SitRep #2 – Reporting Period March-April 2014

SITUATION IN NUMBERS

2.7 million
People will require emergency food assistance in 2014 (HRD 2014)

238,761
Children will requiring treatment for severe acute malnutrition in 2014 (HRD 2014) - 35,605 children have been treated by February 2014

102,463
South Sudanese refugees arrived to Ethiopia since December 15 2013 (UNHCR April 2014)

UNICEF humanitarian appeal 2014 (HAC 2014) is US$ 36.08 million - 14% funded

UNICEF’s Key Response with Partners in Ethiopia1

<table>
<thead>
<tr>
<th>Indicators</th>
<th>UNICEF</th>
<th>Cluster</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>WASH:</strong> People in humanitarian situation accessing water for cooking, drinking and cooking purpose</td>
<td>UNICEF Target: 1,200,000</td>
<td>Cumulative results: 265,000</td>
</tr>
<tr>
<td><strong>Nutrition:</strong> # targeted children 6-59 months with Severe Acute Malnutrition admitted to therapeutic care</td>
<td>238,700</td>
<td>35,605</td>
</tr>
<tr>
<td><strong>Health:</strong> # of children and women accessing essential health services</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td><strong>Education:</strong> # of school-aged children accessing formal and non-formal education</td>
<td>300,000</td>
<td>20,461</td>
</tr>
<tr>
<td><strong>Child Protection:</strong> # of children reached with critical child protection services</td>
<td>NA</td>
<td>NA</td>
</tr>
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</table>

UNHCR reports that as of the beginning of May 2014, an estimated 535,000 refugees reside in Ethiopia. The number of the new arrivals is increasing on a daily basis due to the current influx of refugees from South Sudan. The largest refugee

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1 See Annex 1 for UNICEF summary results
population in Ethiopia is from Somalia, followed by South Sudan, Eritrea, and Sudan. In addition, there are close to 6,000 refugees from different countries including Kenya, Djibouti, Democratic Republic of Congo (DRC), Yemen, Burundi, Rwanda and Uganda.

As of 10 May, the number of South Sudanese refugees that have entered into Ethiopia has reached 120,946, that includes 106,743 refugees that have been registered and an estimated 23,000 South Sudanese who have arrived through BurubEI following the conflict in Nasir on 4 May. The asylum seekers continue to arrive in Ethiopia through the Gambella Regional State, mainly through Pagak, Akobo and BurubEI border-entry points. Most of the new arrivals continue to be women and children (95 per cent of the total population) including unaccompanied minors and separated children. Following the take-over of Nasir – a border town in Upper Nile State of South Sudan - by South Sudanese Government forces, an estimated 10,500 asylum seekers arrived in Ethiopian entry point of BurubEI by 5 May. The humanitarian partners include UNICEF has scaled up the emergency response at BurubEI entry point. UNHCR and ARRA, with the support from IOM, are expediting the relocation of the new arrivals to camps before the seasonal rains make road and boat transportation difficult. UNHCR further reports that Leitchor and Kule camps are above their hosting capacity of 30,000 people - they are currently hosting 46,729 and 44,078 people, respectively. A new refugee camp – Kule 2 – was inaugurated at the beginning of May.

Humanitarian assistance including provision of food, non-food items, health services and water and sanitation facilities continues to be provided in Kule and Leitchor refugee camps and at Akobo, BurubEI and Pagak entry points. Partners are preparing for the upcoming rainy season that may hamper emergency response.

Ethnic Conflict in Guji Zone of Oromia Region
Clan conflict erupted on 26 March 2014, between Borena and Guji clans in Guji zone of Oromia Region, mainly affecting Goro Adola and Liben woredas. Preliminary reports indicate that an estimated 30,700 people in 14 kebeles (villages) were displaced. Provision of public social services were interrupted in the affected kebeles (sub district). UNICEF through the Ethiopian Red Cross Society (ERCS) dispatched 3,000 non-food item (NFI) kits, and Disaster Risk Management and Food Security Sector (DRMFSS) and Oromia Regional Government dispatched some food items for 20,000 people.

A multi-agency team comprised of ERCS, IOM, Mercy Corps, OCHA, UNICEF and zonal and woreda (district) government officials conducted a rapid assessment from 15 to 17 April. The team identified emergency needs in food, shelter, drugs, water treatment chemicals and educational material and recommended the establishment of an Incident Command Post (ICP) under the leadership of DRMFSS and OCHA to coordinate the emergency response.

