UNICEF requires an additional US$4.96 million to respond to the refugee influx from the South Sudan crisis, bringing its overall 2014 requirements to US$36 million.

Since the outbreak of conflict in South Sudan in mid-December 2013, 77,000 South Sudanese have fled the violence to Ethiopia, with latest estimates projecting that up to 140,000 people – mostly women and children – will seek protection by the end of the year. Ethiopia continues to experience emergencies related to climate change, including droughts, floods, landslides and disease outbreaks. Although the food security situation in Ethiopia improved in 2013 compared with 2010 and 2011, an estimated 2.7 million people (52 per cent children) are still in need of food assistance.\(^1\) With the relatively good rains in 2013, the harvesting of the \textit{meher}\(^6\) season crops, which takes place between November and January, is expected to be favourable and lead to a stable food security situation in most parts of the country.\(^2\) Following the lowest admissions of children with severe acute malnutrition (SAM) since 2010, the number of children needing treatment for SAM is expected to decrease in 2014, to approximately 238,700 admissions (against 283,740 projected admissions in 2013). Infectious diseases such as measles, meningitis and acute watery diarrhoea continue to pose threats to children, particularly in remote areas with limited access to health facilities. Inter-communal conflict, displacements and socio-economic shocks will pose additional threats, placing children at risk of separation from their families, emotional distress, abuse and exploitation. Protection support will need to be strengthened to address these challenges. In addition, Ethiopia will continue to receive vulnerable refugee children in need of humanitarian assistance from neighbouring countries. As of December 2013, 431,648 refugees, mainly from Somalia (56 per cent), Eritrea (18 per cent), South Sudan (17 per cent) and Sudan (7.5 per cent), were residing in Ethiopia.\(^3\) Ethiopia is also receiving an increasing number of unaccompanied migrant children, including some victims of trafficking, who are returning from Yemen and Saudi Arabia.\(^4\)

**Humanitarian strategy**  
In 2014, UNICEF will continue to work with the Government of Ethiopia and humanitarian partners to meet its Core Commitments for Children in Humanitarian Action. Together, they have accelerated efforts to break the vicious cycle of drought, hunger and poverty by promoting resilience strategies. UNICEF will support interventions to facilitate adequate access to education, health and nutrition care, sanitation and hygiene facilities and protection support for children in Ethiopia during emergencies, including for the latest refugee influx from South Sudan. In the remote and emergency-affected areas of the Somali and Afar regions, UNICEF will support mobile health and nutrition teams to provide access to basic essential health services. UNICEF will collaborate with the World Health Organization (WHO) and partners to support the Federal Ministry of Health to prevent and control disease outbreaks, and UNICEF will support the treatment of children suffering from SAM through the government-led community-based management of acute malnutrition (CMAM). UNICEF will also strengthen support to the Federal Ministry of Health to finalize the nutrition supply transition plan to enable the Government to gradually take over the management of the CMAM supply chain. UNICEF interventions will reach 1.9 million people with sanitation and hygiene information to prevent child illnesses, and working with partners, UNICEF will compliment life-saving water, sanitation and hygiene (WASH) interventions with the establishment and rehabilitation of water sources. UNICEF will facilitate continued education for children affected by emergencies and will support community-based social protection structures to strengthen local communities’ traditional care and support systems. Within the framework of Inter-Agency Appeal for South Sudanese Refugee Emergency and in cooperation with the Administration for Refugees and Returnee Affairs (ARRA), UNICEF will focus on delivering life-saving interventions in response to the critical needs of refugees, including those affected by conflict and sexual violence.  

**Nutrition**  
- 246,850 children in humanitarian situations aged 6 to 59 months affected by SAM admitted for treatment  
- 2,673,000 children and pregnant and breastfeeding women in humanitarian situations screened and referred to supplementary feeding programme  
- 30,000 refugee children aged 6 to 59 months received vitamin A supplementation

**Health**  
- 533,000 children and women access essential health services though preventive and curative interventions in the Somali and Afar regions  
- Populations affected by disease outbreaks (13,000 people for acute watery diarrhoea and 9,000 children for measles) accessing life-saving curative and preventive interventions  
- 234,600 refugee and host community children vaccinated against measles

**WASH**  
- 1,300,000 people in humanitarian situations accessing water for drinking, cooking and personal hygiene  
- 2,000,000 people in humanitarian situations receive sanitation and hygiene information to prevent child illnesses

**Child protection**  
- 36,000 children in humanitarian situations vulnerable to violence, exploitation and abuse accessing appropriate care and services

**Education**  
- 135,000 children in humanitarian situations accessing formal and non-formal education
including health and nutrition, education, water, sanitation and hygiene, and child protection. As cluster lead in nutrition and WASH and co-lead in education and child protection, UNICEF will also facilitate coordination.

