**SitRep # 3 - Reporting Period: 7- 20 March 2017**

**Highlights:**
- Meteorological forecasts indicate a normal to below normal Gu rains (March to May), particularly in the Somali region and southern pastoral lowlands, which may result in a deepening of the drought. Parts of pastoral Afar, crop dependent Tigray, Amhara, SNNPR and Oromia regions are also expected to receive below average spring Belg rains.
- Severe acute malnutrition (SAM) admission data for children under five shows a decrease from December 2016 to January 2017 in all the regions except Somali and the drought-affected zones of Oromia.
- To ensure safe water is available at household level, UNICEF provided 5 million sachets of household water treatment chemicals and 17,000 jerry cans to Afar and Somali regions.
- In response to the ongoing acute watery diarrhoea (AWD) outbreak, during the reporting period, 14 case treatment centre (CTC) kits were dispatched to Somali region; 50 additional CTC kits are in the pipeline.

**UNICEF’s Key Response with Partners in 2017**

<table>
<thead>
<tr>
<th>Indicators</th>
<th>UNICEF &amp; Partners</th>
<th>Sector/Cluster</th>
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<tbody>
<tr>
<td></td>
<td>UNICEF Target</td>
<td>Cumulative results (#)</td>
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<tr>
<td><strong>WASH:</strong> People accessing safe water</td>
<td>1,460,000</td>
<td>217,000</td>
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<td><strong>Nutrition:</strong> Children under 5 years with SAM admitted for treatment to therapeutic care programmes</td>
<td>303,300</td>
<td>23,107</td>
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<tr>
<td><strong>Health:</strong> People provided with access to essential and life-saving health care services</td>
<td>400,000</td>
<td>42,208</td>
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<td><strong>Education:</strong> School-aged children with access to emergency education programmes</td>
<td>630,000</td>
<td>-</td>
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<tr>
<td><strong>Child Protection:</strong> Vulnerable children receiving psychosocial support</td>
<td>30,000</td>
<td>5,377</td>
</tr>
</tbody>
</table>

**UNICEF Appeal**

US$110.5 million
2017 Funds available

Funds received to date: US$14.8 m

Funding gap: US$62 m

*Carry-over: US$33.5 m

**Funds available includes funding received for the current appeal year as well as carry-over from 2016.*

**Nb. See Annex 1 for more information on programme results for 2017.**
Situation Overview and Humanitarian Needs

Meteorological forecasts indicate normal to below normal Gu rains (March to May), particularly in the majority of Somali region, which may result in a deepening of the drought. In Somali region, the Gu rains are important for the availability of water and pasture and contribute 50 to 70 per cent of the annual rainfall. In Southern Nations, Nationalities and People’s (SNNP) region, some rain was received in the highland areas but not enough so far to have a positive impact on the situation; while no rains were received in the lowland areas.

According to the 2017 Humanitarian Requirement Document (HRD) released by the Government of Ethiopia (GoE), some 5.6 million people are in need of food assistance due to the severe drought. Seventy five per cent of these people in need of food aid are found in Oromia, Somali and SNNP regions that also have incurred heavy loss of livestock. The remaining animals are in poor physical condition, having an impact on the nutritional status of children due to reduced or absence of milk production. These regions are currently facing an extreme scarcity of water. In Somali region, a high number of pastoralists facing severe food and water shortages have gathered in temporary settlement areas near the remaining water points where they are being assisted by GoE and humanitarian partners.

The National Disaster Risk Reduction & Management Council (NDRMC) is preparing to initiate a pre-Belg assessment at the end of March to determine development of humanitarian needs, particularly in the regions of concern. The Belg assessment will be conducted in June as usual. The findings will inform revisions in humanitarian response planning. Following delayed and poor rains in the south eastern part of the country, the NDRMC has expressed its concern about the possible deterioration of the drought situation.

Limited number of NGOs partners in Somali region compounded with poor availability of funds is hampering the humanitarian response. Funding situation of the HRD is of serious concern as the situation is quickly deteriorating in drought affected pastoral areas and humanitarian needs are expected to increase sharply in the coming weeks and months, possibly expanding to crop dependant areas.

Map 1: Hotspot Woredas, December 2016

Source: Emergency Nutrition Coordination Unit (ENCU) data.

Humanitarian Leadership and Coordination

There are currently a number of UN agencies and NGOs that are supporting the Government-led humanitarian response. The GoE’s 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.