Humanitarian partners under the leadership of DRMFSS and OCHA has undertaken the emergency response at the end of April. UNICEF (in addition to 3,000 NFI kits) supported the deployment of two water trucks for the provision of emergency water, dispatched four emergency drug kits (each kit serving an estimated 2,500 people for three months), two kits of renewable medical supplies and 17,000 bed nets. UNICEF also provided 100 teachers’ kits, 33 recreation and 33 early childhood development kits to benefit an estimated 6,600 children and school in bag kits for 1,000 school children. UNICEF assigned a programme officer to ICP to support the overall coordination of emergency response and follow up the distribution of UNICEF supplies.

Nutrition
The overall CMAM admission at national level for six regions – SNNP, Oromia, Tigray, Somali, Amhara and Afar – for the month of February 2014 is 16,663 (with 72 per cent reporting rate). As compared to the same month in the previous year (23,115), this is lower by 27 per cent. Nationally, the CMAM admission data indicate a stable situation with notable regional variations. However, increasing admissions are expected over the next months, as Ethiopia is entering into the lean season particularly from February to April in pastoral areas and April to June in Belg rains receiving areas.

In SNNPR, admissions increased from 4,251 in January to 4,639 in February, which conforms to the seasonal trend. A joint monitoring team assessed the nutrition situation in four of the five woredas in SNNPR that reported significant increase in admissions in January and February in Boricha, Dale, Demba Gofa and Halaba woredas. The assessment results in Boricha and Dale woredas suggest that the under-estimation of relief food beneficiaries and the absence/delay in Targeted Supplementary Feeding (TSF) interventions are likely part of the reasons for the high increase in admissions in the areas. Similarly, in East Hararghe zone of Oromia Region, admissions increased by 28.6 per cent between January and February 2014. Despite the similar increase rate registered at the same time last year, the February 2014 caseload is 18.7 per cent higher compared to that of the February 2013.

In Amhara Region, CMAM admissions have decreased by 5.3 per cent between January and February (93 per cent reporting). The rate is 25.2 per cent lower compared to the same period in 2013. The decrease is partly associated with the overall good food security situation in the region. However, the Federal Emergency Nutrition Coordination Unit is closely monitoring 13 nutrition hotspot woredas in Amhara and urging partners to strengthen nutrition interventions in the areas.

Health
Ethiopia has one additional confirmed case of Wild Polio Virus (WPV) in 2014, with date of onset on 5 January 2014. The total number of WPV cases reported since the onset of the outbreak in August 2013 is ten.

WHO declared the recent international spread of WPV as a “public health emergency of international concern”. Countries like Ethiopia, Afghanistan, Equatorial Guinea, Iraq, Israel, Somalia and Nigeria, which currently have wild polio virus but
have not transmitted it to another country are advised to encourage residents and long term visitors to receive additional dose of polio vaccine four weeks to 12 months prior to an international journey.

From more than 5,000 suspected measles cases reported in 2014 (with a declined trend in first week of May) from Amhara, Gambella, Oromia, SNNP and Tigray regions, 975 cases were confirmed. Close to 2 million children under-15 in Sidama, Silte and Wolayita zones of SNNPR, and some 250,000 children under-15 in selected localities of Amhara Region were vaccinated in March. The Ministry of Health and health partners prepared a national measles outbreak response plan for a measles vaccination campaign targeting 6.7 million children under-15 in 125 woredas, though it is postponed to a later period of the year due to limited funds.

WASH

Belg/Gu rains have started in all regions of the country thereby increasing availability of water and pasture. The amount and distribution of the rains is being monitored for the cessation of the ongoing emergency water provision. However, some woredas of Tigray, Amhara, Somali, Oromia and Afar regions remained dry leaving more than 398,000 people to depend on emergency water trucking.

2. Humanitarian Leadership and Coordination

UNICEF leads the WASH, child protection, and nutrition clusters. UNICEF also co-leads the education cluster with Save the Children and leads the child protection/gender based violence (GBV) sub-cluster at the national level. In the refugee setting, UNICEF works in support of UNHCR and ARRA.

3. Summary Analysis of Programme Response

SOUTH SUDANESE REFUGEES EMERGENCY RESPONSE:

UNICEF’s response strategy covers both immediate response to the emergency needs of refugee population as well as support to vulnerable host community at the border crossing points and in areas adjacent to the refugee camps. This is being done in collaboration with the regional government partners, NGOs and Ethiopian Red Cross Society (ERC). UNICEF’s emergency response is coordinated through its field offices in Gambella and Benishangul Gumuz regions. UNICEF provides support to UNHCR as defined in the Memorandum of Understanding between the two agencies in 2013. UNICEF has seconded WASH, Child Protection, Nutrition Specialists and Health/EPI Officer to UNHCR in Gambella to support the coordination of sectoral emergency response, and provide technical guidance to the government and partners. The discussions are on-going on the secondment of an Education Specialist as well.

