**Highlights**

- The expansion of the Tigray crisis into neighbouring Afar and Amhara regions has caused significant displacement across regional boundaries and internally within the regions creating a new wave of humanitarian needs. As of 31 July, Amhara and Afar were hosting over 674,000 and 161,000 internally displaced people (IDPs), respectively, since the beginning of the crisis. In July, UNICEF actively responded to the needs of over 23,000 IDPs in Amhara and 60,000 in Afar through provision of essential supplies and services, including ready-to-use therapeutic food (RUTF) and water, sanitation and hygiene (WASH) non-food items (NFIs), and through deployment of Mobile Health and Nutrition Teams (MHNTs).

- Nationwide, Severe Acute Malnutrition (SAM) admissions increased by 8.9 per cent (3,438 more children) compared to the previous month and by 11 per cent (4,154 more children) compared to the same month last year. In response, UNICEF dispatched 20,245 cartons of ready-to-use therapeutic food (RUTF), 435 cartons of F-75 and 316 cartons of F-100 during the month of July. In Tigray, a total of 74,527 children were screened for malnutrition and 1,388 children were admitted for SAM treatment.

- In July alone UNICEF and partners reached 32,764 girls and boys, women and men across Tigray, Amhara and Afar with gender based violence (GBV) risk mitigation and response interventions; case management services; support to GBV survivors and unaccompanied and separated children (UASC); as well as mental health and psychosocial support (MHPS) and prevention of sexual exploitation and abuse (PSEA). In addition, 1,136 children who experienced violence were reached by health social and legal enforcement services in Amhara, Afar, Benishangul-Gumuz, Oromia, Gambella (refugees) and Southern Nations, Nationalities and People’s (SNNP) regions.

- UNICEF continues to provide education assistance for internally displaced and emergency-affected out-of-school age children in collaboration with the Ministry of Education, Regional Education Bureaus (REBs) and NGO partners. To date, a total of 141,338 (48% girls) children have been reached through the provision of formal or non-formal education. This includes 16,879 children (49% girls) receiving “Bete-My Home” integrated education and child protection assistance in Tigray.

- UNICEF has revised its 2021 Northern Ethiopia Response Plan (Tigray, Afar and Amhara) up till end December 2021, scaling up targets and budgets - with a funding requirement of US$108 million or over double the previous plan. Presently, the funding gap for the scale up response stands at 66 per cent. Urgent funds are required to meet the alarming situation of children.

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1 UNICEF revised funding requirement reflects new needs in Tigray, Amhara and Afar regions, as outlined in the UNICEF Northern Ethiopia Scale Up Plan released in early August and will be featured in the upcoming revised 2021 Humanitarian Action for Children appeal.
Situation Overview & Humanitarian Needs

Humanitarian needs in Ethiopia are steadily increasing as communities face multiple and simultaneous shocks, including protracted and new conflict, food insecurity, floods, drought, desert locusts, and COVID-19. Altogether, approximately 3.95 million people are displaced across the country, of which 1.8 million people are living in camps or camp-like settings through the country.

In the northern regions of Tigray, Amhara and Afar, approximately 400,000 people are classified as Integrated Phase Classification (IPC) 5 (catastrophe) in addition to four million people in IPC 3 or 4 (crisis or emergency). This is in addition to over 2.1 million people who are currently displaced due to the conflict with a steady increase of displacements across the regional boundaries and within the regions of Afar and Amhara. While access has generally improved, more than 200 humanitarian aid trucks have been prevented from reaching Tigray for two weeks in July, further intensifying the humanitarian needs. A scarcity of cash, fuel and electricity also continues to significantly hamper emergency responses in Tigray.

In Amhara, more than 1.37 million IDPs are living across the region in host communities and IDP sites. Of these, over 674,000 are new IDPs as a result of the expansion of the Tigray crisis. Despite the large number of IDPs, there has been limited humanitarian operations in the region. Furthermore, the regional 2021 ‘belg’ assessment estimates over 80 per cent productivity loss, resulting in 623,920 people in need of relief assistance as of July 2021. Food security may further deteriorate due to the desert locust invasion, inflation of food costs, failure of the belg production, ongoing conflict, and active displacement due to the Tigray crisis. It is expected that the caseload of malnutrition will continue to rise in the coming months.

The situation of water, sanitation and hygiene (WASH) in Amhara region also continues to worsen due to a shortage of resources and limited number of partners while multiple emergencies with influx of IDPs is being reported across the region. The capacity of governmental counterparts to respond for emergency is limited, and there are few NGOs working in the region.

The humanitarian situation in Afar has become increasingly complex as result of active conflict between the ENDF and the TPLF, as well as the Afar-Issa clan conflict. The conflict in Hari Resu zone was unpredicted and has caused an additional burden to the existing strained humanitarian situation in the region.

Furthermore, in Afar, 18 woredas along the Awash River Basin experience flooding annually. Communities affected by the 2020 floods are still struggling to recover and are at risk of further flood-related damage this year due. An estimated 90,000 people likely to be affected and up to 54,000 people displaced. Coupled with other hazards in the region, almost half of the region’s population – approximately one million people -- are at risk.

In Oromia’s Horo Guduru Wollega Zone, the security situation is volatile due to expanding unidentified armed group (UAG) operations and ethnic-based attacks, which have resulted in numerous civilian deaths and population displacements. Displacements are also ongoing in Kelem Wollega and East Wollega zones. IDPs are experiencing severe psychological distress escaping the violence, and increased risk of gender-based violence (GBV) in IDP sites has been reported. Altogether, the most recent Displacement Tracking Matrix (DTM) round 24 shows there are a total of 592,992 IDPs in the region, primarily due to conflict, as well as to drought and flooding. This has also created a higher than usual drop-out rate of students.

In Benishangul-Gumuz, a total of 246,938 people have been displaced due to ongoing conflict in the region. The security situation in Metekel zone remains volatile with sporadic conflicts in Bullen woreda. Similarly, road access to Kamashi zone has been restricted for some months. Based on the regional Disaster Risk Management Commission (DRMC) report, there are 246,938 IDPs in the region. Some woredas are only partially accessible and nearly 50 per cent of rural health facilities are no longer providing routine essential health and nutrition services.

In Somali, drought is anticipated to affect large areas of the southern part of the region including Dolo, Korahay, Shabelle, Liban and Afdher zones, impacting an estimated 2.4 million people including 300,000 children living within these areas.

On 24 July 2021, conflict was reported in the border areas between Afar and Somali Regions mainly Gerba-Issie town, which had a devastating impact on children and women; the number of casualties still remains unknown. Preliminary information has shown that approximately 1,500 households were displaced with confirmed figures pending an inter-agency joint assessment.

