UNICEF has improved its quality assurance mechanism of the Community Management of Acute Malnutrition Programme by recruiting 10 more field monitors, deployed in SNNPR, Amhara and Oromia regions. The field monitors will monitor the progress and performance of the humanitarian response with respect to quality of service provided by the CMAM and the infant and young child feeding (IYCF) programmes and in response to the drought situation.

Nutrition emergency support to affected regions continues with 89 per cent of priority 1 woredas and 67 per cent of priority 2 woredas currently covered by NGOs.

In response to the flood emergency, UNICEF is distributing water treatment chemicals, soap and jerry cans. A total of 4 million sachets of water household treatment chemicals were released in May 2016, for distribution in Oromia, Tigray, Somali, SNNPR and Afar. The response is expected to provide access to clean water for more than 33,000 families for two months. Information material will be distributed together with the water chemicals to ensure correct use.

30,000 non-food items kits supplied by the UK Government and facilitated by UNICEF were distributed to the Ethiopian Government. The kits include kitchen sets, sleeping mats, blankets, shelter and hygiene kits and will support 150,000 flood displaced people in different regions.

Following negotiations between the Ethiopian and the South Sudanese governments, 91 of the 146 abducted children returned back to Gambella. To date, 69 have been reunited with their families and communities. UNICEF provides support to the government in terms of basic health, nutrition and child protection services as well as non-food items.

UNICEF’s Key Response with Partners in 2016
Updated as of 31 May 2016 (See Annex 1 for further details)

<table>
<thead>
<tr>
<th>Indicators</th>
<th>UNICEF &amp; Partners</th>
<th>Sector/Cluster</th>
</tr>
</thead>
<tbody>
<tr>
<td>WASH: People in humanitarian situations accessing water for drinking and cooking purposes</td>
<td>2,200,000</td>
<td>1,149,239</td>
</tr>
<tr>
<td>Nutrition: # children 6-59 months with SAM admitted to therapeutic care</td>
<td>458,000*</td>
<td>116,972</td>
</tr>
<tr>
<td>Health: # of children and women accessing essential health services</td>
<td>5,850,000</td>
<td>833,371</td>
</tr>
<tr>
<td>Education: # of school-aged children accessing formal and non-formal education</td>
<td>430,000</td>
<td>58,200</td>
</tr>
<tr>
<td>Child Protection: # of children reached with critical child protection services</td>
<td>74,500</td>
<td>19,030</td>
</tr>
</tbody>
</table>

*The number of children with severe acute malnutrition is increased based on the new hotspot woreda classification

10.2 million People, including 6 million children require relief food assistance in 2016.

8 million people receiving food and cash transfer under PSNP.

458,000 children are expected to require treatment for acute severe malnutrition in 2016.

5.8 million People require access to safe drinking water.

734,931 total refugees in Ethiopia (UNHCR, April 2016).

UNICEF requires US$106 million for its humanitarian work in 2016, including US$97.5 million for the drought response and US$8.5 million for the refugee response.

Funding status against the 2016 HAC

- Carry forward amount: $27m (25%)
- 2016 Funding requirement: $106m
- Funds received to date: $52m (50%)
- Funding gap: $27m (25%)

*Funds available includes funding received for the current appeal as well as the carry-forward from the previous year.
Situation Overview and Humanitarian Needs

• The Belg rains (February to May) were reported to be very good providing many drought affected areas with improved access to water. However, heavy rains in many regions have led to floods and landslides that resulted in the deaths of hundreds including children, left thousands displaced with loss of homes and livelihoods. The Government of Ethiopia, with support from humanitarian partners will assess in June the humanitarian situation following the Belg rains. The Belg assessment covers Afar, Amhara, Oromia, SNNP, Somali and Tigray regions and will be conducted from 5 June for two weeks in cropping areas and for 21 days in pastoral areas. UNICEF will be represented in 16 assessment teams out of a total of 19 teams and will provide human resource, logistics and financial support.

• The National Meteorological Agency reports that the onset of the Kiremt rainy season (mid-June to September) will be normal while cessation might be delayed. With the anticipation of enhanced La Niña episodic events during the upcoming season, most of the Kiremt benefiting areas of the country are expected to receive significant rainfall. While above-normal rainfall is anticipated in Northern, North-western and North-eastern parts of the country, with normal to above-normal rains anticipated in western, southwestern, together with many places in the central and eastern parts of the country. This will create favorable conditions for planting in Meher producing areas. However, with saturation of soil following heavy Belg rains, the risk of floods is expected to be high. The Federal Flood Task Force issued a Flood Alert to alert regions and residents of high possibility of floods in the next rainy season and advised of prevention measures.