UNICEF has prepositioned emergency supplies in Gambella and Benishangul Gumuz regions to timely respond to the acute emergency needs of refugees and vulnerable host communities in WASH, nutrition, health, education and child protection sectors in partnership with regional governments, UNHCR, ARRA and NGOs.

UNHCR and ARRA with support from other partners continue to provide humanitarian assistance to refugees in Kule and Leitchorch refugee camps and at Akobo, Burubei and Pagak entry points.

Health: As of beginning of May, Gambella Regional Health Bureau (RHB) and health partners with the support of UNICEF continue to provide entry point vaccination at the border crossing points. 62,635 children (6 months to 15 years) were vaccinated for measles and 40,587 children (less than 15 years of age) were vaccinated for polio. UNICEF delivered cold chain equipment to ARRA and MSF to start routine vaccination in Kule and Leitchorch refugee camps.

In Akobo and Burubei entry points, UNICEF has been supporting the regional health bureau to provide access to emergency health care services. Technical assistance has also been provided for the measles and polio vaccination and vitamin A supplementation. One additional emergency drug kit is provided for Burubei following the large influx during the first week of May.

As of beginning of May, UNICEF has provided 23,000 insecticide treated bed nets that is essential in Gambella where threat of malaria is very high.

In Benishangul Gumuz region, UNICEF provided one emergency drug kit in Kushma Gani health center located at the border crossing point for the use of the refugees and the host community.

Nutrition: By the beginning of May with continued UNICEF support, the Regional Health Bureau (RHB) and health partners provided Vitamin A supplementation to 29,790 refugee children (6 months to 5 years).

CONCERN Ethiopia in partnership with UNICEF has started conducting a nutrition survey in Lare woreda in May.
ARRA, UNHCR, UNICEF and WFP jointly developed in March, a strategic guideline for health, nutrition and food security for the current emergency response. The document includes standards, targets and status update on implementation of key interventions at entry points and in the camps.

**WASH:** UNICEF with the support of the Regional Water Bureau drilled 12 shallow wells for the use of the host communities and the refugees at the border crossing points and refugee camps. Each shallow well can provide potable safe water to 500 people. There is an ongoing development of additional 10 boreholes in Gambella.

Since the beginning of the influx, UNICEF in partnership with ZOA and the Regional Water Bureau has been supporting the operation of three Emergency Water Kits at the border crossing of Pagak and Akobo.

UNICEF signed a project cooperation agreement (PCA) with the Ethiopian Red Cross Society with a goal to improve the environmental hygiene and to reduce hygiene and sanitation related health threats of South Sudanese refugees at Leitchor refugee camp and host communities in the surrounding areas.

**Communication for Development:** UNICEF supported a two days training for 121 community outreach health workers and 12 supervisors that was conducted in both Leitchor and Kule refugee camps during the first week of May. The health workers who are supervised by GOAL, MSF Holland and NRC are expected to visit each 60 households per week and provide health, nutrition and WASH education to the refugees. The outreach health workers were trained on how best they can present and transmit key health, nutrition and WASH messages to the refugees.

UNICEF provided 1,200 pieces of assorted Information Education and Communication material for three key WASH related messages and one health related message in line with Community Outreach Workers Guideline that was previously reviewed by UNICEF support.

**Education:** UNICEF has signed a partnership agreement with ZOA in Akobo border crossing point. As a result of this partnership, 3,500 children (both host communities and refugees) will have access to temporary learning opportunities and psychosocial support. In addition, 600 youth (15-25 years of age, 75% boys, and 50% from South Sudan) will be trained on community cohesion through Sports for Development and Communication for Development programmes.

With UNICEF’s financial support through a programme cooperation agreement with NRC, a total of 29 primary school teachers (25 male and 4 female) in Tongo refugee camp (Benishangul Gumuz Region) were trained in basic pedagogy (instructional planning, student-centred active teaching methodology, classroom management, continuous assessment), psychosocial support, teachers’ code of conduct, and child-friendly schools benefiting 2,791 primary school children (40 % girls).

**Child Protection:** Child Protection Rapid Assessment was conducted by a multi-agency and multi-disciplinary team in Gambella region during the month of April. The assessment team was comprised of regional government officials from Bureau of Women Children and Youth Affairs, Bureau of Labour and Social Affairs, officers of woreda offices, Agency of Returnees and Refugee Affairs, UNICEF, UNHCR Ethiopian Red Cross Society and NGOs.

