimate of 108,000 MT, and that rural households have grown only one month of food needs, meaning the traditional 'hungry season' will begin in February, not in May. The mission also reported 150% inflation of cereal prices in the market over the past months, continued loss of livestock and assets and minimal coping mechanisms levels among the majority of the population. Sustained high levels of food aid will be needed to avert a humanitarian disaster.

UNICEF is highly concerned over sustained **high levels of acute malnutrition** among women and children in Eritrea. The national health information system has pointed out that the prevalence of low birth weight infants born between 2002 and 2003 increased from 11 to 18% of all births. According to the Ministry of Health, the numbers of malnourished children presenting to clinic has increased over 2004. The National



Nutrition Surveillance System (NNSS), measured a rapid increase in acute malnutrition in certain sub *Zobas* (zones) in Gash Barka and Anseba between January and June 2004, while other areas such as Debub and most parts of Northern Red Sea saw improvements¹. Hence certain parts of the country are more vulnerable than others to current failure of rains. While enormous strides have been reached to lower infant mortality over the past five years through control measures of communicable diseases with wide immunization coverage and malaria control, Eritrea faces a threat to these achievements due to the current emergency. Eritrea has the highest prevalence of maternal malnutrition in Sub-Saharan Africa, (USAID, EDHS/2003), and one of the highest maternal mortality rates in the world.

Water shortages and deterioration of water quality are being reported in most parts of the country, now even effecting major towns. The water level has dropped by up to seven meters in Northern and Southern Red Sea since there has not been adequate flow of streams from the highlands and thus the water table in these regions has not been able to be recharged. Considering the scanty rainfall that has been recorded, serious difficulties in drinking water supplies may be encountered by many Eritreans in the near future. Unless unforeseen positive rainfall performance occurs, it is estimated that 60-80% of the rural population and a large proportion of livestock in the country areas will be adversely affected. Even in 'normal' times of adequate rain, only 22% of the rural population has access to protected water sources. Due to the drought, expanding this proportion of the population has proven difficult. Sanitation coverage in rural Eritrea is still very low, with only 3.6 % of the population with access to improved sanitation facilities, posing additional health risks to children. Thus, diarrhoeal diseases still represents a major threat to children's survival.

Despite strong efforts, some 260,000, **or over half of the children of primary school age in country are out of school** and with current economic and environmental conditions, UNICEF is concerned that this key foundational aspect of child development may be eroded. Among girls, net enrolment rates are only 43% at this time. Improving on this is made difficult as Eritrean children carry so much of the burden of the current situation. Additionally, social risks to children out of school increases, (with numbers of orphaned, abandoned and/or street children rising now in urban centres), thus UNICEF, with the Government, seeks to increase support to the most vulnerable children in the country, retaining them in school and addressing root causes of abandonment and lack of care.

In addition, because of the delayed demarcation process, the children of internally displaced families, estimated as nearly **26,000 IDP children** - face certain risks to their ability to access a number of basic rights. This includes adequate shelter, clothing, and other relief items – as they have been restricted to camp life for more than four years. However, there will likely be opportunities in 2005 to resettle nearly half of all IDPs in country due to Government commitments and land mine clearance advancement. Thus, UNICEF will be actively supporting expansion of social services to host communities of IDP returnees and settled expellees throughout 2005.

2. Key Actions and Achievements in 2004

In close collaboration with local, national and international partners, UNICEF has continued to respond to the humanitarian needs of the Eritrean population affected by the previous wars and by drought. It has mainly focused on the priority areas of health and nutrition, water and sanitation, girls' education, child protection (especially orphans), and landmine awareness. More recently it has taken an active role in HIV prevention. Together with the Ministry of Health, UNICEF has made strong advancements in supporting child survival in the country. Building on the major measles campaign that vaccinated 1.3 million children in 2003, UNICEF has supported routine immunization services, vitamin A distribution, basic drug supplies, malaria control and maternal health programmes. Supplementary food has been provided to 16,000 women/children and expanded treatment centres created for severely malnourished children.

