UNICEF ETHIOPIA HUMANITARIAN SITUATION REPORT

ETHIOPIA
Humanitarian Situation Report

SITUATION IN NUMBERS

Sitrep #1 – Reporting Period January 2019

Highlights

- On 15 January 2019, Ethiopia’s parliament passed a new law allowing refugees to move out of camps for regular education and work opportunities and improve access for refugees to documentation and financial services. This law is part of the “Jobs Compact,” a US$ 500 million programme, aiming to create 100,000 jobs (30 per cent will be allocated to refugees).
- The mobile health and nutrition teams in Somali and Afar regions made a total of 39,661 new medical consultations in December 2018; 42.8 per cent were for under five children and 32.3 per cent for women.
- Programme interventions in Oromia region have been limited by continued insecurity and instability which consequently restricted access to IDPs and IDP hosting woredas.

UNICEF’s response with partners

<table>
<thead>
<tr>
<th>Sector/Cluster</th>
<th>UNICEF</th>
<th>Cluster Target**</th>
<th>Cluster Result</th>
<th>UNICEF* Target</th>
<th>Total Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition: Children under 5 years with SAM admitted treatment</td>
<td></td>
<td>370,005</td>
<td>0</td>
<td>386,456</td>
<td>0</td>
</tr>
<tr>
<td>Health: Women and children under 5 years accessing essential maternal and child health services</td>
<td></td>
<td></td>
<td></td>
<td>441,000</td>
<td>0</td>
</tr>
<tr>
<td>WASH: People accessing sufficient water of appropriate quality and quantity for drinking, cooking and maintaining personal hygiene</td>
<td></td>
<td>8,185,521</td>
<td>0</td>
<td>3,688,000</td>
<td>0</td>
</tr>
<tr>
<td>Child Protection: Vulnerable children provided with psychosocial support, including access to child-friendly spaces with multi-sectoral programming interventions</td>
<td></td>
<td>30,000</td>
<td>18,035</td>
<td>77,000</td>
<td>14,102</td>
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<tr>
<td>Education: School-aged children, including adolescents, accessing quality education</td>
<td></td>
<td>2,606,768</td>
<td>11,100</td>
<td>370,017</td>
<td>11,100</td>
</tr>
</tbody>
</table>

* UNICEF target includes refugee

** The cluster target for 2019 remains the same as target 2018 until the finalization and release of 2019 humanitarian needs overview in March 2019

7.95 million*
People in need of relief food/cash

370,005*
Children in need of treatment for severe acute malnutrition

2.6 million*
School-aged children, including adolescents, in need of emergency school feeding and learning material assistance

2.95 million**
Internally displaced people in Ethiopia (80 per cent displaced due to conflict)

919,938*** Registered refugees and asylum seekers in Ethiopia

*2018 Humanitarian and Disaster Resilience Plan Mid-Year Review for Ethiopia, September 2018
** DTM Round 14 + DTM RRA4 (Gedeo + West Guji) + estimates from Regional Government for Benishangul Gumuz
*** Ethiopia, refugees and asylum seekers (UNHCR, 31 August 2018) and UNHCR Eritrean influx update of 20 October 2018

Funding Status 2019

2019 Funding Requirements: $124.1m

2019 Funding Requirements: $124.1m

- Funds received to date: $1.2m (1%)
- Funding gap: $96.7m (78%)
- Carry forward: US$ 26.3m (21%)

Mother of 7, Habib Biyow Roba, 35, with her 8-month-old daughter Sumeya Abdu at Berek IDP site, Delo Mana Woreda, Bale Zone, Oromia Region. © UNICEF Ethiopia/2018/Tedesse
Situation Overview and Humanitarian Needs

UNICEF requires US$124.1 million to meet the humanitarian needs of women and children in Ethiopia in 2019. The cost per sector incorporates the needs on the ground, agreed targets, and UNICEF and partner capacities to deliver. The costs reflect an increase in the targeted number of beneficiaries for nutrition and WASH compared with the 2018 Humanitarian Action for Children appeal mostly due to the rising IDP numbers (2.95 million) and the suboptimal rainfall affecting recovery of the population. The cost of reaching new refugee arrivals is also included. The limited number of operational partners, insecurity and inaccessibility due to poor infrastructure continue to hamper humanitarian assistance.