The objective of the assessment was to identify the existing child protection needs of women and children in host communities and refugee camps of Gambella region in order to design a joint response strategy to address those needs. The results of the assessment will be available in May.

At Leitchor Camp, psychosocial activities continue at the established Child Friendly Space (CFS) with children and youth being engaged in sports and dialogue. Over 2,000 children are benefiting from the CFS facility that provides psychosocial support through informal education/recreation. UNICEF provided two tents for the CFS and sport materials.

**HEALTH:**
In response to the polio emergency, three rounds, two national immunization days and 1 supplementary immunization activities have been conducted in addition to localized emergency vaccinations. A second supplementary immunization activity, targeting more than 4 million children under-15 in Somali, Benishangul Gumuz, Direawa, Gambella, Harari, Bale and Borena and all refugees, was conducted on 14-17 March 2014 and 30 March-4 April for Somali region; report is under compilation. Subsequent SNIDs are scheduled for 2-5 May, 30 May- June 2 and 20-23 June 2014

**NUTRITION:**
During the second quarter of 2014, UNICEF procured and distributed to all regions 59,871 cartons of ready-to-use-therapeutic food that would enable the treatment of an estimated 29,000 children per month for three months.
WASH:
As of end of April, out of the 49 requested water trucks 30 water trucks are currently operational in Afar (7), Tigray (2), Oromia (18) and Amhara (3); leaving a gap of 19 water trucks. An estimated 294,700 people are benefiting from the water trucking operation. UNICEF has been supporting the regional government to deploy four water trucks, two each in Afar and Oromia.

In addition to the ongoing water trucking and in response to the conflict affected people in Guji zone, the Oromia regional water and health bureaus have provided household water treatment chemicals, including 81,000 sachets of water treatment chemicals and 51,200 bottles of water guard, and 17,500 bars of soap for distribution. The household water treatment chemicals are expected to safeguard the drinking water of the whole communities for an average of three months.

Within the framework of improving sustainable access to water, partners are engaged in maintaining the functionality of existing water supply systems. With the financial support from UNICEF, 51 water schemes were maintained and upgraded in March 2014 in six zones of Oromia Region namely: West Hararghe (3), East Hararghe (4) and West Arsi (3), Borana (17), Guji (20) and Bale (4) benefitting an estimated 119,150 people. In addition, maintenance and rehabilitation of five water schemes were completed in April 2014 in West Arsi zone of Oromia Region benefitting another 30,000 people.

In 2012 and 2013, Joint Action Plans (JAP) were rolled out to increase water availability and water schemes functionality at 95 per cent in Afar and Somali regions where chronic water shortages affect thousands of people. In Afar, the programme targets 24 localities in 8 woredas while in Somali it targets 105 localities in 10 woredas. In Somali Region, during its first phase, the programme achieved 41 per cent reduction of water trucking in 2013.

SUPPLY AND LOGISTICS:
Since the beginning of the emergency response in Gambella in January 2014, UNICEF has provided various supplies to UNHCR and partners valued at more than US$ 495,500 to assist the South Sudanese emergency response. The supplies include emergency water treatment kits, water purification chemicals, water tanks, soaps, jerry cans, IEC materials, mosquito nets, emergency drug kits, tents, high energy biscuits, therapeutic milk, school materials, hygiene kits, recreation kits, blankets and clothes.

SECURITY:
Nothing to report

MEDIA AND EXTERNAL COMMUNICATION:
UNICEF Ethiopia has created an 'Emergency and Resilience' section on the homepage, which includes information on Gambella emergency response. The section includes pictures, videos, stories and updates. To access the portal, kindly follow the link http://www.unicef.org/ethiopia/

FUNDING:
UNICEF 2014 humanitarian appeal for Ethiopia is US$36,086,000 that includes US$6,714,186 for South Sudanese emergency response. In 2014, UNICEF Ethiopia has received emergency funds from Government of Japan, CERF, HRF, Government of Finland and UK National Committee for UNICEF. UNICEF has also taken an emergency programme response loan of US$ 1,000,000 from its headquarters to support the South Sudanese refugee response.