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4 IOM DTM Emergency Site Assessment: Northern Ethiopia Crisis Round 7.
In SNNP, intermittent ‘belg’ rains have impacted agricultural land preparation, availability of water and forage for the livestock; productivity is also expected to be impacted. IPC Phase 3 (crisis) level outcomes are projected to occur and, in some areas, may reach IPC Phase 4 (emergency) level. In addition, a measles outbreak was reported in Haylusha Kebele of the Selamago woreda in South Omo zone in the region. A total of 54 cases (no deaths) were reported as of 21 July 2021.

In Gambella, a heavy rainy season has resulted in flooding along the Baro and Gilo rivers and has caused damage and suffering amongst refugees in the region.

Nationwide, severe acute malnutrition (SAM) admissions increased by 11 per cent (4,154 more children) compared to the same month last year. Significant changes in SAM admissions were observed in Tigray (92%), SNNP (33.8%), Dire Dawa (15.6%), Sidama (10.3%), Somali (7.2%), Oromia (1.9%) and Afar (1.4%) as compared to the previous month of reporting.

As of 31 July 2021, there were a total of 280,024 confirmed COVID-19 cases and 4,385 deaths (CFR=1.56%) since the onset of the outbreak on 13 March 2020. Addis Ababa reported 183,093 cases (65.3%), whereas Oromia and Amhara contributed 39,593 (14.1%) and 12,207 (4.3%) cases, respectively. Reports from the Tigray region (8,171 cases) have not been received since 29 June 2021. A total of 263,500 (94%) patients were reported recovered, and 223 severe COVID-19 cases were admitted in designated treatment centres in Addis Ababa and across the regions. The increasing trend of the confirmed COVID-19 cases and admissions for the last three weeks may be marking the beginning of the third wave of the pandemic in Ethiopia.

Summary Analysis of Programme Response

Child Protection
UNICEF continued to support the government bureaus and NGO partners to strengthen child protection case management and referral pathways in hotspot locations. In order to ensure the necessary personnel and expertise to support the response, UNICEF deployed three child protection in emergencies consultants in Amhara, Benishangul-Gumuz and SNNP regions. These experts will provide technical support for UNICEF partners including social workers and child protection officers in the Bureau of Women Children and Youth (BoWCY) in the three regions. The consultants will also conduct monitoring of child protection risks in their assigned locations. In this reporting month, 1,136 children (983 girls, 153 boys) who experienced violence were reached by health social and legal/law enforcement services in Amhara, Afar, Benishangul-Gumuz, Oromia, Gambella (refugees) and SNNP regions. In addition, 111 separated/unaccompanied children were reunified with their families and 193 children were placed under alternative care arrangements, including foster care and kinship care.

Recognizing the increase of psychosocial distress amongst populations in emergency affected areas, UNICEF supported partners to ensure psychosocial support activities are available in critical areas. In this reporting month, 663 children (379 girls, 284 boys) were reached through community-based psychosocial support facilitated by social workers who are trained to provide psychological first aid (PFA) to children and adults in distress, and to identify and plan other types of psychosocial interventions at the grassroots level.

UNICEF partners supported information sharing and dialogue among 5,667 community members (5,488 women and girls, 179 men and boys) including members of community-based structures on protection and GBV risks children face in the context of displacement in Oromia, Benishangul-Gumuz and SNNP regions. Members of the community-based structures were also supported to identify children who are at risk and refer them to multisectoral services, including case management. In the reporting period, 13 cases of sexual violence (7 girls, 6 boys) were referred for multisectoral response services such as health, psychosocial support and legal aid in Gambella Pagak entry point. In addition, 1,098 girls and women were provided with dignity kits in Amhara and SNNP regions.

In July, as part of UNICEF’s commitment to PSEA, 3,526 IDPs (2,604 females, 1,462 males) were reached by prevention of sexual exploitation and abuse (PSEA) awareness raising and 3,664 IDPs had access to a safe and accessible channel to report sexual exploitation and abuse (SEA).

Child Protection – Northern Ethiopia Response (Tigray, Amhara, Afar)
UNICEF’s Child Protection and GBV response in Tigray Region and affected woredas of Amhara and Afar has reached a total of 141,932 children and women since the beginning of the conflict: 756 with case management and referrals; 36,631 with mental health and psycho-social support (MHPSS) activities; 44,395 for GBV risk mitigation; and 21,428 with dignity kits and material support; direct support to 650 GBV survivors and 3,447 UASC, and

5 Famine Early Warning Systems Network (Fewsnet) for Ethiopia, June 2021 – January 2022. Ethiopia | Famine Early Warning Systems Network (fews.net)
prevention of sexual exploitation and abuse (PSEA) activities reaching 34,625 community members. In the reporting period, UNICEF and partners have reached a total of 32,764 girls and boys, women and men across Tigray (Mekelle, Shire and Mai Tsebri, Tigray Central, Eastern, Southern and South-Eastern Zones), Amhara and Afar with GBV risk mitigation and response interventions, case management services, support to GBV survivors and unaccompanied and separated children (UASC), as well as MHPSS for children and their caregivers and PSEA.6

Given the increased displacement and numbers of affected children and their families in Afar and Amhara, UNICEF is currently amending existing partnerships in both regions to effectively respond to child protection and GBV risks.

In the reporting month, UNICEF and partners also supported 228 UASC (95 female) in Tigray of which 46 have been reunified with their families and 182 were provided with alternative care. Since the beginning of the conflict, 3,447 UASC have been identified and supported by UNICEF and partners.

As a result of telecommunication blockages across Tigray, family tracing and reunification efforts in the reporting period were severely hampered. Nonetheless, one UNICEF partner reunified 46 UASC (34 boys, 12 girls) with their families including 10 children (4 girls) from Mekelle and 36 children (8 girls) from Shire. In addition, 174 UASC (91 boys, 83 girls) were placed in kinship care (26 from Mekelle and 148 in Shire). In affected woredas of Afar, eight additional unaccompanied minors were provided with alternative care arrangements facilitated by social workers. In addition, 33 additional children with protection concerns were provided with social services, including referrals and regular follow-up.

From prior identified and documented children with protection concerns, 132 children (52 boys, 80 girls) have received multi-sectorial referral services (92 of which from Mekelle and 40 from Shire). In addition, 13 children (4 girls) who have experienced violence were reached by social workers and received relevant services and referrals in Mekelle and Shire areas. To increase the awareness on child protection risks and available services, a UNICEF partner conducted awareness-raising activities and reached 2,231 community members (1,140 females).

Case management was provided to 73 GBV survivors (all female), reaching a total of 650 GBV survivors since the beginning of the conflict. UNICEF partners identified and provided services to 52 GBV survivors in the Mekelle project area, four in Shire, and 17 in Abi Adi. All survivors received appropriate response, including referrals to other services as appropriate, such as health services and more specialized mental health support as needed.