On 15 January, the House of Peoples’ Representatives passed a law that allows refugees in Ethiopia to enjoy more rights. The new legislation is part of the “Jobs Compact,” a US$ 500 million programme to create 100,000 jobs - 30 per cent of which will be allocated to refugees. The law allows refugees to move out of the camps, attend regular schools, and travel and work across the country. They can also formally register births, marriages and deaths, and will have access to financial services such as bank accounts. Ethiopia currently hosts over 900,000 refugees mainly from neighbouring South Sudan, Somalia, Sudan and Eritrea, as well as smaller numbers of refugees from Yemen and Syria, making it host to Africa’s second largest refugee population.

According to the IOM Displacement Tracking Matrix (DTM) round 14 conducted in December 2018, Ethiopia has 2.95 million IDPs. Conflict was reported as the primary driver of displacement (1,773,482 IDPs), followed by displacement due to climate induced factors (498,417 IDPs) as illustrated in Figure 1, below.

![Fig 1: An analysis of causes of displacement and duration of displacement from DTM round 14.](image)

The chronic nature of displacement in Ethiopia means humanitarian interventions alone cannot address the needs of the population. UNICEF Ethiopia is actively investing in durable and resilient programmes to mitigate humanitarian needs and build more resilient, scalable systems.

UNHCR reported spontaneous return of 5,000 refugees to South Sudan from Gambella since mid-December 2018. Reasons for return included fear of retaliatory action following the recent sub-clan conflicts that started in Kule camp and spread to Tierkidi and Nguenyyiel camps in January 2019 and family reunification in South Sudan, with plans to return to the camps in Ethiopia expected. This return comes against a backdrop of 2,015 new arrivals from South Sudan between 1 and 25 January. UNICEF and partners continue to support lifesaving interventions for new arrivals in Gambella.

A recent study on “Multi-dimensional Child Deprivation in Ethiopia - First National Estimates” has been released and its findings are significant in assessing the vulnerability of children in Ethiopia with acute needs in an emergency. The report studied child poverty in relation to the following dimensions development, stunting, nutrition, health, water, sanitation, and housing. The study found that 88 per cent of children in Ethiopia under the age of 18 (36 million children) lack access to basic services in at least three basic dimensions, with lack of access to housing and sanitation being the most acute. The study reveals that there are large geographical inequalities; for example, 94 per cent of children in rural areas are multi-dimensionally deprived compared to 42 per cent in urban areas. Across Ethiopia's regions, rates of child poverty range from 18 per cent in Addis Ababa to 91 per cent in Afar, Amhara, and Southern Nations, Nationalities and People’s (SNNP) regions. Poverty rates are equally high in Oromia and Somali (90 per cent each) and Benishangul-Gumuz (89 per cent). UNICEF Ethiopia's humanitarian action for children considers the inequitable dimensions of deprivation and the most acute needs of children.
The country continues to experience border, inter-regional and inter-communal conflicts that result in the displacement of people. According to a joint rapid assessment conducted by the Government and other partners from 22 to 28 January, there are 79,866 IDPs in Amhara region (54,978 living with the host community and 24,888 in different collective sites). The number has substantially increased from the DTM round 13 (September 2018) that reported 11,574 IDPs. Conflict was reported as the major cause of displacement and IDPs are living both with the host community and in collective sites (7 out of 13 sites in the region are collective sites). UNICEF has so far responded to this humanitarian situation by dispatching supplies for the treatment of Severe Acute Malnutrition (SAM).

Humanitarian partners have been constrained from accessing five woredas in Kamashi Zone, Oda Woreda of Assosa Zone, and Mau Kumo Special Woreda in Benishangul Gumuz region due to ongoing insecurity. The insecurity, coupled with limited operational presence of partner organizations in the area, has restricted humanitarian assistance to the immediate life-saving and protection needs of IDPs in both Benishangul Gumuz and Oromia regions. To scale up the response, the Government together with humanitarian partners have developed an operational plan targeting 250,000 displaced persons (57,000 IDPs in Assosa and Kamashi zones of Benishangul Gumuz region and some 198,000 IDPs in East and West Wollega zones of Oromia region). This plan requires US$ 25.5 million, including an estimated US$ 9.6 million for the National Disaster Risk Management Commission (NDRMC).