**Results from 2013**

UNICEF appealed for US$53,487,000 for 2013, and as of the end of October 2013, a total of US$55,694,840, or 67 per cent of requirements, had been received in contributions. Despite this funding gap, UNICEF was able to achieve its planned results for 2013 using carry-over funds from 2012 of nearly US$8,915,583. This allowed for a timely response to several emergencies. UNICEF, the Federal Ministry of Health and non-governmental organizations managed SAM cases by providing therapeutic food, drugs and equipment to over 11,000 therapeutic feeding sites in the country. By September, over 200,000 severely malnourished children received treatment. Sufficient funding was mobilized in 2013 to support a four month nutrition supply, considered the minimum security stock. Due to successful efforts to mobilize resources and conduct advocacy, for the first time in Ethiopia, several donors committed to multi-year funding support for the procurement of ready-to-use-therapeutic food (RUTF). Nearly 500,000 people accessed clean water in drought-affected areas with UNICEF-supported WASH interventions. To assist the Somali and Afar regional government programmes for hard-to-reach communities, UNICEF supported mobile health and nutrition teams to provide lifesaving curative care to nearly 300,000 people. A total of 13,238 health extension workers received training on integrated community case management services in remote parts of Afar, Benishangul Gumuz, Oromia, Somali, and the Southern Nations, Nationalities and Peoples Region. UNICEF’s partnership with the United Nations High Commissioner for Refugees (UNHCR) supported emergency education, nutrition and child protection for refugee children. A total of 66,028 children (including 35,000 refugee children) continued their educations due to the provision of supplies and teacher training and the establishment of learning spaces supported by UNICEF. In child protection, 25,000 children continue to be reached with psychosocial support through child-friendly spaces established in 2012 and sustained in 2013 through UNICEF technical support in Dollo Ado. In addition, UNICEF supported Community Care Coalitions, community-based social protection structures that aim to strengthen traditional care and support systems in emergency-affected areas. In 2013, the Community Care Coalitions supported 10,280 children through the distribution of school materials and school uniforms to orphans, and the provision of medical treatment to the most vulnerable. The Government launched the National Nutrition Programme and endorsed a Disaster Risk Management Policy. These, together with the Health Extension Programme, will strengthen the resilience approach in Ethiopia. UNICEF has already facilitated disaster risk management training to government and partners from non-governmental organizations. In 2013, UNICEF, the Food and Agriculture Organization (FAO) and the World Food Programme (WFP) initiated a joint food security and nutrition partnership to support the various government-led programmes to build resilience. This will be strengthened in 2014.

<table>
<thead>
<tr>
<th>NUTRITION</th>
<th>Cluster 2013 target</th>
<th>Cluster total results</th>
<th>UNICEF 2013 target</th>
<th>UNICEF total results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children under 5 with SAM admitted to therapeutic feeding programme</td>
<td>300,000</td>
<td>201,000*</td>
<td>300,000</td>
<td>267,226*</td>
</tr>
<tr>
<td>Children under 5 receive vitamin A twice a year</td>
<td>11,700,000</td>
<td>11,863,000</td>
<td>11,700,000</td>
<td>11,863,000</td>
</tr>
<tr>
<td>Pregnant and breastfeeding women screened</td>
<td>2,640,000</td>
<td>2,990,000</td>
<td>2,640,000</td>
<td>2,990,000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HEALTH</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Children, adolescents and women have sustained access to essential health services for high-impact preventive and curative interventions (consultations provided by mobile teams)</td>
<td></td>
<td>576,000</td>
<td>298,000**</td>
<td></td>
</tr>
<tr>
<td>Adults and children over the age of 2 receive meningitis vaccine</td>
<td></td>
<td>3,800,000</td>
<td>2,600,000</td>
<td></td>
</tr>
<tr>
<td>Populations affected by disease outbreaks access life-saving curative and preventive interventions within 72 hours (number of outbreaks)</td>
<td></td>
<td>12</td>
<td>5***</td>
<td></td>
</tr>
<tr>
<td>Refugee children under 1 receive routine immunization (Penta3)</td>
<td></td>
<td>14,000</td>
<td>6,000****</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>WATER, SANITATION AND HYGIENE</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Children and women access sufficient water of appropriate quality and quantity for drinking, cooking and personal hygiene</td>
<td>2,621,186</td>
<td>1,343,000</td>
<td>1,000,000</td>
<td>498,000</td>
</tr>
<tr>
<td>Children and women receive critical WASH-related information to prevent child illness, especially diarrhoea</td>
<td>2,000,000</td>
<td>704,000</td>
<td>1,900,000</td>
<td>623,000</td>
</tr>
</tbody>
</table>