• The bi-annual Productive Safety Net Programme (PSNP) Joint Review, Implementation and Support Mission was conducted at the end of May 2016. It is expected that permanent direct support clients (labour constrained) which are around 1.4 million beneficiaries will receive 12 months support as planned in the PSNP4. It is also very likely that the transfers will continue for three additional months for the public work PSNP clients in the most affected woredas (priority 1). However, the exact number of public work PSNP clients benefiting from these additional rounds of transfer will be confirmed after the finalization of the Belg assessment that is currently underway. Some donors of the PSNP have planned to contribute funds to extend the duration of PSNP operations given the drought situation.

Humanitarian Leadership and Coordination

The Ethiopian Government’s National Disaster Risk Management Commission (NDRMC) leads the overall humanitarian coordination through the Federal and Regional level Disaster Risk Management Technical Working Groups (DRMTWGs) and brings together various task forces/sector cluster partners to coordinate drought and flood response efforts.

Together with the Government of Ethiopia, UNICEF continues to provide cluster leadership for WASH, Nutrition, and Education (co-leadership with SCI) and sub-cluster co-leadership, with UNFPA, for Child Protection and Gender Based Violence; and plays a strong role in the Health Cluster coordination.

As part of the UNICEF strategy for strengthening the clusters, UNICEF organised two day workshops on Core Cluster Functions and Multi-cluster Integration. A total of 113 participants involved in sectoral coordination at regional level (including 50 Regional Government Counterparts, 37 UNICEF Project Officers from the regions, eight federal Cluster Coordinators and Information Management Officers, as well as OCHA and SCI from federal and regional levels) from the six drought affected regions and five sectors (Health, Nutrition, WASH, Child Protection and Education) attended the workshops. UNICEF Ethiopia is now looking at the possibility of cascading the training at regional level for the cluster members.

Humanitarian Strategy: Prepositioning and Partnerships

The Government and humanitarian partners’ strategic priorities as detailed in the HRD 2016 include:

1. Save lives and reduce morbidity related to drought
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 Government to achieve objectives 1 and 3. UNICEF is scaling-up its response to mitigate the impact of the current drought and flood on children and women. UNICEF is working with all partners to ensure that children have access to education, health and nutrition care, child protection, safe water, sanitation and hygiene services during emergencies.
- Ongoing support is provided to community resilience-building efforts aimed at reducing the vulnerability of women and children.
- In drought-affected pastoralist areas, UNICEF is supporting mobile health and nutrition teams to provide access to life-saving health and nutrition services.
- UNICEF and partners are supporting the Ministry of Health in the prevention and control of diseases, including Scabies, Measles, Meningitis, and Acute Watery Diarrhea.
- UNICEF is supporting the treatment of severely acute malnourished children through the community-based management of acute malnutrition (CMAM).
- In addition, UNICEF is complementing life-saving WASH interventions with the establishment and rehabilitation of water sources and the dissemination of sanitation and hygiene information and water treatment chemicals.
- UNICEF facilitates education for children affected by emergencies and is providing minimum packages for child protection in emergencies. UNICEF has reached an agreement with the Regional Governments of Afar, Somali, Oromia, Tigray and Amhara to implement the Child Protection Minimum Package of interventions reflected in the HRD Operational Plan in selected woredas and is mobilizing funds to accelerate the plan’s implementation. The services will include identification and referral of children at risk of or victims of abuse, violence and exploitation, identification and referral of unaccompanied and separated children, psychosocial support through child-friendly spaces and community mobilization to prevent family separation, dangerous migration, child marriage and other protection issues. UNICEF is finalizing partnership agreements with key INGOs to support critical Child Protection interventions in Somali and Oromia regions.

To respond to any rapid onset crisis in a timely manner, UNICEF prepositioned stocks in Addis Ababa and at two regional hubs to address the needs of 120,000 people. These supplies are currently being used to provide immediate assistance to drought and flood affected populations based on requests from the Regional Governments and other partners. UNICEF established long-term agreements with suppliers of key emergency supplies and for drilling shallow boreholes, which enable scaling up of quick responses if needed.

In the refugee response context, UNICEF supports UNHCR and the Government’s Administration for Refugees and Returnees Affairs (ARRA) to spearhead the emergency response coordination. The partnership is based on a Memorandum of Understanding which was signed in 2012 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 for refugees.