Humanitarian Leadership and Coordination
The humanitarian response in Ethiopia is led by the National Disaster Risk Management Commission (NDRMC) through the federal and regional Disaster Risk Management Technical Working Groups (DRMTWGs). UN OCHA coordinates the humanitarian response of UN agencies and NGOs in support of the Government-led humanitarian response. The Government prioritizes its emergency response based on targeted hotspot woredas (districts).1

Prompted by global efforts and commitments to address structural causes of crises following the 2016 World Humanitarian Summit, the post-El Nino drought context in Ethiopia is increasingly defined by development programming and financing with a view to reducing humanitarian needs, risks and vulnerabilities. In 2019, a Humanitarian Needs Overview, complemented by a Humanitarian Response Plan, will document the Government’s humanitarian ask. The Humanitarian Needs Overview and Humanitarian Response Plan 2019 are expected to be launched in mid-February.

Humanitarian Strategy
In 2019, UNICEF will focus on providing an integrated response to displacement triggered by conflict and seasonal climatic shocks. This includes preventing disease outbreaks, addressing malnutrition and ensuring the centrality of protection in all programme interventions. UNICEF will provide assistance to people in need and hard-to-reach populations through its eight field offices and UNICEF supported mobile teams; leveraging its cluster leadership role to influence how partners prioritize resources and interventions. The response will prioritize life-saving services, including the detection and treatment of SAM and the prevention and treatment of diseases by providing essential medicines, strengthening response systems and developing the skills of health professionals. The water, sanitation and hygiene (WASH) response will focus on life-saving activities and building resilient water and sanitation infrastructure. UNICEF will invest in mitigating and preventing gender-based violence to address the protection risks faced by refugees and internally displaced persons, particularly girls. Through the Ministry of Education and regional education bureaus, UNICEF will advocate for flexible, accelerated access to education for displaced children. In line with the New Ways of Working and the Grand Bargain commitments, UNICEF will establish and strengthen new and existing partnerships to invest in durable solutions.

Summary Analysis of the Programme Response

Nutrition
UNICEF continued providing emergency nutrition support, which included life-saving nutrition treatment services for children and pregnant and lactating women and the robust coordination of nutrition actors through the Federal Ministry of Health (FMoH), respective Regional Health Bureaus (RHB) and Emergency Nutrition Coordination Unit (ENCU) at all administrative levels. In addition, technical assistance was provided to the SNNP, Oromia, Somali and Benishangul-Gumuz regions to support the ongoing response to the IDP crisis.

UNICEF deployed two nutrition consultants, one Community Management of Acute Malnutrition (CMAM) monitor and a coordinator in East and West Wollega zones, to ensure an effective and coordinated emergency nutrition response. A capacity assessment was conducted, and action has been taken to address the identified gaps, which included the low government capacity in treating SAM children and a lack of experience in managing emergencies. Accordingly, a capacity-building training on the management of SAM was conducted in January in both East and West Wollega zones for 82 Primary Health Care Unit (PHCU) workers in West Wollega and 33 health workers in East Wollega. The participants were from the woreda health office, health centres and hospitals in the two zones. SAM treatment commodities, which included 1,000

1 Districts, or woredas, are the third-level administrative divisions of Ethiopia. They are further subdivided into a number of wards (kebeles), which are the smallest unit of local government in Ethiopia.
cartons of Ready-To-Use Therapeutic Food (RUTF), therapeutic milk cartons (F-75 and F-100, 31 cartons each) and routine drugs were delivered to the Regional Health Bureau (RHB). The supply will enable the treatment of 1,111 children with SAM (out of which 210 children will be treated at stabilisation centres). Twenty-two opening kits for the Therapeutic Feeding Program (TFP) have been provided to establish new stabilisation centres of the same number in the affected locations.