Additionally, UNICEF and partners trained 85 staff members across sectors (child protection, health and nutrition) PSEA during the month. Of these, 29 of these were in Southern Zone and 56 in Eastern Tigray. Since interventions began, a total of 55,789 individuals have been reached with outreach activities on available reporting mechanisms and services for survivors of SEA.

In order to increase awareness on availability of GBV services, and as part of GBV risk mitigation and prevention, a total of 26,680 community members were reached through awareness-raising and community outreach activities on GBV, referral pathways, reporting mechanisms and available services. The cumulative reached since the beginning of the conflict is 44,395 community members.

In Southern Tigray, a UNICEF partner has been able to reach 942 women, girls, boys with risk mitigation and awareness-raising on GBV. In addition, 10 GBV referral pathways were established in Southern Zone to ensure referrals to and from other sectors are functional. Similarly, in Abi Adi, 791 community members were reached with GBV risk mitigation activities, while in Shire project area, 20,477 people benefited from such awareness-raising activities, and 4,079 from Mekelle.

Partners have continued to provide capacity-building and trainings for staff across sectors to prevent and respond to GBV. In Shire, 18 professionals (20 female) were trained on GBV concepts, while 19 staff (10 female) benefitted from a training on clinical management of rape.

In Afar, awareness-raising on GBV and Child Protection, including child marriage and FGM, was conducted for 381 community members (202 female).

In the reporting period, a total of 1,642 women and adolescent girls were reached with dignity kits, bringing the total number of women and girls who received dignity kits and other material support as GBV risk mitigation efforts to 21,428. A UNICEF partner operating in Southern Zone distributed dignity kits to 269 girls and women, including with information on the importance of health-seeking behavior and available services. Similarly, 1,324 women and girls received dignity kits in Abi Adi project area, and another 49 women and girls received the kits in Mekelle.

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6 Due to the communication blockages within the region, not all results are accounted for in the situation report.
UNICEF supported 4,038 children and their caregivers with MHPSS in the reporting period, reaching a total of 36,631 children and community members since November 2020. In Mai Tsebri, a specialized MHPSS partner conducted workshops and direct support to individuals requiring mental health support. In addition, psycho-education workshops were provided to 192 IDPs on the topics of coping with uncertainty, stress and how to talk to children, as well as conflict and displacement, mental health symptoms, sleeping difficulty and coping strategies. 159 IDPs in need of stabilization were reached with direct psychological first aid and crisis response.

In Abi Adi, 58 children and caregivers were provided with direct MHPSS services, while in Mekelle, 2,263 caregivers (1,158 female) and 518 (251 female) children received basic non-specialized MHPSS. For parents and caregivers, parental skill education awareness-raising was conducted to 350 caregivers in Shire, while awareness on socio-emotional learning was provided to 350 adolescent girls and boys.

In Ab’ala Woreda of Afar Region, community-based psycho-social support was also provided for 24 children (13 female) and nine caregivers (2 female), with additional awareness-raising conducted for 65 community members (31 female) on the consequences and causes of psychosocial distress, easy identification and referrals to service providers.

Challenges experienced by UNICEF and partners in this reporting period have included the communication outages (phone and internet) across Tigray hindering family tracing and reunification efforts, lack of access and passage for staff and supplies, including Dignity Kits, severe security concerns for operating partners, shortage of cash and fuel in some cases hindering social workers from effectively being able to conduct case management, and the fear and stigma of GBV survivors leading to low help-seeking behavior. More human resources are also required in the area of mental health and psychosocial support.

**Nutrition**

In July, UNICEF supported the treatment of 42,270 children under five with Severe Acute Malnutrition (SAM) in Ethiopia, of whom 37.2 per cent were treated in Oromia; 19.9 per cent in Somali; 13.8 per cent in SNNP; 11.8 per cent in Amhara; 7.8 per cent in Tigray, and 1.3 per cent in Benishangul-Gumuz, Gambella, Harari and Dire Dawa regions combined. U5 children with SAM treated reached 208,672 since January.

Nationwide during the month of July, SAM admissions increased by 8.9 per cent (3,438 more children) compared to the previous month and by 11 per cent (4,154 more children) compared to the same month last year. In response, UNICEF dispatched 20,245 cartons of ready-to-use therapeutic food (RUTF), 435 cartons of F-75 and 316 cartons of F-100.

SAM admissions has shown an increase in Tigray (92%), SNNP (33.8%), Dire Dawa (15.6%), Sidama (10.3%), Somali (7.2%), Oromia (1.9%), and Afar regions (1.4%) compared to the previous month. Based on data retrieved from the District Health Information System 2 (DHIS2), during the period of January to June 2021, a total of 5,757,264 children aged 6-59 months were screened across all regions in Ethiopia and 209,411 children were found to be severely malnourished. During the same period, 208,672 children were treated for SAM throughout the country. Compared to the same period last year, the admission has increased by 22 per cent in 2021.

In Amhara in the reporting month, a total of 4,992 severely malnourished children were admitted to therapeutic feeding programmes (TFP) in the region with a reporting rate of 88.7 per cent, with performance indicators within acceptable ranges (96.8% cured, 0.23% deaths, 1.91% defaulters). In July a total of 511,169 children aged 6 to 59 months received vitamin A supplementation throughout Amhara, of which 5,969 children received vitamin A in both host community and IDP sites. A total of 151,141 pregnant mothers received iron folic acid supplementation. 54 health workers from the Oromo Special Zone and North Shewa Zone received a seven-day training on the revised national SAM guidelines. In addition, 50 health extension workers (HEWs) were provided a training on the Integrated Management of Acute Malnutrition (IMAM) for three days in North Shewa zone. Mini-screening campaigns were launched in four woredas
(Shewa Robit, Eferatan gedem, Antsokia gemeza, and Menz gera) following proper orientation to HEWs, health workers, Health Development Army (HDA) and community members.

In SNNP and Sidama regions, the IDP emergency response continues for 75,111 people in Konso, Derashe, Alle and B. Sheko zones in both IDP sites and the host communities. The erratic belg rain has influenced agricultural land preparation, availability of water and forage for the livestock. A total of 7,461 children were admitted for SAM treatment in SNNP and Sidama regions and 326,941 under five children were supplemented with vitamin A (226,059 from SNNP and 100,882 from Sidama). Compared with the previous month, vitamin A supplementation has increased by 31.5 per cent and the catch-up campaign conducted in May and June contributed to improved VAS coverage.