¹ Global Acute Malnutrition (GAM) results by province were as follows: Anseba = 9-29% (average = 18.1%), Gash Barka = 12-28% (average= 19.1%), Debub=6-9% (average= 7.6%), NRS=9-18% (average = 13.9%). Source: NNSS, MOH Surveys conducted May – July 2004. Supported by: UNICEF, WFP, CRS, Concern, Mercy Corps.

With the World Food Programme, as part of its support to school feeding, UNICEF provided water supplies to 98 schools in the country serving 40,000 school aged children. In the water sector, some 150,000 people, including 87,000 children youth, gained access to safe water through rehabilitation or construction of water sources, and an additional 65,000 received water from water trucking. Prevention of HIV/AIDS was integrated throughout all programmes, including posting of educational boards at water sites, developing policies in infant feeding and continued work in integrating Life Skills within the education system. In the area of child protection, child headed households are being assisted with support in income generating projects, allowing an improved living condition for such families.

3. Funding Situation in 2004

UNICEF is grateful to the generous donor contributions received in response to its portion of the 2004 UN Consolidated Appeal for Eritrea. To date, a little over US\$ 4.5 million has been received against the overall resource requirement of US\$ 13.6 million. The tables below present our current funding situation by sector and by donor:

Table 1. Funding Status of the 2004 CAP by Sector (as of 14 December, 2004)				
Sector	Target (USD)	Funded (USD)	Percentage	Total Outstanding Funding Requirement (USD)
Health & Nutrition	4,381,500	2,365,286	54%	2,016,214
Water & Sanitation	4,064,000	2,195,107	54%	1,868,893
Education	2,366,909	0	-	2,366,909
Child Protection	2,501,265	0		2,501,265
Mine Action	381,000	0	-	381,000
Total	13,694,674	4,560,393	33%	9,134,281

Table Funding Status of the 2004 CAP by Donor (as of 14 December, 2004)						
	Health/ Nutrition	Water /Environ. Sanitation	Education	Child Protection	Mine Action	Total (In US dollars)
Target	4,381,500	4,064,000	2,366,909	2,501,265	381,000	13,694,674
Finland	182,926	182,927				365,853
USAID/OFDA		1,000,000				1,000,000
Norway	1,330,570	203,560				1,534,130
DFID/UK	851,790					851,790
Sweden		808,620				808,620
Total funded	2,365,286	2,195,107				4,560,393
Unfunded	2,016,214	1,868,893	2,366,909	2,501,265	381,000	9,134,281

In addition to the contributions received against the 2004 CAP, some US\$ 3.4 million were carried over from the 2003 contributions that came late in the year, thereby allowing for a smooth transition of our programme activities into 2004.

4. UNICEF Activities and Requirements for 2005

UNICEF will concentrate on strengthening national capacity for immediate interventions in life saving sectors (health/nutrition and water supply) in order to ensure a foundation of child survival during the current environmental / drought crisis. However, greater attention will be introduced to sustainable and community based capacity development – so that, for example – a mother’s knowledge of correct habits in child feeding and health care and hygiene become an accompanying strategy to the provision of relief food. Meanwhile, continued attention will be given to other sectors, for example, life skill training with the education sector to prevent HIV/AIDS, and further work in reintegrating orphans and street children through greater support in income generating to vulnerable families.

Health and Nutrition (US\$ 3,050,000)

Activities will target some 610,000 drought affected and displaced women and children in the country. This will include: 342,000 women of child bearing age, some 5,000 children who are severely malnourished, 140,000 pregnant and lactating women, and 68,000 infants. It will also include 55,000 malnourished children under five years. Activities will include:

- Supply of therapeutic and supplementary food, equipment to more than 50 health centres and reinforcement training of staff
- With UNFPA, supply of emergency reproductive health commodities , for reduction of risk pregnancies country wide.
- With WHO supply of essential drugs to some one third of all clinics in most vulnerable areas of the country
- Strengthening surveillance systems and conducting of two national nutrition surveys per year,
- Strengthening nutrition units at decentralized levels and support of dissemination workshops,
- Country wide provision of vaccines and supplies and micro-nutrients, for routine immunization services, improvement of the cold chain, vitamin and mineral supplementation, and malaria control, (provision of insecticide treated nets, etc.).