UNICEF supported the South Sudanese refugee response by conducting arrival screening. Three hundred and ten children aged 6-59 months were screened for malnutrition and nine children with SAM were referred to the CMAM programme.

In response to the recent displacement of 3,000 households on the Somali/Afar border to Danlabeled Kelebe in Aldem Woreda, Somali region, UNICEF dispatched nutrition supplies (80 cartons of RUTF) to treat 89 children.

UNICEF is also supporting the integration of management of moderate acute malnutrition into the routine health system (IMAM) in 100 pilot woredas across five regions of Amhara, Afar, Oromia and Somali, and SNNP regions, in collaboration with World Food Program (WFP). Regional level orientations have already been conducted in Oromia and SNNP regions while those in Amhara, Afar and Somali region are planned for February 2019.

The Federal Ministry of Health of Ethiopia, with the support of development partners has finalized the revision of Acute Malnutrition guideline pending endorsement for official release. UNICEF Ethiopia is preparing to roll out the implementation of the guidelines in the second quarter of 2019, in expectation of this endorsement. The implementation of this new cut-off point (Mid-Upper Arm Circumference <11.5mm) is expected to have an impact on the SAM admission caseload, as more children will be classified as having SAM.

The December 2018 hotspot classification has been completed and released, with 253 woredas in the country classified as priority 1. This shows an increase in severity, as the number of Hotspot Priority 1 (HSP1) woredas has increased by 38 from the 215 woredas identified during the July 2018 hotspot classification exercise. The overall increase in the number of HSP1 reflects the expanded priority areas due to the increase in IDPs, as well as the suboptimal rain and lack of recovery leading to protracted acute food insecurity. The emergency nutrition funding will be limited in HSP1 identified areas for the third and fourth year with high Acute Malnutrition (AM) treatments. These areas include Somali, parts of Afar and the lowland of Oromia and SNNP, with pockets in the highlands of Amhara and western Tigay. Areas with high IDP burden (1 million) such as East and West Hararghe will remain HSP1 as high food insecurity persists. Somali has yet to secure 50 per cent of the general food distribution (GFD) expected need in 2018, and targeted supplementary food programme (TSFP) pipeline rupture seriously affected the AM levels.

Health

From 22 December 2018 to 22 January, 10 Acute Watery Diarrhoea (AWD) cases were reported from Afar region. No other region reported AWD in January 2019. To support the AWD response in Amibra Woreda, Afar, UNICEF distributed 10 AWD treatment kits to Afar Regional Health Bureau (RHB).

UNICEF continues to support the Gambella RHB to vaccinate South Sudanese refugee children at the entry points. In January, 1,312 South Sudanese refugee children were vaccinated against polio, while 1,123 children received measles vaccination.

As part of the displacement response, 25 emergency drug kits (EDKs) were distributed to IDPs in five zones of Oromia region; five to East Wollega Zone, four to Nekemte Town, six to West Wollega Zone, five to West Guji Zone and five to Borena Zone. These EDKs can treat 62,500 people for three months.

Sixty-five new cases of pertussis were reported in December and a total of 1,822 cases have been reported since the onset of the outbreak in October 2018 in Daramalo Woreda of Gamgofa Zone, SNNP. Mass treatment was conducted using Azithromycin in 16 kebeles in Daramalo Woreda and contact tracing in one adjacent kebele in Dita between 23 to 28 December. A total of 69,476 people (99.8 per cent) were treated from a planned target of 69,587. Of these, 21,991 (39 per cent) were under the age of 10. Since the mass treatment, zero pertussis cases have been reported in the past two weeks. UNICEF provided technical assistance and assigned full-time staff member to the affected zone.

In December, 23,134 new consultations were conducted in Afar and 16,527 in Somali regions by UNICEF-supported Mobile Health Nutrition Teams (MHNTs). Of these, 42.8 per cent were children under the age of five and 32.3 per cent were women, bringing the consolidated number of consultations in 2018 to 496,173. All the consultations were conducted by the 49 UNICEF-supported MHNTs operating in both regions and 17 MHNTs in Somali region run by the RHB and international NGOs to whom UNICEF provided drugs and medical supplies.