In Oromia, in May 2021, based on routine screening data collected through DHIS2, a total of 3,574,708 children 6 to 59 months were screened to assess their nutritional status with regional average screening coverage of 59.4 per cent. Out of the total 3,371,864 children 6 to 59 months screened, 16,947 (0.47%) and 166,386 (4.7%) were identified with SAM and MAM, respectively. Based on the Displacement Tracking Matrix (DTM) round 24, a total of 592,992 IDPs (due to conflict induced by drought and flooding) are residing in the region in different zones and IDP sites. In the reporting month, severe acute malnutrition remains the major public health problem affecting children particularly in drought-prone area of the region. A total of 15,716 new SAM cases were admitted for treatment with 91 per cent reporting rate and overall performance indicators during the reporting period are above the international standards, namely 86.7 per cent cure rate, 0.2 per cent death rate and 5.2 per cent defaulter rate. Compared to the previous months as well as same months of previous years, unusual increment has been observed in the number of SAM cases defaulted from TFP from nearly 1 per cent to 5.2 per cent. Six woredas in West Arsi, West Wollega and East Wollega zones are the major contributors for increased defaulter rate, which is due to lack of resource/partners to support the distribution from zonal store to facility.

In Somali region, continued land disputes between Afar and Somali Regions have led to a dire humanitarian situation. On 24th July, a conflict erupted in Gerba-Issa town. The region has continued to record high SAM admissions. A total of 10,473 children admitted to SAM treatment in June 2021, an increase of 24.3 per cent as compared to the previous month which stood at 8,418 admissions. With support of UNICEF Mobile Health and Nutrition Teams (MHNTs) and Sustainable Outreach Strategy (SOS) teams, a total of 6,105 individuals (1,412 under five children and 4,693 women) were reached with primary health care services in priority locations. UNICEF continues supporting government and NGO partners in strengthening Community-based Management of Acute Malnutrition (CMAM) programme management through 10 Emergency Nutrition Officers (ENO), who are conducting supportive supervision and mentorship for health workers and HEWs. During the reporting period, they conducted on-the-job training for 147 health facilities, facilitated delivery of therapeutic milk required and conducted end-user monitoring.

Acute food insecurity is also anticipated in the northern part of Afar due to climate change, population displacement and spill-over of the conflict in Tigray. As per the IPC Global snapshot for May-September 2021, more than 450,000 people are likely to face high levels of acute food insecurity (IPC Phase 3 or above). In May 2021, a total of 1,820 children aged 6-59 months were admitted for SAM treatment. The May 2021 admission increased by 1.4 per cent as compared to the previous month. Programme performance showed a cure rate of 97.8 per cent, defaulter rate of 1.8 per cent, and death rate of 0 per cent -- above SPHERE standards. In the reporting month, a total of 66,392 moderately malnourished children and pregnant and lactating women (PLW) (39,325 children, 27,067 PLWs) received targeted supplementary feeding in the 23 priority woredas.

In Gambella, a total of 125 children with severe acute malnutrition were admitted for treatment (of which 39 cases of SAM with complications were admitted to stabilization centres), with the following performance indicators: cured (93.4%) and defaulted (5.9%). In the reporting month, on-job-training on IMAM guidelines, recording, reporting and therapeutic supply handling was given to 23 nutrition implementing staff at 18 visited health facilities. In addition, a total of 125 PLWs were screened, of which 14 were identified with acute malnutrition and all severe cases were linked to TFPs and promoted key nutrition messages for caretakers. With UNICEF support, a five-day training was held on ‘Adolescent and youth health and nutrition’ for 12 health workers. Model farmer training was conducted for 28 participants from the woreda level in Gambella town by the Bureau of Agriculture and Natural Resources with technical support from UNICEF to increase farmer’s awareness on the importance of optimal nutrition in their community. The ongoing Standardized Expanded Nutrition Survey (SENS 2021) in the refugee camps, in addition to the pre Meher assessment in sampled/selected woredas of the region were supported by Government sectors and humanitarian teams.

In Benishangul-Gumuz, in nearly 50 per cent of Metekel and Kamshi zones, rural health facilities are not providing routine essential health and nutrition services. Accordingly, MHNTs are working to address the pressing need of health and nutrition services. UNICEF has supported with 400 cartons of RUTF to treat nearly 250 severely malnourished children.

The SAM admission across regions in Ethiopia continued to have an increasing trend, reflecting the worsening of the food security and nutrition situation. From January to June, 241,820 SAM children were treated for SAM across Ethiopia (representing 48% of HRP plan). SAM admissions increased by 20 per cent in 2021 compared to the same period of
2020. The key drivers for this change are associated with COVID-19, conflicts, desert locust infestation, high inflation and food prices, disrupted rainfall patterns, all leading to acute food insecurity. Given the sharp increase in SAM admission being observed in regions with high case loads, the RUTF pipeline is likely to be strained towards the end of the year. UNICEF top priority for nutrition response is therefore to ensure there won’t be any pipeline gap to continue saving children’s lives all over the country.

Nutrition - Northern Ethiopia Response (Tigray, Amhara, Afar)

In July 21, a total of 74,527 children were screened for malnutrition; 1.8 per cent (1,388) and 14.5 per cent (10,823) were identified SAM and MAM cases, respectively. A total of 1,388 children were admitted for SAM treatment.

UNICEF restarted collection and compilation of admission data. Since February 510,196 children under five from 72 woredas, towns and IDP sites were screened in Tigray. Since February 2021, there have been a total of 12,278 children with SAM admitted for treatment. Since the beginning of Feb 2021, MAM among PLW has been consistently high at 50 per cent from a total of 151,481 screened PLWs across 64 woredas. Out of the total children screened, on average 2.1% (12,525) have been identified with SAM and 15.1% (90,853) with MAM.

Also in July, a total of 25,098 children received vitamin A supplementation and 15,325 deworming tablets. Furthermore, a total of 1,190 pregnant women received iron folate supplementation. Nutrition supplies, including 695 cartons of RUTF, 200 tins of F-75 and 130 tins of F-100 were distributed to 35 health facilities in 13 priority one woredas. Out of the total children screened, on average 2.1% (12,525) have been identified with SAM and 15.1% (90,853) with MAM.

UNICEF ENOs provided technical support to 41 health facilities in 12 woredas located in Mekelle, South East and Central zones of Tigray. A total of 82 health workers and HEWs received on-the-job training on acute malnutrition management and IYCF. A rapid nutrition assessment through MUAC and oedema screening was conducted in five woredas by the DRMC and World Vision with UNICEF technical and financial support in Eastern and Southern zones. Altogether, seven partnerships have been established in Tigray, ensuring one partner in each of the seven zones to scale up services via mobile health and nutrition teams and the few functioning health facilities, currently less than 30 per cent of the total health system in the region.

UNICEF, in collaboration with other UN agencies and NGO partners, also visited health centres in Samre town, which has one primary hospital and one health centre, both of which were found to be non-functional due to damage and looting. Thus far, 19,320 cartons of RUTF have been delivered and 13,257 children treated since January 2021. UNICEF is also collaborating with WFP for provision of blanket supplementary feeding and treatment of MAM to ensure continuum of care and coherence of the response. Furthermore, 12 MHNTs are providing essential health services in underserved and unreached communities of Wolkait, Tegedie and Humera areas through UNICEF support.