Together with GoE, UNICEF continues to provide cluster leadership for WASH and nutrition as well as co-leadership with Save the Children International (SCI) for education. In addition, UNICEF provides sub-cluster co-leadership with UNFPA for child protection and gender based violence (GBV) 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 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 GoE’s Administration for Refugees and Returnees Affairs (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**

SAM admission data for children shows a decrease from December 2016 to January 2017 in all the regions except Somali (where SAM admissions increased from 3,817 in December to 5,942 in January). The increase of admissions in Somali is drastic and possible reasons that may be attributed to the increase are:

- Impact of the drought on the nutrition status of the children;
- Mass screening in January identifying around 10,000 SAM cases of which about 6,000 have been admitted to the CMAM programme;
- Establishment of IDP sites equipped with Therapeutic Feeding Programme (TFP) services and Mobile Health and Nutrition Teams (MHNTs) that are likely to have reached more people in need; and,
- AWD outbreaks.

**SAM admissions in regions**

*Source: ENCU data.*
In addition to Somali region, there is also a significant increase in admissions of children with SAM in the drought-affected zones of Oromia, from 4,477 in December 2016 to 5,131 in January 2017. Other regions and zones remain at the same level or have decreased in comparison to the previous month.

Afar, SNNP and Somali regions are facing challenges with NGO support. Some woredas classified as first priority are not supported by implementing partners in Afar. Meanwhile, in areas of SNNP and Somali, Emergency Humanitarian Funds have been granted to NGOs, but there is an observed delay in implementation, especially in the support for the stabilisation centre (SC) services and other nutrition activities. UNICEF, as the last resort provider, is filling these gaps by hiring additional staff in Somali and supporting the operational cost of six temporary treatment centre (TTC) in the three most affected zones of Korahe, Doolo and Jarar. For Afar and SNNP, UNICEF is strengthening health officers’ capacity with Community-based Management of Acute Malnutrition (CMAM) and Infant and Young Child Feeding in Emergencies (IYCF-E) trainings in Afar with 128 health officers trained in March. Given the increase in the number of SC cases in SNNP, UNICEF is supporting the Regional Health Bureau (RHB) with the operational costs of food for care givers.

Health
The AWD outbreak in Somali region is of critical concern due to the close proximity of temporarily settled people with additional risk factors including shortage of water plus poor sanitation and hygiene practices. The Federal Ministry of Health (FMoH) is now directly supporting the Somali RHB with the deployment of senior FMoH experts and health staff from other regions. A new scale up plan is under finalisation by the Somali RHB. Case treatment centre (CTC) management, water supply, water treatment chemicals use and social mobilisation are identified as priority needs in the fight against the outbreak in Somali Region. In Amhara and Oromia, AWD has re-emerged. In SNNP, although AWD cases have deceased as a result of awareness creation, better hygiene and sanitation practices, AWD is still active in two woredas of the region. Scabies cases are being reported in Oromia and SNNP, although the incidence trend has maintained static for the past four weeks.

In response to the ongoing AWD outbreak, during the reporting period, 14 CTC kits were dispatched to Somali region; 50 additional CTC kits are in the pipeline. The CTC kits (each kits has ten beds for admission of critical cases) enable the establishment of temporary clinics for the isolation and treatment of patients with AWD. UNICEF also dispatched five emergency drug kits (EDK), 50 cartons ringer lactate (medication for patients with AWD) and 12,000 long-lasting insecticide-treated bed nets to communities in temporary settlement areas. Each EDK includes drugs to provide basic health care services to an estimated 2,500 people for three months while the bed nets will provide protection in this malaria-endemic area. UNICEF comprehensive support also includes technical assistance with the deployment of two disease outbreak experts to Afar and Somali.

49 MHNTs are maintained in Somali and Afar to provide essential and emergency health, nutrition and WASH services to drought affected communities.

The national measles vaccination campaign, led by the Ministry of Health, targeting over 22 million children has been completed, except in Somali region. Preliminary reports indicate high coverage while mop-up vaccination is taking place where coverage was reported to be sub optimal.

UNICEF has procured and dispatched 100,000 bottles of Permethrin, 5 per cent lotion, for the treatment of scabies, to SNNP and Oromia as per the request of the Federal Ministry of Health.

Critical water shortages and the lack of a comprehensive and integrated response are challenging the control of AWD, leading to the prolonged duration of the outbreak.

Water, Sanitation and Hygiene (WASH)
To ensure safe water is available at household level, UNICEF provided WASH supplies worth more than US$628,000 to Afar and Somali, including body and laundry soaps, water containers, household and community-level water treatment chemicals and disinfectant. The household treatment chemicals alone provide 67,000 households with safe water for two months.

As part of the emergency WASH response in Somali region, UNICEF is rehabilitating boreholes and provides generators and pumps to RWBs to ensure they remain functional. UNICEF has supported the rehabilitation and maintenance of 50 water schemes in Oromia to benefit some 135,000 people. In Konso woreda, SNNP, UNICEF is planning to rehabilitate two boreholes.