### Summary Analysis of Programme Response

**Nutrition**

- Since the beginning of the year, a total of 116,672 children with SAM have been treated, out of them 8,590 children have been treated as inpatient. In April 2016, a total of 29,119 children with severe acute malnutrition (SAM) have been treated in the national Community Management of Acute Malnutrition (CMAM) programme. As compared to 2015, the number of children remains very high (See Figure 1). A slight decrease (4 per cent) is observed between March (31,041 children) and April (29,119 children). Subsequent months’ data will provide more information on the admission trend.

### Figure 1: Trend in admission of children with severe acute malnutrition in Ethiopia (2011-2016)

![Figure 1: Trend in admission of children with severe acute malnutrition in Ethiopia (2011-2016)](source: Emergency Nutrition Coordination Unit)
• Partners have increased their nutrition interventions particularly in the hotspot priority 1 woredas. Currently, NGOs are present in 89 per cent of the priority 1 woredas. However, coverage in Somali Region remains low at 33 per cent, where partners are present in only 12 out of the 33 hotspot priority 1 woredas. Food distribution is facing serious logistic constraints because of heavy rains (particularly in Somali Region) and in areas affected by land slide and floods. This may have a negative impact on SAM cases.

• The performance of the national Community Management of Acute Malnutrition (CMAM) programme remains very good with 91.9 per cent of the children with severe acute malnutrition being cured, 1.8 of the children defaulting and 0.2 per cent of the children dying. The performance is in line with global (SPHERE) standards of cure rate of >75 per cent, defaulter rate of <15 per cent and death rate of <10 per cent.

• Since the beginning of 2016, UNICEF Ethiopia distributed to all the regions 186,031 cartons of ready-to-use-therapeutic food (RUTF), covering the needs for the first and second quarter of 2016. An additional 181,080 cartons are in stock and 146,915 cartons are in transit. In February 2016, UNICEF has rented an additional warehouse in order to efficiently manage the large quantity of RUTF and other supplies including therapeutic milk and routine drugs required during the year. UNICEF supports the CMAM programme with the provision of RUTF for an estimated 458,000 children with severe acute malnutrition expected to require treatment in 2016.

• UNICEF has improved its quality assurance mechanism by increasing the number of CMAM monitors in some of the most affected regions. In May 2016, UNICEF recruited 10 additional field monitors and deployed four to SNNPR and three each to Amhara and Oromia regions. These field monitors will monitor the progress and performance of the humanitarian response with respect to the quality of the service provided by the CMAM and the infant and young child feeding (IYCF) programmes and in response to the drought and flood situation.

• UNICEF is working with WFP to pilot mobile targeted supplementary feeding programme (TSFP) in areas where UNICEF is supporting mobile health and nutrition teams (MHNTs) to ensure moderate acute malnutrition (MAM)/SAM continuum of care. Currently, 44 priority 1 woredas are providing MAM/SAM continuum of care through WFP’s TSFP.

Health
• The Integrated Measles and Polio campaign was successfully conducted in April 2016 providing a second opportunity dose with regard to Measles and Polio vaccines to boost immunity of millions of children in drought affected areas. It is expected that the Federal Ministry of Health will officially release the coverage results in early June 2016. The Measles vaccination campaign targeted an estimated 25 million children aged 6 month to 14 years while the Polio campaign targeted 16.5 million children under five. The campaign was followed by the national switch of the use of trivalent Polio vaccine to bivalent Polio vaccine in synchronization with the global switch.

• The Acute Watery Diarrhea (AWD) outbreak in SNNPR Region has been controlled and no case has been reported for 30 consecutive days while the outbreak continues to increase in Oromia and Somali regions. The AWD outbreak, which started in November 2015 in Moyale Woreda, Oromia Region, has expanded to 23 woredas in Oromia, Somali and SNNPR regions.

• In order to ensure a more effective response to AWD and Scabies outbreaks, a strong coordination mechanism between the Health and WASH clusters has been established. Two meetings have been held to develop an intersectoral Health and WASH AWD and Scabies response plan among partners including UNICEF. Key agreements on prioritizing high risk areas and focusing the response in affected areas with comprehensive approaches and non-affected at risk areas with WASH, Communication for Development plus prepositioning of health supplies.

• UNICEF has supplied 6,000 bed nets through a Programme Cooperation Agreement (PCA) with Save the Children International to address prevent transmission of Malaria.