Following the expansion of the conflict into Afar and Amhara, the two regions have scaled-up their emergency nutrition response. In Afar, UNICEF supports five MHNTs deployed to the IDP sites, and the region received 2,000 cartons of BP5 and 4,400 cartons of RUTF. The supplies are under distribution for areas hosting IDPs. In Amhara, children are missing their treatment due the current displacement in North Wollo, South Gondar, North Gondar and Waghimera. SAM admissions increased by 4.9 per cent (244 children) compared with the previous month of reporting. Nutrition screening was conducted in in central Gondar (with 673 children screened of which 31 (4.6%) had SAM, and 176 (24.2%) had MAM), as well as in Zigem woreda. However due to security concerns, three kebeles in and around Gumuz could not be reached. A total of 9,601 children under 5 age were screened in 17 kebeles, with 53 children suffering with MAM and two with SAM. HEB were distributed for 1,040 children and PLWs. Key challenges faced were inaccessibility to some areas and the shortage of MAM treatment supplies.

Health

In July, UNICEF continued to support the delivery of messages focused on COVID-19 and cholera prevention, maternal neonatal and child health (MNCH) service availability and utilization, GBV, and hygiene behaviors. UNICEF distributed personal protective equipment (PPE) to RHBs for health workers to prevent COVID-19 infection and ensure continuity of health services. PPE included 156,118 N95 masks, 442,330 surgical masks, 256,270 bottles of hand sanitizer, and 924 protection coveralls.
UNICEF also distributed emergency drug kits (EDKs) and inter-agency emergency health kits (IEHKs) for the provision of primary health care (PHC) to IDPs and other vulnerable communities across the country. A total of 169 EDKs were distributed to Tigray (77), Amhara (30), Afar (11), SNNP (11), Oromia (10), and to NGOs operating in Tigray and Afar (30). EDKs, with a total of 79 renewable supplies (IEHKs), were provided to conduct medical consultations for 422,500 patients with a focus on maternal and child health.

UNICEF supported transportation, arrival logistics and distribution of 5,138,000 doses of COVID-19 vaccines for Ethiopia. Of these, 2,332,368 have been administered. UNICEF further supported the 'Review Meeting on Communication and Demand Promotion' for COVID-19 vaccination and routine immunization, which included participants from the Ministry of Health, including the Expanded Programme for Immunization (EPI) team, health promotion team, public relation team, and Ethiopia Public Health Institute (EPHI), communication technical working group members, and legal team of the Government of Ethiopia. Since, the development of an activity plan for the upcoming phases of the COVID-19 vaccination has been initiated.

In June 2021, a total of 36,861 new medical consultations were conducted in Afar (16,634) and Somali (20,227) regions through UNICEF-supported MHNT teams. Of these, 14,713 of consultations (40%) were of children under five and 12,662 (34%) were women. Since January 2021, a total of 203,852 consultations have been conducted (109,023 in Afar and 94,830 in Somali). Of these 85,203 consultations (42%) were of children under five and 70,502 consultations (35%) were of women. All medical consultations were performed by 49 UNICEF-supported MHNTs in Somali and Afar regions plus an additional 17 MHNTs run by the Somali RHB and INGOs supported with drugs and medical supplies through UNICEF.

Further to the above, UNICEF continued to support the Gambella RHB to provide vaccinations for South Sudanese refugee children at entry points and refugee camps. In July 2021, 213 children received measles vaccinations at entry points in Gambella. Cumulatively since January 2021, 5,606 children have received the measles vaccine at entry points. In addition, 8,709 children were vaccinated against measles in refugee camps including 701 children in June.

Security challenges in July continued to decrease access to services in Afar, Amhara, and Benishangul-Gumuz regions.

**Health – Northern Ethiopia Response (Tigray, Amhara, Afar)**

UNICEF supported the provision of 77 EDKs and 35 IEHKs for priority woredas in Tigray classified as IPC 5 and other priority areas -- enough to manage 192,500 medical consultations. UNICEF provided an additional 35 EDKs to Amhara region, sufficient to provide medical consultations for 87,500 people displaced due to the conflict. Altogether, UNICEF supported 133,341 medical consultations for children and women across Tigray, Afar and Amhara regions.

PPE was distributed to health facilities for the prevention of COVID-19. A total of 35,868 N95 masks, 314,050 surgical masks, 112,028 bottles of hand sanitizer, and 694 protection coveralls were distributed to health facilities for the prevention of COVID-19 and to maintain essential health services during the pandemic.

Furthermore, UNICEF participated in the assessment of health facilities' functionality in Tigray region. Once results are released, they will guide UNICEF and partners in identifying priority areas for health service provision and addressing gaps in the health response.

In Tigray region, significant damage to health facilities, fuel shortages, interruption of bank services, and communication have been challenges to providing access to health services.

**Education**

UNICEF continues to provide education assistance for internally displaced and emergency-affected out-of-school age children in collaboration with the Ministry of Education, Regional Education Bureaus (REBs) and NGO partners. To date, a total of 141,338 (48% girls) children have been reached through the provision of formal or non-formal education. This includes 16,879 children (49% girls) receiving *Bete* integrated education and child protection assistance in Tigray.

In SNNP, UNICEF supported the REB to conduct a two-day training on Accelerated School Readiness (ASR) programme for 62 woreda education officials, supervisors, and school headteachers (2 females) in Mizan Teferi town to enhance the capacity of delivering ASR in five emergency-affected woredas (Surma, Menit Shasha, Anderacha, Decha and Zaba Gezo). The REB also conducted a four-day capacity building on Active Learning Approaches (ALA) for ASR for 93 Early Childhood Education (facilitators (37% female). Furthermore, the REB convened a two-day blended workshop to discuss the annual education in emergencies (EiE) responses and provided technical refresher presentations for 22 Education Cluster members on the concept of EiE and Emergency Preparedness and Response for Education Cluster members in Halaba Town.

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7 UNICEF SNNP Field Office Training report.
In Amhara, 4,520 children (48% girls) are continuing to learn in IDP and host communities in collaboration with the Education Cannot Wait (ECW) partner, World Vision. In July, with UNICEF and ECW support, World Vision provided training on ASR for 14 female facilitators managing the ASR programme for 490 displaced out-of-school children (225 girls) in seven target schools in Chilliga I, Chilga II, East Dembia and West Dembia woredas in central Gondar. In Oromia, under ECW, UNICEF and partners (Geneva Global Ethiopia-led consortium) continue to support some 10,000 displaced and emergency-affected children (46% girls including 9,157 displaced children) in Babile, Midgatola, Mayu Muluqe, Chenakson, and Sasiga. This includes 1,427 (51% girls) learning in the accelerated learning programme. In July/August 2021, two Information Management Specialists started their assignment in Amhara and Oromia to support effective education in emergencies.