WASH

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2 Hotspot classification is derived using six multisector indicators, including agriculture, nutrition and markets, agreed at regional and federal levels. A hotspot matrix is often used as a proxy for the acute Integrated Food Security Phase Classification (IPC) and is indicative of food security and nutrition status. Scaled from Priority 1 to 3, hotspot woredas require urgent humanitarian response.
In Oromia Region, 59 UNICEF-supported water trucks provided safe drinking water to over 677,000 IDPs and host communities in January. UNICEF with the Oromia Regional Water Bureau will phase out water trucking from February. UNICEF will initially demobilize 30 trucks that will be replaced by Government-funded water trucks while its contribution will be refocused to durable solutions that include rehabilitation of existing non-functional water schemes, expansion of existing water supply systems to the IDP camps, and construction of new water schemes.

Rehabilitation, expansion and construction of water schemes in areas with a high influx of IDPs continues. In the reporting period, two schemes were completed in East Hararghe and are supplying 1,500 people from host communities with safe water. From these schemes, water is collected by water trucks and delivered to an additional 3,500 IDPs in the area. UNICEF supported the Region Water Bureau (RWB) with the expansion of pipelines to Bursa and Salahad IDP sites in the Somali region, benefiting 6,349 people.

Construction of latrines and rehabilitation and maintenance of existing latrines is ongoing in Oromia and SNNP regions, benefiting 6,700 additional people in Deder Woreda (East Hararghe Zone), Abaya Woreda (Borena Zone) and Aroge Qera IDP site in Gedee Zone. Hygiene promotion on cleaning and utilization of latrines, handwashing practices, and safe handling of drinking water is ongoing, with 10,583 people reached in Oromia in January. In SNNP Region, dissemination of hygiene and sanitation messages is continuing and includes broadcasting through a local radio station. The messages were transmitted to 16,108 people in their local language in Gedee Zone.

Distribution of non-food items (NFIs) is ongoing in Oromia, Somali and SNNP regions. To date, 6,455 bars of soap have been distributed in Abaya and Deder woredas in Oromia Region. NFIs have been distributed in cooperation with NGOs in Yirgachefer and Wonago woredas; they include 4,324 buckets, 31,236 bars of soap, 1,324 jerry cans, 1,562 sanitary pads and 11,040 sachets of household water treatment chemicals, benefitting over 20,000 people. Jerrycans and soap have been distributed to Qollij IDP site in Somali Region benefitting 24,600 people. Households in Biko IDP site and Wangeye Woreda, Erer Zone in Somali Region have received jerrycans, buckets, soap and household treatment chemicals benefitting 5,100 households.

**Child Protection**

UNICEF has launched a 4Ws MHPSS (Mental Health Psychosocial Support) mapping process, planned to take place country-wide between February and July. The 4Ws tool developed by the Inter-Agency Standing Committee Reference Group on MHPSS will be used for this exercise. This is crucial for the strengthening of the MHPSS continuum of care in Ethiopia, enhance referral mechanisms, and avoid gaps in critical components of psychosocial service provision.

In the Somali Region, UNICEF, through a partner, reached 5,655 children (3,279 girls and 2,376 boys) with child protection interventions in January. This includes 1,199 unaccompanied and separated children (554 girls and 645 boys) that have been identified and registered and 4,456 children (2,725 girls, 1,731 boys) who were provided with psychosocial support through child friendly spaces and group-based activities in IDP sites. Furthermore, of the 1,199 children identified and registered, 583 children (275 girls, 308 boys) were placed in alternative care arrangements.

With support from UNICEF, the Somali Regional Bureau of Women, Children and Youth Affairs (BoWCYA) facilitated child protection awareness sessions among IDP communities in 13 IDP sites across six woredas in Fanfan and Liben zones. This intervention that aimed to raise awareness about the negative impact of violence against children, gender-based violence and promote positive parenting practices, reached 5,508 parents and caregivers (3,635 women and 1,873 men). UNICEF facilitated a training on case management and GBV for 30 social workers (14 women, 16 men) in Fanfan and Liben zones, Somali Region and is expected to help them through skills-building to better manage and deliver sensitive, confidential case management services.