WASH
• Water trucking has been scaled down as a result of adequate rains which have eased drought conditions in many parts of the country. There is still water trucking continuing in Tigray (2 trucks), Oromia (39 trucks) and Afar (19 trucks), providing an estimated 150,000 people with access to clean water. Due to lack of water and consequent poor hygiene practices, Scabies cases continue. UNICEF is still responding to the need to treat this disease through the supply of drugs, clean water, body and laundry soap, water storage jerry cans plus information, education and communication material.

• UNICEF continues to support sustainable water schemes with the rehabilitation, maintenance and construction of water systems. In Oromia Region, the maintenance and rehabilitation of five water schemes were completed by a private company with UNICEF financial support in East Hararge Zone (three in Chinaksen and two in Fedis
UNICEF Ethiopia Humanitarian SitRep #5 - May 2016 - 13 June 2016

SNNP Region, with UNICEF support, is conducting a child protection rapid assessment in the region to identify child protection concerns as a result of the drought. UNICEF has provided technical assistance and training for the data collectors. The findings of the assessment will be the basis for implementing an appropriate response to the situation. In Afar, Amhara, Tigray, Oromia and Somali regions, rapid assessment were conducted in December 2015 and implementation of response is ongoing. UNICEF provided these five regions, financial support and dispatched tents and recreational materials to establish child friendly spaces. In Afar, 274 adults and caregivers were trained, among others on prevention of child abuse and exploitation.

In Gambella, following negotiations between the Ethiopian and the South Sudanese governments, 91 abducted children returned back. To date, 69 have been reunified with their families and communities. UNICEF provides support to the government in terms of basic health, nutrition and child protection services as well as the provision of non-food items.

- The completion of a multi-village water reticulation scheme is currently underway in Afar, between the villages of Su’ula, Manda and Bure. These villages are currently supplied by water trucks. The expansion of a multi-village reticulation scheme supplied from the new borehole is planned for the Musli location once the output of the borehole is determined by pump testing.

- The flood response continues with approximately 670,000 beneficiaries in 60 affected woredas. UNICEF is distributing water treatment chemicals, soap (440,000 pieces) and jerry cans. A total of 4 million sachets of water household treatment chemicals were released for distribution in Oromia, Tigray, Somali, SNNP and Afar and are expected to provide access to clean water for more than 33,000 families for two months. The water chemicals will be accompanied by information materials on the correct use. The floods have contributed to the spread of diseases/viruses such as AWD, caused by contaminated water. The distribution of water treatment chemicals, jerry cans and soap assists in the control of AWD. In Somali Region, the Regional Water Bureau and UNICEF have dispatched WASH supplies, including an emergency water treatment kit together with water purification chemical, household water treatment chemical, soap and buckets for the benefit of 22,000 people.

- UNICEF has engaged two staff through surge capacity, a Deputy Cluster Coordinator and a sub-national WASH Cluster Support Officer, who will be deployed to the regions to strengthen cluster coordination.

Education

- The Ministry of Education, the World Food Programme and Save the Children are supporting the provision of school feeding services which reached 2.8 million school children in 6,986 primary schools over the 2015/16 academic year. Similarly, over 590 primary schools were supplied with water and about 57,700 displaced children continued their education through the establishment of temporary learning spaces. The Minister of Education has formally endorsed the development of a strategy for recuperation of lost schooling days/teaching and learning time in hotspot priority one woredas - and a working group has been established to develop a costed implementation plan for the additional teaching days which will be offered over the coming months and into the next academic year. The Government has increased the number of children targeted for assistance, particularly with school feeding programme, from the 1.3 million in the 2016 Humanitarian Requirement Document. The ongoing national assessment will determine the increased number of affected children who will have to be targeted for Education in Emergencies assistance.

- The school construction in Gambella Region, which was discontinued due to the deadly attack on construction workers in the Jewi refugee camp, resumed with the support of ARRA who has put in place tighter security measures. Three of the planned six schools, Kormacher, Paggag and Akuna Doye, are completed and ready to be handed over to the Regional Bureau of Education. UNICEF is constructing six schools - two in Jewi refugee camp for refugee children and four for host communities’ children.

- UNICEF recruited a Cluster Coordinator to support the Education Sector’s drought response. A Strategic Advisory Group, comprising the Ministry of Education, Save the Children International (SCI) and UNICEF, was established at national level to strengthen the national and regional education cluster coordination.