In Oromia, a total of 15,000 children in 10 woredas are targeted for accelerated learning, life skills development and psychosocial support as well as full protection component (case management, psycho social support, preventing child marriage, strengthen community based structures and strengthening coordination, referral pathways & linkages) through the ‘Bete’ integrated approach.

Three projects supported by the Central Emergency Response Fund (CERF) Anticipatory Action Pilot in Ethiopia, implemented by UNICEF with partners (Edukans Foundation, Organization for Welfare and Development in Action (OWDA) and World Vision Ethiopia) continue to support the WASH in school assistance focusing on completing the rehabilitation of water points in schools in drought-prone communities in Afar (27 schools), Somali (28 schools) and SNNP (16 schools).

Furthermore, due to insecurity and accessibility issues in conflict-affected project sites as well as prolonged planning/procurement processes, humanitarian partners’ effective planning and delivery of the project activities is impeded, and has led to a delay in the construction of Temporary Learning Spaces (TLS) with latrines and provision of basic educational materials, which are essential to support the smooth resumption of education for out-of-school children.

Further to the above challenges, the sub-national Education clusters also continue to have inadequate capacity to timely collect, analyse, and share EiE data for advocacy and resource mobilization. Efforts will continue to ensure that this is corrected.

**Education – Northern Ethiopia Response (Tigray, Amhara, Afar)**

In the reporting period, UNICEF continued to work with five partners (Imagine 1 Day, World Vision, Plan International, Edukan and International Rescue Committee) to advocate for safe school reopening and setting up of accelerated learning/TLS in Tigray. Since the start of the crisis, UNICEF has reached a total of 64,627 children (32,028 in Tigray, 23,010 in Amhara, 9,589 in Afar) with accelerated learning through the “Bete” approach.

UNICEF and partners have established 98 temporary learning spaces in tents (43 in Mekelle and 55 in Shire) and existing classrooms via linked schools at IDP sites, cumulatively reaching over 11,667 children (49% girls) accessing “Bete-My Home” integrated education and child protection services.

UNICEF, in partnership with World Vision, continued to support Bete ASR, ALP, and child protection services in six areas the South East Zone (Enderta, Hintalo, Wajerat, and Deguea Tembien, Samre and Seharti) reaching some 5,212 children (49%) attending ASR (1,880 children – 50% girls) and ALP (1,605 children - 48% girls) using the existing school premises. While the disruption of services was experienced during the first weeks of July 2021, World Vision reported that the classes in those accelerated learning facilities resumed, and children are continuing to learn.

UNICEF and IOD continued to support 4,969 children (48% girls) in ASR and 2,310 children (48% girls) ALP. In July, IOD also supported the provision of Early Childhood Development learning materials to IDP sites and schools in Mekelle and Shire. Despite a number of challenges faced including retention of children impacted by food insecurity and displaced persons’ and families’ movements, as well as the disruption of supply and communication networks, service provision resumed in July 2021 and a graduation of ASR children is planned in August 2021.

With UNICEF and Plan International’s support, the construction of TLSs is ongoing in areas bordering with Tigray. In Afar, around 70 per cent of TLS construction in Gubye and 65 per cent of TLS construction in Hameligolo have been completed. Plan International also reported 80 per cent completion rate of TLS construction in Hameligolo, Aballa woredas. The progress rate of TLS construction in Arado and Leyeli in Megale woreda, where construction had been interrupted due to insecurity, stands at approximately 50 per cent as of July 2021. In Amhara, the progress reported in Adiarkay and Telemit is 30 per cent, 50 per cent in Maytekilt and Beremariam, 25 per cent in Dejach Meda, and 50 per cent in Adimhret. The integrated Bete programme interventions are expected to benefit 2500 conflict affected out-of-school primary school-aged Children (1,250 Afar and 1,250 in Amhara)

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8 UNICEF Amhara Field Office July 2021 Sitrep.
While progress has been achieved in July, security and inaccessibility to conflict-affected project sites, prolonged planning/procurement process and/or lack/shortage of contractors to work with humanitarian partners continue to delay the implementation of EiE project activities in Tigray, as well as conflict-affected areas in Afar and Amhara.

UNICEF continues to monitor project implementation while processing the extension of existing partnerships and exploring new partnerships. In Tigray, a new partnership with Save the Children has been signed and implementation will start in August 2021, which aims to reach some 20,000 displaced and emergency-affected children with education services.

WASH

In the reporting period, UNICEF provided 257,633 people with access to safe water supply through rehabilitation/expansion of existing water schemes. This brings the total number of people reached since January 2021 to 3,139,263. Additionally, a total of 261,545 people were reached through provision of WASH related non-food items (NFIs) in July alone, bringing the total number of people reached with WASH NFIs to 690,319 people since January 2021. Further to the above, 26,812 people were provided access to basic sanitation facilities in July bringing the total of people reached since January to 208,366. UNICEF also provided technical and financial support for the delivery of risk communication messages with 463,526 people reached in July. As of the end of July, a cumulative total of 1,975,742 people have been reached with key messages on hygiene practices.

In the reporting period, UNICEF provided 257,633 people with access to safe water supply through rehabilitation/expansion of existing water schemes. This brings the total number of people reached since January 2021 to 3,139,263. Additionally, a total of 261,545 people were reached through provision of WASH related non-food items (NFIs) in July alone, bringing the total number of people reached with WASH NFIs to 690,319 people since January 2021. Further to the above, 26,812 people were provided access to basic sanitation facilities in July bringing the total of people reached since January to 208,366. UNICEF also provided technical and financial support for the delivery of risk communication messages with 463,526 people reached in July. As of the end of July, a cumulative total of 1,975,742 people have been reached with key messages on hygiene practices.

WASH – Northern Ethiopia Response (Tigray, Amhara, Afar)

In July, a total of 10,742 people benefited from safe water supplies through water trucking and distribution of household water treatment chemicals in Abi Adi. In addition, over 280,800 people continue to have access to safe water in host communities and IDPs in Mekelle town through 12 water trucks facilitated by UNICEF in partnership with the Ethiopian Red Cross and 9,968 people in Abi Adi health centre through UNICEF’s partnership with Action Against Hunger.

UNICEF, through its partners, distributed critical lifesaving WASH supplies to 31,895 people affected by the Tigray crisis. In Afar, 14,933 people in Dupti, Aysaita and Afambo received WASH NFIs while 16,962 were reached in Abi Adi, Wajirat (Bahri Tseba), Hawzien Wereda and Maywenyi IDP camp in Mekelle. A total 20,988 people have been reached with basic hygiene messages through public awareness campaigns using mobile audio vans, health extension workers, and community volunteers and BCC materials with a focus on COVID-19 and cholera IPC messages.
Since January, UNICEF reached 1,239,663 people with safe water provision; 72,028 people with hygiene items; and 80,500 people with sanitation.

Delivery of WASH services has been affected in Tigray since late June due to lack of access to banking services, lack of fuel and blockage of supplies, including electromechanical equipment entering the region.