UNICEF continues to support long-term development as part of the drought emergency response. In Oromia, UNICEF is funding the drilling of two deep wells. In Somali region, UNICEF has completed the drilling of a new borehole in Shinille woreda. In Tigray, through UNICEF financial assistance, 42 shallow wells were completed in AWD-affected woredas and to benefit 8,250 people and nine schools.
In order to improve the planning of emergency response and based on a mobile technology, the Somali RWB, with support from UNICEF and IRC, has started an inventory exercise of real time monitoring on functionality of existing water schemes and other critical WASH indicators. This is expected to support the planning of the ongoing emergency response with a focus on borehole rehabilitation and maintenance interventions.

UNICEF recruited and deployed 13 WASH information management officers (IMO) in all regions of the country to support monitoring of water and sanitation situation and response. One IMO is deployed in each region except in Somali, where one regional and four zonal IMOs are deployed in consideration of the critical situation, requiring support of real time monitoring and zonal level WASH coordination. In addition, a dedicated WASH Cluster Coordinator has been deployed in Somali region.

Education
The Education cluster reports that in the coming months, the intensifying drought could potentially increase the number of children dropping out of school. The Ministry of Education (MoE) is currently providing emergency school feeding to over 1.7 million children across the country. MoE expects the school feeding programme to reduce the number of school drop outs and prevent child trafficking. However, it was noted that collaboration with other stakeholders like the Ministry of Health and the Ministry of Water, Irrigation and Electricity is critical because school health, water, sanitation and hygiene are issues faced by children at school.

The Education cluster reports that lack of funding is the major constraint that hinders partners to provide Education in emergencies responses including the provision of school feeding, school materials and the construction of temporary learning centres. Out-of-school children are exposed to child marriage, sexual exploitation, child labour and migration to other countries.

To support access to education for South Sudanese refugees in Gambella, UNICEF signed programme cooperation agreements (PCA) with Plan International (PI) and SCI. As per the agreement with PI, 24 semi-permanent classrooms are under construction (25 per cent completed), which will provide access to children to lower primary schooling and early childhood care and development services near their settlements. Seven blocks of sex-segregated latrines with WASH facilities are also under construction. Under the SCI agreement, 16 semi-permanent classrooms are under construction (50 per cent completed). Four latrine blocks with WASH facilities are also under construction. SCI has trained 28 incentive teachers on basic pedagogy, classroom management, teachers code of conduct and lesson plan preparation. Following this training, teachers prepare weekly lesson plans and provide appropriate support to children as per their background in addition to ending corporal punishment of children. Parent-teachers associations are established in each centre with 14 members who receive a one-day training. Currently, the associations are working with the school community on keeping school discipline and following up on students’ attendance.

Child Protection
The drought has put children at a greater risk of exploitation, abuse and neglect as impoverished families have limited capacity to protect their children. Children who are not protected and cared for suffer from long-term impacts on their physical and mental development, which in turn also affects their education. Limited capacities of partners compounded by a critical funding shortage have constrained a timely emergency response.

In Oromia region, with UNICEF support, 494 (265 female) community members and child friendly spaces facilitators were trained in child protection in emergencies and in psychosocial support. Additionally, 1,904 children participated in child friendly spaces (CFS) while 317 children were referred to social services across health, education and legal sectors. The CFS, established through UNICEF financial assistance, are safe areas for children to play, learn and socialize under the supervision of social workers.

Children at temporary settlements in Yu’ub and Garlegubay sites in Doolo zone of Somali region now have access to temporary CFSs. In the same sites, 107 (40 per cent female) received psychosocial support, 500 vulnerable children have access to community-based support and 700 (50 per cent female) received non-food items, including clothes and dignity kits. Eligibility was based on degree of vulnerability.

Social Protection
At the national level, some 7.9 million beneficiaries will receive cash and in-kind transfers under the Productive Safety Net Programme (PSNP) throughout 2017. The transfers are made in exchange for public works, except for vulnerable groups, who are supported directly. In the drought-affected areas, the PSNP reaches 1,617,927 beneficiaries while food aid relief from HRD funding reaches 1,337,434 beneficiaries in Somali region (as of 25 February 2017).

Households that do not benefit from PSNP but have children with SAM or moderate acute malnutrition (MAM) are expected to be supported by HRD funds or the contingency budget of the PSNP. In addition, pregnant and
breastfeeding women under the PSNP are exempt from public works beginning from their first antenatal care visit through the first year postpartum. PSNP caretakers of malnourished children are also exempt from public works upon referral from the health sector for the duration of the treatment. In Somali region, the number of children with SAM under five is forecasted to be 48,732 for 2017, representing 16 per cent of the national 2017 caseload while the number of children under five is only 4.6 per cent of the total population.