In Gedee Zone, SNNP Region, UNICEF supported the translation of case management templates into the local language and conducted five mentorship sessions on case management of Unaccompanied and Separated Children (UASC), particularly on the use of case management formats, for four social workers and 27 community service workers. This will assist in the accurate collection of information in the Zone to support appropriate case management. Furthermore, the social workers supported four unaccompanied minors (2 girls, 2 boys) with placement in alternative care arrangements in SNNP Region. A total of 2,872 children in SNNP (1,246 girls, 1,626 boys) received psychosocial support through access to child-friendly spaces and 1,370 IDPs (562 girls, 361 boys, 265 women,182 men) were reached with community awareness sessions on GBV prevention and risk mitigation, which also created awareness on services available.

In Oromia Region, on-going insecurity has directly affected the delivery of child protection interventions due to limited access to IDP sites. In January, 131 unaccompanied and separated children (43 girls, boys 88 boys) were provided with family tracing and alternative care services and 5,989 children (2852 girls, 3137 boys) received psychosocial support services through access to child-friendly spaces. In this period, 5,315 IDPs (1977 women, 3338 men) were reached with messages on GBV prevention and mitigation.

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3 ‘Who is where, when, doing what’ tool.
In the five refugee camps of Benishangul Gumuz Region, 774 children (349 girls, 425 boys) accessed community-based safe spaces and benefited from structured activities appropriate to their age and developmental stage and 11 children (6 girls, 5 boys) received targeted psychosocial support services. With support from UNICEF, 13 children (5 girls, 8 boys) were placed in alternative care arrangements. In partnership with the International Rescue Committee, 4,083 adolescent girls were provided with GBV risk mitigation services, which included awareness sessions on sexual and reproductive health, available services and distribution of dignity kits.

**Education**

According to the Meher assessment conducted in November and December 2018, 414 schools (244 in Somali; 84 in Oromia; 41 in Benishangul Gumuz; 32 in SNNP; 9 in Afar; and 4 in Gambella regions) were closed. Of these schools, 260 were totally damaged, while 462 were partially damaged due to conflict, floods, droughts and other emergencies; preventing 986,244 school-aged children from accessing education. The 414 closed schools make up two per cent of 24,385 schools in the region. According to IOM’s December 2018 DTM, 1,084,723 school-aged children are displaced due to conflicts, droughts, and other emergencies throughout the country.

UNICEF, in partnership with Voluntary Service Overseas (VSO), provided a three-day training on psychosocial support (PSS) and emotional learning (EL) to 222 primary school teachers (52 female) in Somali Region in collaboration with Kebridehar College of Teacher Education. The teachers were equipped with knowledge and skills to deliver basic, psychosocial first aid and make referrals for additional support if required. If the teachers employ the skills gained, an estimated 11,100 children will benefit directly. Experts from VSO International also provided follow-up support to 10 primary school teachers and two accelerated school readiness (ASR) facilitators working in Meso IDP site and host community school in East Hararghe Zone.

UNICEF recruited a Federal Education Cluster Coordinator to strengthen coordination both at federal and regional levels in terms of advocacy, planning, implementation and monitoring of Education in Emergencies (EiE) interventions. With UNICEF financial and technical support, the Ministry of Education has developed an EiE training manual to enhance the capacity of regional and zonal EiE experts to plan, implement, monitor and report EiE responses.

In the refugee response, UNICEF is supporting the construction of classrooms, a library, four laboratories and 12 latrines at Pugnido II Secondary School. When complete, the school will serve 320 refugee children. Likewise, the construction of 40 primary school classrooms across camps in Gambella region (Jewi (8), Kule (16) and Tierked (16) continues and has reached 90 per cent completion. The classrooms target 2,000 children and will greatly reduce the student/classroom ratio, which is currently high.