Social Protection
UNICEF has been working closely with the Amhara Bureau of Labour and Social Affairs (BoLSA) to develop a targeting protocol and cash transfer manual. These have been instrumental in establishing a pilot humanitarian cash transfer response for IDPs in North Shewa and Oromo Special Zones. While the process has progressed well, targeting has been difficult as the number of IDPs is far beyond the resources available. In July, 336 IDP households (1,165 IDPs) received a lump sum cash transfer of 1,560 ETB (equivalent to the original plan of three-monthly payments of 520 ETB per person). The lump sum approach was agreed with government due to the vulnerability of the IDPs in the area. This will be expanded to additional households soon.

As part of the broader shock responsive social protection system, in July, 495 households (2,475 individuals) received cash transfers in Enebisie Sarmider Woreda, Amhara, bringing the cumulative number for 2021 to 2,198 households (11,135 individuals).

Communications for Development (C4D)
UNICEF continues to support the delivery of messages focused on COVID-19 and the COVID-19 vaccinations. During the reporting period, over 1,579,470 people were reached in Gambella (30,000), Benishangul-Gumuz (158,706), Somali (155,978), Amhara (14,856), Oromia (353,202), and Afar (160,600). Cumulatively since January 2021, 5.7 million people have been reached with COVID-19 messages were delivered via volunteers, house to house visits, and during social mobilization events. Over 577 volunteers, health workers, and community workers were trained to work on delivery of the messages.

Development of key messages and demand promotion-related guidelines/Standard Operating Procedures (SOP)/job aids is in process. COVID-19 vaccine hesitancy among health workers was highlighted during the review meeting while there has been a good demand among the other populations. Together with EPI, UNICEF conducted a small-scale qualitative assessment using behavior and social drivers (BeSD) of COVID-19 vaccines tools. This will be used for further ideation sessions with health workers in early August to promote vaccine acceptance among health workers. In addition, a BeSD qualitative assessment using a mobile phone survey is in process by VIAMO.

UNICEF conducted a two-day ‘Misinformation Management Workshop’ with a focus on COVID-19 and polio vaccines and included participants from EPHI and Ministry of Health for media monitoring and risk communication. The workshop aimed to strengthen the misinformation management and response plan around the COVID-19 and polio vaccines in Ethiopia at the national and sub-national levels through social media and community platforms.

In Tigray, the first OCV campaign was conducted in 13 woredas. UNICEF supported the social mobilization activities for the campaign via mobile van messaging. The mobilization was conducted for two weeks in Mekelle, Abiadi and Degua Temeben (Hagereselam). In this regard, the total number of people reached with OCV and hygiene promotion key messages is 708,806 in 7 sub-cities of Mekelle, Abiadi and Degua Temben. Among those reached were people in 29 IDP sites.

Additional financial resources are greatly needed to strengthen the RCCE response in all regions and to integrate feedback mechanisms to the response.

Humanitarian Leadership, Coordination and Strategy
UNICEF actively leads on humanitarian coordination in the critical areas of Nutrition, WASH, Child Protection, and Education at the national and regional levels. UNICEF is also a member of the Emergency Shelter/NFI, Food and Logistics clusters.

During the reporting period, the Child Protection Area of Responsibility (AoR) supported an emergency situation analysis and response planning in Afar and Amhara regions as the conflict in Tigray has expanded into the two regions. Hence, the Child Protection AoR was involved in the Ethiopia Humanitarian Fund (EHF) emergency reserve allocation for the three northern regions with protection response strategy focusing on support to survivors of violence and abuse, child protection/GBV case management and specialized services, development and strengthening of child protection/GBV
referral pathway for a multi-sector response. The allocation will also cover mine action interventions related to explosive ordnance threat assessments, non-technical survey and risk education as well as Victim Assistance.

The Child Protection AoR, as part of the Protection Cluster, worked on strengthening the protection early warning system and the referral pathway through the development of a partners’ operational presence/service directory, as well as an Incident Reporting Template. Both tools will be finalised and rolled in the coming month and will support gaps identification and analysis as well as an evidence-based advocacy for resource mobilisation.

UNICEF continues to lead the Nutrition Cluster at the federal level and additional support is being provided through the Programme Division in New York, Regional Office and Global Nutrition Cluster to move to sub-national level especially in the areas most affected by conflict. UNICEF participates in meetings organized by the regional/sub-regional Emergency Coordination Committee (ECC) on IDP affected areas in Amhara (Chagni, Awi Zone), and refugees (Benishangul-Gumuz and Central and Northern Gondar for refugees from Tigray). The nutrition cluster organizes regular bi-weekly Multi-Agency Nutrition Taskforce (MANTF) meetings where strategic humanitarian topics of critical importance are discussed and resolved. UNICEF also leads a strong subnational nutrition cluster in Mekelle and Shire in Tigray.

UNICEF and Save the Children continue to co-lead the federal and regional Education clusters together in support of the Ministry of Education. In Tigray, formal and informal cluster coordination meetings were held with partners and support provided to conduct additional needs assessment of accessible schools in August 2021. Two UNICEF Information Management Specialists were also deployed to Amhara and Oromia regions to strengthen data collection, analysis, and reporting capacity and facilitate advocacy and resource mobilization in ECW-supported regions.

The Education cluster supported the coordination of the Ministry’s ‘Back-to-Learning’ initiatives for the new academic year. A two-day workshop was held in late July to review and finalize a set pf national strategic documents, including guidelines on safe school reopening, communication and advocacy and psychosocial support. Additionally, a Terms of Reference (ToR) was developed for the cluster and a concept note prepared to provide institutional capacity building for two to three national NGOs.

As WASH cluster lead, UNICEF continued to oversee the Rapid Response Mechanism (RRM) delivery of WASH non-food items (NFIs) in hard-to-reach woredas in Tigray. Under UNICEF’s cluster leadership, cluster partners are providing water trucking, water scheme rehabilitation, WASH NFI distributions, improved sanitation and hygiene promotion.

UNICEF provides ongoing support for the COVID-19 outbreak preparedness and response coordination at the national and sub-national levels. In addition, UNICEF continues to support the coordination of IDPs and cholera outbreak responses across all regions.

**Funding Overview**

UNICEF Ethiopia’s 2021 revised Humanitarian Action for Children (HAC) appeal for US $248,292,024 is required to sustain life-saving and humanitarian services for women and children in Ethiopia. As of end July, US $93,593,741 has been received towards the appeal, leaving a funding gap of 62 per cent. Towards UNICEF’s appeal for the Northern Ethiopia Response in the amount of US $108,100,517, there is a significant funding gap of 66 per cent.