**CHILD PROTECTION**

* Nutrition data are from January to December 2013
Identification, documentation, family tracing and reunification of separated and unaccompanied children | N/A | N/A | 400 | 238
Children provided with access to psychosocial support services by registration with child-friendly spaces | N/A | N/A | 20,000 | 25,000

**EDUCATION**

School-aged children affected by emergencies continue their education with the establishment of safe and protective learning environments and the provision of teaching and learning materials | 236,464 | 44,000 | 60,000 | 64,000
Children affected by emergencies have access to improved quality education through the provision of basic pedagogy, psychosocial support, disaster risk reduction and peace education training for teachers and education personnel | 385,000 | 50,000 | 100,000 | 42,000

**HIV AND AIDS**

Community and government representatives trained in participatory mapping of child protection issues and the minimum package on HIV and AIDS in emergency settings | | | | 1,000 | 0

**Funding requirements**

In 2014, UNICEF requires US$36,086,000 for emergency activities to save children’s lives and build on past gains made towards strengthening the resilience of communities in Ethiopia and respond to the refugee influx from South Sudan. The reduction from 2013 reflects a projected improvement in the food security and nutritional situation in 2014. Although multi-year grants for the supply pipeline for ready-to-use therapeutic food has also been secured, funds are needed to get supplies to children when needed, and to monitor the response. The funding requirements include an estimated US$3 million for UNICEF support for the UNHCR-led refugee response in Dollo Ado, Shire and Benishangul-Gumuz refugee camps and nearly US$5 million to respond to the refugee crisis in South Sudan.

<table>
<thead>
<tr>
<th>Sector</th>
<th>Original 2014 HAC requirements (US$)</th>
<th>Jan-Dec 2014 additional requirements (US$) for response to South Sudan refugee crisis</th>
<th>Revised 2014 HAC requirements (US$)</th>
<th>Funding received</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>8,840,000</td>
<td>660,000</td>
<td>9,500,000</td>
<td>200,700</td>
<td>9,299,300</td>
</tr>
<tr>
<td>Health</td>
<td>9,000,000</td>
<td>1,300,000</td>
<td>10,300,000</td>
<td>1,758,100</td>
<td>8,541,900</td>
</tr>
<tr>
<td>Water, sanitation and hygiene</td>
<td>7,075,000</td>
<td>1,200,000</td>
<td>8,275,000</td>
<td>520,000</td>
<td>7,755,000</td>
</tr>
<tr>
<td>Child protection</td>
<td>2,700,000</td>
<td>800,000</td>
<td>3,500,000</td>
<td>650,000</td>
<td>2,850,000</td>
</tr>
<tr>
<td>Education</td>
<td>2,000,000</td>
<td>1,000,000</td>
<td>3,000,000</td>
<td>0</td>
<td>3,000,000</td>
</tr>
<tr>
<td>Cluster/sector coordination</td>
<td>1,511,000</td>
<td>0</td>
<td>1,511,000</td>
<td>50,000</td>
<td>1,461,000</td>
</tr>
<tr>
<td>Total</td>
<td>31,126,000</td>
<td>4,960,000</td>
<td>36,086,000</td>
<td>3,178,800</td>
<td>32,907,200</td>
</tr>
</tbody>
</table>

**Who to contact for further information:**

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Email: esy@unicef.org
2 The meher crop season is the main season and produces 90 to 95 per cent of the country’s total cereal output, and the belg harvest provides the remaining 5-10 per cent of the cereal output.
5 The International Organization for Migration (IOM) estimates that around 20,000 Ethiopians trapped in mixed migration flows await repatriation in Yemen of which an estimated 40 per cent are unaccompanied children. In addition, more than 23,000 Ethiopian migrants are currently being deported from Saudi Arabia. Among these are an unknown number of unaccompanied children.