# **Nutrition Response in Ethiopia: Benishangul-Gumuz**

As of 15 April 2019



### **Context**

No woreda in the region classified as hotspot 1 (severely affected

Population estimated to be 1 million (CSA projection) 3,455 children with SAM expected in 2019\*

#### Coordination

· UNICEF is participating in relevant regional and zonal level coordination meetings

## **Expansion of SAM Facilities, 2018-2019**



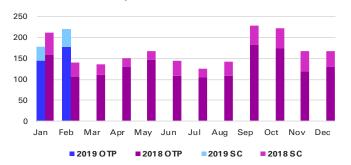
# **To Facilitate Rapid Response**

1 UNICEF staff supporting nutrition programme

3 CMAM monitors deployed

FMoH

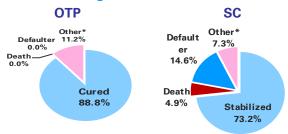
## SAM Admissions, 2018-2019



398 U5 children admitted with SAM in Jan – Feb 2019, out of whom 76 were admitted to inpatient care (19% of total SAM admissions) 89% reporting rate

220 children were admitted for SAM treatment in February 2019 with 87.4% of reporting rate. The February 2019 SAM admissions has increased significantly by 36 % compared to the same month last vear.2018

## **SAM Programme Performance in 2019**



- · \*Other includes non-responders, medical transfers and transfers to other CMAM
- · Stabilization for SC includes recovery and transfer to OTP.
- Performance in line with SPHERE standards (cure>75%, defaulter<15%)</li>

# **Overview of Region**

- Benishangul-Gumuz mainly receives rains from June-September, during which heavy rains occasionally deter access to health facilities. The rain also heightens the risk of water-related diseases.
- Lean season spans from May to July in the region, followed by increase in SAM admissions between June-August.
- In Jan 2018-Feb 2019, 0.8% of the national SAM burden was reported in Benishangul-Gumuz Region, which is the lowest SAM burden next to Gambela.
- In Kamashi zone, circa 52,000 people have been displaced since September 2018 due to conflict.

<sup>\*</sup>Latest Hotspot classification conducted in January 2019

<sup>\*\*</sup>Mid-Year Review of the Humanitarian and Disaster Resilience Plan (2018), \*\*As per 2019 estimated caseload,