UNICEF and the World Food Programme (WFP) will support the GoE to monitor and track the inclusion of SAM and MAM children through PSNP and HRD funds in drought-affected areas. In Somali region, to collect information regarding the inclusion of SAM children in PSNP and HRD transfers, UNICEF Ethiopia has transferred the funds to the RHB to print and distribute the forms in the eight most drought-affected woredas. The first round of data collection is expected to be reported at the regional nutrition coordination platform by mid-May 2017, while the regional emergency nutrition coordination unit (RENCU) and the RHB will report the monthly SAM and MAM caseload for March 2017.

Communication for Development

UNICEF has continued its C4D intervention through coordination, development and context specific multi-media messaging as well as approaches and technical support in the prevention and control of AWD and scabies.

Periodic qualitative assessments among affected communities revealed that there is increased knowledge and adoption of positive practices among families and communities. There is also increased engagement of key actors including schools, community based organizations and religious institutions in the dissemination of messages through their structures in the prevention and control of AWD and scabies.

During the reporting period in Somali region, a total of 835 health workers and local social mobilization committee members in 24 health facilities of 21 emergency affected woredas were oriented on key health messages through zonal health C4D technical assistants.

C4D Regional Advisor is expected to visit UNICEF Ethiopia and Somali region during the third week of March. Main objective is to finalise the development of a multi-sectoral package of social mobilisation intervention in Somali region (AWD affected areas and temporary resettlement sites).

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, the group requested GoE to allow international media trips to drought-affected areas as soon as possible. In turn, GoE has agreed and aims for trips to take place at the beginning of April. UNICEF has stressed the urgency of the media visits.

Donor field visits for the month of March include KOICA to Benishangul-Gumuz and DFID to Semera, Afar.

Funding

The UNICEF 2017 Humanitarian Action for Children (HAC) appeal for Ethiopia, launched in January, amounts to US$110.5 million. US$93.1 million will be used to respond to the drought and remaining funds are allocated for refugee response. The HAC appeal is currently 44 per cent funded. The table below shows the funding status as of 13 March 2017.

In 2017, UNICEF emergency interventions are made possible through the contributions of HRF, CERF and the Government of Sweden. In addition, UNICEF has carried over funds that made possible the continued support to affected populations.
*Requirements reflected in this table for the drought response were part of the HAC 2017.**

**Funds available include funding received in 2017 (US$14,804,459) 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 April 2017

Who to contact for further information:

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## SUMMARY OF PROGRAMME RESULTS

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<tr>
<th>Overview</th>
<th>Cluster Response</th>
<th>UNICEF and IPs</th>
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<tbody>
<tr>
<td></td>
<td>2017 Target</td>
<td>Total Results</td>
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<tr>
<td><strong>NUTRITION</strong></td>
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<tr>
<td>Children under 5 years with SAM admitted for treatment to therapeutic care programmes</td>
<td>303,000</td>
<td>303,000</td>
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<tr>
<td>Caregivers of children 0-23 months accessing infant and young child feeding counselling</td>
<td>1,000,000</td>
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<tr>
<td><strong>HEALTH</strong></td>
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<tr>
<td>People provided with access to essential and life-saving health care services</td>
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<tr>
<td>People with access to treatment for diarrhoeal disease</td>
<td></td>
<td></td>
</tr>
<tr>
<td>South Sudanese refugees children aged 6 months to 14 years vaccinated against measles</td>
<td></td>
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<tr>
<td>South Sudanese refugee children vaccinated against polio</td>
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<td><strong>WATER, SANITATION &amp; HYGIENE</strong></td>
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<tr>
<td>People accessing safe water</td>
<td>9,200,000</td>
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<td>People reached with key messages on hygiene practices</td>
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<td><strong>CHILD PROTECTION</strong></td>
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<td>Separated and unaccompanied children receiving appropriate care and protection services</td>
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<td>Vulnerable children receiving psychosocial support</td>
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<tr>
<td><strong>EDUCATION</strong></td>
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<td>School-aged children with access to emergency education programmes</td>
<td>2,000,000</td>
<td>2,000,000</td>
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### 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 DRMFF), 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

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1 Nutrition target for UNICEF would be revised to 307,300 (303,000 for Ethiopia and 4,300 for refugees).
2 This information captures data against CP Sub Cluster indicator “CP cases identified, referred and responded to” which includes separated and unaccompanied children.
3 UNICEF data includes ‘refugee population’ as well.
4 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.