UNICEF is grateful for valuable funds received from its donors.
## Funding Requirements – 2014

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Requirements* US$</th>
<th>Funds received US$</th>
<th>Funding gap US$</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>9,500,000</td>
<td>1,500,700</td>
<td>7,999,300</td>
<td>84</td>
</tr>
<tr>
<td>Health</td>
<td>10,300,000</td>
<td>1,754,300</td>
<td>8,545,700</td>
<td>83</td>
</tr>
<tr>
<td>WASH</td>
<td>8,275,000</td>
<td>520,000</td>
<td>7,755,000</td>
<td>94</td>
</tr>
<tr>
<td>Child Protection</td>
<td>3,500,000</td>
<td>675,000</td>
<td>2,825,000</td>
<td>81</td>
</tr>
<tr>
<td>Education</td>
<td>3,000,000</td>
<td>220,000</td>
<td>2,780,000</td>
<td>93</td>
</tr>
<tr>
<td>Cluster coordination</td>
<td>1,511,000</td>
<td>200,000</td>
<td>1,311,000</td>
<td>87</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>36,086,000</strong></td>
<td><strong>4,870,000</strong></td>
<td><strong>31,216,000</strong></td>
<td><strong>87</strong></td>
</tr>
</tbody>
</table>

*Programme operations, transport and M&E costs are included in the sectoral budget lines*

### Next SitRep: 7 June 2014

**Who to contact for further information:**

- **Peter Salama**
  - Representative
  - UNICEF Ethiopia
  - Tel: +251 11 5184001
  - Fax: +251 11 5511628
  - Email: [psalama@unicef.org](mailto:psalama@unicef.org)

- **Shadrack Omol**
  - Chief-Field Operations and Emergency
  - UNICEF Ethiopia
  - Tel:+251 11 5184082
  - Fax: +251 11 5511628
  - Email: [somol@unicef.org](mailto:somol@unicef.org)

- **Alexandra Westerbeek**
  - Chief, Media and External Relations
  - UNICEF Ethiopia
  - Tel: +251 11 5184039
  - Fax: +251 11 5511628
  - Email: [awesterbeek@unicef.org](mailto:awesterbeek@unicef.org)

### Annex A

**SUMMARY OF PROGRAMME RESULTS**

<table>
<thead>
<tr>
<th>Cluster Response</th>
<th>UNICEF and IPs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall needs</td>
<td>2014 Target</td>
</tr>
<tr>
<td>2014 Target</td>
<td>Total Results</td>
</tr>
<tr>
<td>WATER, SANITATION &amp; HYGIENE</td>
<td></td>
</tr>
<tr>
<td>-----------------------------</td>
<td>--</td>
</tr>
<tr>
<td>People in humanitarian situations accessing water for drinking, cooking and personal hygiene</td>
<td>1,029,091</td>
</tr>
<tr>
<td>People in humanitarian situations receive sanitation and hygiene information to prevent child illnesses</td>
<td>174,294</td>
</tr>
<tr>
<td>EDUCATION</td>
<td></td>
</tr>
<tr>
<td>Children in humanitarian situations accessing formal and non-formal education</td>
<td>300,000</td>
</tr>
<tr>
<td>Students provided with quality teaching</td>
<td>200,000</td>
</tr>
<tr>
<td>HEALTH</td>
<td></td>
</tr>
<tr>
<td>Children and women access essential health services through preventive and curative interventions in the Somali and Afar regions</td>
<td></td>
</tr>
<tr>
<td>Populations affected by disease outbreaks accessing life-saving curative and preventive interventions</td>
<td>24,000</td>
</tr>
<tr>
<td>Refugee children under 1 immunized (Penta3)</td>
<td>14,000</td>
</tr>
<tr>
<td>NUTRITION</td>
<td></td>
</tr>
<tr>
<td>Children under 5 with severe acute malnutrition treated</td>
<td>238,700</td>
</tr>
<tr>
<td>Children under 5 receive vitamin A twice a year</td>
<td>783,602</td>
</tr>
<tr>
<td>Children under 5 screened and referred to supplementary feeding programme</td>
<td>420,966</td>
</tr>
<tr>
<td>Pregnant and breastfeeding women screened and referred to supplementary feeding programme</td>
<td>127,058</td>
</tr>
<tr>
<td>CHILD PROTECTION</td>
<td></td>
</tr>
<tr>
<td>Children in humanitarian situations vulnerable to violence, exploitation and abuse accessing appropriate care and services</td>
<td>n.a</td>
</tr>
<tr>
<td>Children affected by emergencies provided with psychological support</td>
<td>n.a</td>
</tr>
<tr>
<td>Separated and unaccompanied children reunited with their families or</td>
<td>n.a</td>
</tr>
</tbody>
</table>
provided with appropriate alternative care