Child Protection

- SNNP Region, with UNICEF support, is conducting a child protection rapid assessment in the region to identify child protection concerns as a result of the drought. UNICEF has provided technical assistance and training for the data collectors. The findings of the assessment will be the basis for implementing an appropriate response to the situation. In Afar, Amhara, Tigray, Oromia and Somali regions, rapid assessment were conducted in December 2015 and implementation of response is ongoing. UNICEF provided these five regions, financial support and dispatched tents and recreational materials to establish child friendly spaces. In Afar, 274 adults and caregivers were trained, among others on prevention of child abuse and exploitation.

- In Gambella, following negotiations between the Ethiopian and the South Sudanese governments, 91 abducted children returned back. To date, 69 have been reunified with their families and communities. UNICEF provides support to the government in terms of basic health, nutrition and child protection services as well as the provision of non-food items.
UNICEF also supported the identification of orphans and abducted children while assessments of current care arrangements is ongoing for 17 orphan children. Five social workers are identified for Jikawo, Lare and Makwe, the three most affected woredas by the cross border attack. Preparation are ongoing for the establishment of child friendly spaces.

Communication & Advocacy

As part of ongoing partner engagement, a field visit to Afar was organized jointly with WFP. The donors from Germany, Japan and Korea could see first-hand the impact of their contributions in the areas of Health and Nutrition. Another visit to Oromia was organized for OFDA and ICM covering drought-related programme interventions in Education, Health, Nutrition, and WASH.

Supply and Logistics

In response to the floods in different parts of the country, the UK Government donated 30,000 non-food item kits, valued at US$2,378,549 to the Government of Ethiopia. The kits include kitchen sets, sleeping mats, blankets and shelter and hygiene kits. UNICEF provided logistics support to receive these items and handed them over to the national Disaster Risk Management Commission, which will distribute the items to flood displaced families in affected regions.

Funding:

In 2016, UNICEF Ethiopia has received funds from the Governments of Canada, Germany, Ireland, Italy, Japan, Sweden, UK, and USA, and from Bill and Belinda Gates Foundation, CERF, ECHO, Ethiopian Humanitarian Fund, and the National Committees for UNICEF of Japan, the Netherlands, the US and UK.

UNICEF Ethiopia has appealed for US$106 million to scale-up of humanitarian activities in 2016, including US$8.5 million for the South Sudanese refugee response in Gambella. UNICEF has received US$52 million; US$49.8 million for the drought response and US$2.3 million for refugee response. US$26.9 million received at the end of 2015 has also been carried over to 2016.

The table below shows the funding status as of 31 May 2016

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Requirements US$</th>
<th>Funds available US$</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>34,000,000</td>
<td>20,090,346</td>
<td>13,909,654</td>
</tr>
<tr>
<td>Health</td>
<td>17,500,000</td>
<td>14,731,737</td>
<td>2,768,263</td>
</tr>
<tr>
<td>WASH</td>
<td>35,000,000</td>
<td>38,195,415</td>
<td>-3,195,415</td>
</tr>
<tr>
<td>Child Protection</td>
<td>4,000,000</td>
<td>2,829,569</td>
<td>1,170,431</td>
</tr>
<tr>
<td>Education</td>
<td>12,000,000</td>
<td>3,181,089</td>
<td>8,818,911</td>
</tr>
<tr>
<td>Cluster coordination</td>
<td>3,500,000</td>
<td>0</td>
<td>3,500,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>106,000,000</strong></td>
<td><strong>79,028,156</strong></td>
<td><strong>26,971,844</strong></td>
</tr>
</tbody>
</table>

* "Funds available" include funding received against current appeal as well as carry-forward (US$26,956,737). In addition, nutrition supplies valued at US$20 million have also been moved to 2016.

Next SitRep: July 2016

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Email: awesterbeek@unicef.org
## SUMMARY OF PROGRAMME RESULTS: ETHIOPIA

### NUTRITION

<table>
<thead>
<tr>
<th>Cluster Response</th>
<th>Overall needs</th>
<th>2016 Target</th>
<th>Total Results</th>
<th>Change since last report ▲▼</th>
<th>2016 Target</th>
<th>Total Results</th>
<th>Change since last report ▲▼</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NUTRITION</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children under 5 years with SAM admitted to therapeutic care programmes</td>
<td></td>
<td>458,000*</td>
<td>458,000</td>
<td>116,972</td>
<td>30,704</td>
<td>458,000</td>
<td>116,972</td>
</tr>
<tr>
<td>Children under 5 years who received vitamin A supplementation</td>
<td></td>
<td>11,800,000</td>
<td>0</td>
<td>0</td>
<td>1,800,000</td>
<td>0</td>
<td>0</td>
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</tbody>
</table>