**Communication for Development (C4D)**

UNICEF continued to support social mobilization for prevention and control of disease outbreaks in Somali Region with a focus on the scabies outbreak in Qoloji IDP site (https://www.unicef.org/ethiopia/stories/unicef-scales-efforts-eradicate-scabies-outbreak-internally-displaced-persons). About 70 volunteers were mobilized to conduct social mobilization in the site. Key messages in prevention of scabies were disseminated along with hygiene, sanitation, breastfeeding, nutrition, and measles. UNICEF also distributed C4D materials on scabies. UNICEF also responded to a suspected dengue fever outbreak in Fañan and Erer zones in Somali Region. The response mainly focused on treatment seeking behaviors of residents until confirmation is obtained on the outbreak.

**Funding**

UNICEF Ethiopia has appealed for US$ 124,093,133 in 2019 to support our humanitarian action for children. Since January, UNICEF has received US$ 1,171,942.73 million. This complimented a carry-over fund of US$ 26,256,901.22 from 2018.

### UNICEF Ethiopia funding status as of 31 January 2019

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Requirements</th>
<th>Funds available</th>
<th>US$</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>US$</td>
<td>Funds Received Current Year</td>
<td>Carry over*</td>
<td>$</td>
</tr>
<tr>
<td>Nutrition</td>
<td>48,619,225</td>
<td>0</td>
<td>27,518,101.39</td>
<td>21,101,123.61</td>
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<tr>
<td>Health</td>
<td>14,192,865</td>
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<td>1,468,266.45</td>
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<tr>
<td>WASH</td>
<td>49,675,000</td>
<td>487,302.60</td>
<td>4,992,771.63</td>
<td>44,682,228.37</td>
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<tr>
<td>Child Protection</td>
<td>3,687,192</td>
<td>327,676.00</td>
<td>1,720,363.55</td>
<td>1,966,828.45</td>
</tr>
</tbody>
</table>
### Summary of Programme Results 2019

<table>
<thead>
<tr>
<th>Cluster Response</th>
<th>UNICEF and IPs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Nutrition</strong></td>
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<td>Children under 5 years with SAM admitted treatment</td>
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<td>Children received vitamin A supplementation</td>
<td>-</td>
</tr>
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<td><strong>Health</strong></td>
<td></td>
</tr>
<tr>
<td>Women and children under 5 years accessing essential maternal and child health services</td>
<td>441,000</td>
</tr>
<tr>
<td>People affected by acute watery diarrhoea with access to life-saving curative interventions</td>
<td>15,000</td>
</tr>
<tr>
<td>South Sudanese refugee children aged 6 months to 14 years vaccinated against measles</td>
<td>40,270</td>
</tr>
<tr>
<td>Number of households who have received two insecticide-treated bed nets in malaria-endemic areas</td>
<td>400,000</td>
</tr>
<tr>
<td>Number of people with access to health care facilities stocked with emergency drugs and supplies for three months.</td>
<td>320,000</td>
</tr>
<tr>
<td><strong>Water, Sanitation &amp; Hygiene</strong></td>
<td></td>
</tr>
<tr>
<td>People accessing sufficient water of appropriate quality and quantity for drinking, cooking and maintaining personal hygiene (more than 1 million through permanent infrastructure)</td>
<td>8,185,521</td>
</tr>
<tr>
<td>People reached with key messages on hygiene practices</td>
<td>6,200,000</td>
</tr>
<tr>
<td><strong>Child Protection</strong></td>
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<tr>
<td>Vulnerable children provided with psychosocial support, including access to child-friendly spaces with multi-sectoral programming interventions</td>
<td>30,000</td>
</tr>
<tr>
<td>Unaccompanied and separated girls and boys reunified with their families and/or placed in appropriate alternative care</td>
<td>6,176</td>
</tr>
<tr>
<td>Children and women provided with risk mitigation, prevention or response</td>
<td>2,900</td>
</tr>
<tr>
<td>interventions to address gender-based violence</td>
<td></td>
</tr>
<tr>
<td>-----------------------------------------------</td>
<td>-----------------------</td>
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<tr>
<td><strong>EDUCATION</strong></td>
<td></td>
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<td>School-aged children, including adolescents, accessing quality education</td>
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