Water and Environmental Sanitation (US\$ 4,956,000)

Complementing the Government’s “*Emergency Water /Sanitation Action Plan - 2004-06*”, UNICEF will ensure that some 85,000 people in eleven communities will be assisted by creating water systems. In addition, 65,000 people in areas that have no adequate water source will receive water through trucking. Water supply and sanitation will be provided to 30 additional schools over the year reaching 9,000 children. Policy work will complement these achievements. Specifically the following is planned:

- Construct water supply systems for 85,000 people in eleven (11) communities, support emergency water trucking for 65,000 people in eighteen (18) drought communities where permanent water systems are not yet possible to be established, and establish community management systems for sustainability;
- Support school feeding through water and sanitation provision to 30 additional primary schools;
- Expand hygiene and sanitation promotion programme throughout the country and develop education materials in various public health areas including HIV prevention.

Education (US\$ 744,318)

A total of 26,000 displaced and war affected children – including those IDP children returning to their villages – and host communities will benefit from support in infrastructure and materials. Additional attention will be given to supporting continued secondary education of both IDP and returning refugees from Sudan. The following key activities will be included:

- Conducting of assessments and production and dissemination of situation update reports on educational needs of IDPs in camps and returning and settling internally displaced and expellees in rural communities;
- Monitoring of access and quality of education offered in camps and in resettlement affected areas;
- Provision/reconstruction of temporary infrastructure and water and sanitation facilities/materials to ensure a smooth transition to village life;

- Procure and distribute education materials to needy schools within camps and in resettlement areas;
- Provide recreational material support to vulnerable children (kits and clothing);
- Provide psycho-social support for children.

Child Protection (US\$ 3,180,000)

Emphasis will be placed on income generating activities of vulnerable families, (extended families of orphans, child headed households, destitute families of street children). Some 40,000 IDP women and children – both in camps and returning – will be supported with relief items, and income generating assets will be provided to 2,800 households. The following activities are foreseen:

- Provide clothing, shoes, and blankets and sanitary items to 30,000 children and 10,000 IDPs and returnees;
- Support national bodies for systematic identification of orphans and vulnerable children at risk;
- Improve monitoring of income generating support, child welfare and means for improvement;
- Conduct Emergency Preparedness & Response (EPR) training for counterparts to strengthen the management of vulnerable groups in times of emergencies.

Mine Action (US\$ 426,136)

The activities will continue to strengthen national counterparts and community based teams and target geographical areas - where some 200,000 people are living in high risk areas. Additionally, some 60,000 IDPs living in Gash Barka and Debub will be included - as well as high risk children, teachers, farming and nomadic communities. The main activities include:

- Institutional strengthening of national bodies in Mine Risk Education (MRE): establish networks of community volunteers, deploy MRE Field Teams, implement MRE with Ministry of Education within primary school curricula and promote the same in secondary school curricula;
- Expand mass-media strategies using radio, posters, leaflets, etc.;
- Link MRE and mine clearance /disposal collection of mine/UXO-related data;
- Continue to provide psychosocial support and recreation activities for children affected by mines and UXOs.

4. Appeal Requirements for 2005

The following table described funding requirements under the Consolidated Appeal and lists some specific actions that will be supported in 2005, assuming the continued generous support from our donors.

Table 3. Summary of UNICEF Financial Needs for 2005	
Sector	US\$
Health and Nutrition	3,784,318
Water and Environmental Sanitation	4,956,000
Education	744,318
Child Protection	3,180,000
Land Mine Awareness	426,136
Total	13,090,772

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