### HEALTH

<table>
<thead>
<tr>
<th>Cluster Response</th>
<th>Overall needs</th>
<th>2016 Target</th>
<th>Total Results</th>
<th>Change since last report ▲▼</th>
<th>2016 Target</th>
<th>Total Results</th>
<th>Change since last report ▲▼</th>
</tr>
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<tbody>
<tr>
<td><strong>HEALTH</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children under 5 years vaccinated against measles</td>
<td></td>
<td></td>
<td>6,800,000**</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>People provided with access to health care facilities stocked with emergency supplies and drugs</td>
<td></td>
<td></td>
<td>5,850,000</td>
<td>833,371</td>
<td>3,000</td>
<td>0</td>
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### WATER, SANITATION & HYGIENE

<table>
<thead>
<tr>
<th>Cluster Response</th>
<th>Overall needs</th>
<th>2016 Target</th>
<th>Total Results</th>
<th>Change since last report ▲▼</th>
<th>2016 Target</th>
<th>Total Results</th>
<th>Change since last report ▲▼</th>
</tr>
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<tbody>
<tr>
<td><strong>WATER, SANITATION &amp; HYGIENE</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>People provided with access to safe water</td>
<td></td>
<td>5,849,964</td>
<td>5,849,964</td>
<td>2,970,000</td>
<td>670,000</td>
<td>2,200,000</td>
<td>1,149,239</td>
</tr>
<tr>
<td>People reached with key health promotion messages</td>
<td></td>
<td>3,500,000</td>
<td>3,500,000</td>
<td>353,391</td>
<td>1,000,000</td>
<td>230,000</td>
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### CHILD PROTECTION

<table>
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<tr>
<th>Cluster Response</th>
<th>Overall needs</th>
<th>2016 Target</th>
<th>Total Results</th>
<th>Change since last report ▲▼</th>
<th>2016 Target</th>
<th>Total Results</th>
<th>Change since last report ▲▼</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CHILD PROTECTION</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Separated and unaccompanied children registered in family tracing services and received family-based or appropriate alternative care</td>
<td></td>
<td>22,000</td>
<td>22,000</td>
<td>107</td>
<td>69</td>
<td>4,500</td>
<td>107</td>
</tr>
<tr>
<td>Vulnerable children in refugee camps, host communities and drought-affected areas benefitted from critical child protection in emergencies services</td>
<td></td>
<td>800,000</td>
<td>800,000</td>
<td>19,030</td>
<td>-</td>
<td>74,500</td>
<td>19,030</td>
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</table>

### EDUCATION

<table>
<thead>
<tr>
<th>Cluster Response</th>
<th>Overall needs</th>
<th>2016 Target</th>
<th>Total Results</th>
<th>Change since last report ▲▼</th>
<th>2016 Target</th>
<th>Total Results</th>
<th>Change since last report ▲▼</th>
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<tr>
<td><strong>EDUCATION</strong></td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>School-aged children with access to emergency education programmes</td>
<td></td>
<td>1,287,444</td>
<td>1,287,444</td>
<td>2,800,000</td>
<td>1,512,556</td>
<td>430,000</td>
<td>58,200</td>
</tr>
<tr>
<td>Refugee and host community children received psychosocial support in emergency education programmes</td>
<td></td>
<td>130,000</td>
<td>130,000</td>
<td>0</td>
<td>130,000</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

### OPERATIONAL PARTNERS

<table>
<thead>
<tr>
<th>Category</th>
<th>Partners</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td>Regional Health Bureaus, Mercy Corps, SCI, ADRA, Ogaden Welfare and Development Association, Islamic Relief, MSF</td>
</tr>
<tr>
<td>Nutrition</td>
<td>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</td>
</tr>
<tr>
<td>WASH</td>
<td>Federal and Regional Mines and Water Bureaus, Oxfam Intermon, Adhorn, Ogaden Welfare and Development Association, SCI</td>
</tr>
<tr>
<td>Education</td>
<td>Federal and Regional Education Bureaus, SCI, PIE, Ogaden Welfare and Development Association</td>
</tr>
<tr>
<td>Child Protection</td>
<td>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</td>
</tr>
</tbody>
</table>

### Note

* The number of children with severe acute malnutrition in 2016 has increased from 435,000 to 458,000 based on the new hotspot classification.
**Measles vaccination campaign is conducted in April 2016, results are awaited