Without sufficient funding, over 300,000 children will not have access to formal or non-formal education and/or skills development training, including early learning opportunities, and over 94,000 children will not have access to mental health and psychosocial support. UNICEF expresses its sincere gratitude to the following donors for their valuable contributions; the UK’s FCDO, USAID, Canada, ECHO, OFDA, CERF, SIDA, Denmark, Finland and Japan.

**Human Interest Stories and External Media**

**UNICEF Ethiopia Humanitarian Response**

- **Statement by UNICEF Executive Director Henrietta Fore on reported killing of hundreds of civilians, including children, in Afar, northern Ethiopia**
- **Geneva Palais briefing note on the situation of children in Tigray**
- **Nutrition crisis grips families in Tigray**
- **Tenfold increase in number of children requiring treatment for acute malnutrition in Tigray, northern Ethiopia**
- **A woman who forced her own girls into child marriage, saves hundreds of girls today**
- **Empowering girls crucial to help protect themselves**

Next SitRep: 15 September 2021

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### Annex A
Summary of Programme Results

<table>
<thead>
<tr>
<th>Sector</th>
<th>2021 HAC Targets including Northern Ethiopia Response</th>
<th>Cumulative 2021 HAC Results including Northern Ethiopia Response</th>
<th>Northern Ethiopia Response Targets*</th>
<th>Cumulative Northern Ethiopia Response Results*</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Nutrition</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number children aged 6 to 59 months with severe acute malnutrition admitted for treatment</td>
<td>555,407</td>
<td>208,672³⁹</td>
<td>56,208</td>
<td>12,278</td>
</tr>
<tr>
<td>Number children 6-59 months receiving Vitamin A supplementation every six months</td>
<td>1,446,966</td>
<td>1,134,610</td>
<td>598,553</td>
<td>47,628</td>
</tr>
<tr>
<td>Number of primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling</td>
<td>643,081</td>
<td>239,429</td>
<td>274,727</td>
<td>47,359</td>
</tr>
<tr>
<td>Number of pregnant women receiving iron and folic acid supplementation</td>
<td>249,000</td>
<td>9,475</td>
<td>160,000</td>
<td>9,475</td>
</tr>
<tr>
<td><strong>Health</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children aged 6 to 59 months vaccinated against measles</td>
<td>824,500</td>
<td>14,004¹⁰</td>
<td>774,000</td>
<td>525¹¹</td>
</tr>
<tr>
<td>Number of children and women accessing primary health care in UNICEF-supported facilities (MHNT in Afar and Somali and provision of EDK in IDP and other vulnerable communities)</td>
<td>852,700</td>
<td>624,095</td>
<td>346,500</td>
<td>133,341</td>
</tr>
<tr>
<td>Number of health care facility staff and community health workers who received personal protective equipment</td>
<td>12,000</td>
<td>32,034</td>
<td>10,000</td>
<td>12,329</td>
</tr>
<tr>
<td>Number of people affected by cholera accessing life-saving curative interventions</td>
<td>25,800</td>
<td>1,571</td>
<td>4,800</td>
<td>-</td>
</tr>
<tr>
<td><strong>WASH</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene</td>
<td>2,252,915</td>
<td>3,139,263</td>
<td>1,502,915</td>
<td>1,239,663</td>
</tr>
<tr>
<td>Number of people accessing appropriately designed and managed latrines</td>
<td>610,000</td>
<td>208,366</td>
<td>400,000</td>
<td>80,500</td>
</tr>
<tr>
<td>Number people reached with critical water, sanitation and hygiene supplies (including hygiene items) and services</td>
<td>4,898,593</td>
<td>3,139,263</td>
<td>898,593</td>
<td>72,028</td>
</tr>
<tr>
<td>Number of people reached with key messages on hygiene practices</td>
<td>6,925,930</td>
<td>1,975,742</td>
<td>1,325,930</td>
<td>463,526</td>
</tr>
<tr>
<td>Number of facilities (treatment, isolation quarantine sites) accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene (emergency water trucking, roto tanks) to prevent COVID transmission.</td>
<td>300</td>
<td>33</td>
<td>0</td>
<td>-</td>
</tr>
<tr>
<td>Number of health care facilities with improved sanitation (this includes rehabilitation / fixing of existing latrines</td>
<td>300</td>
<td>20</td>
<td>0</td>
<td>-</td>
</tr>
</tbody>
</table>

³ The data on the number of SAM admission children admitted covers the period January to May 2021 for the other regions while it captured until end of July for Tigray.

*¹⁰ The integrated measles campaign has not yet taken place due to logistical challenges, including vaccine non-availability and operational costs.

¹¹ MHNT reports are delayed by one month.
| Number of girls and boys who have experienced violence reached by health, social work or justice/law enforcement services | 26,177 | 3,125 | 12,000 | 756 |
| Number of unaccompanied and separated children accessing family-based care or a suitable alternative | 14,800 | 5,123 | 11,000 | 3,477 |
| Number of children and caregivers accessing mental health and psychosocial support | 94,180 | 47,907 | 35,000 | 36,631 |
| Number of social workers supported with materials for self-care and messages on lifesaving / behaviour change messages on COVID-19 | 4,393 | 420 | 0 | 0 |
| Number of people reached with messaging on prevention and access to child protection/GBV services, in the context of COVID-19 | 1,487,330 | 83,926 | 0 | 44,395 |
| **Education** | | | | |
| Number of schools implementing safe school protocols (infection prevention and control) | 1,905 | 195 | 1,205 | 56 |
| Number of children accessing formal or non-formal education and/or skills development trainings, including early learning | 318,667 | 141,338 | 168,000 | 71,408 |
| Number of children receiving learning materials | 537,096 | 86,784 | 348,000 | 15,149 |
| Number of children supported with distance/home-based learning | 72,600 | 13 | - | - |
| **Social Protection** | | | | |
| Number of households reached with humanitarian cash transfers across sectors | 109,366 | 9,893 | 57,800 | 4,461 |
| **PSEA** | | | | |
| Number of people with access to safe channels to report sexual exploitation and abuse (Cross-sectoral) | 694,253 | 116,202 | 364,544 | 34,568 |
| **GBVIE** | | | | |
| Number of women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions (Cross-sectoral) | 616,132 | 127,058 | 220,000 | 44,395 |
| **Communication for Development (C4D)** | | | | |
| Number of people reached with messages on access to services | 17,231,657 | 6,085,808 | 690,000 | 830,249 |
| Number of people who shared their concerns and asked questions/clarifications to address their needs through established feedback mechanisms | 407,200 | 107,103 | 7,200 | - |

*Northern Ethiopia Response includes Tigray, Amhara and Afar response targets and results related to the Tigray crisis.

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12 This number includes the children accessing learning opportunities in Tigray region and the 59,741 primary school-age children supported with education by the Amhara REB with UNICEF support.

13 The most marginalized children affected by multiple emergencies, including COVID-19-19, have been targeted to receive learning materials in response to ensure the continuity of learning whether in temporary learning spaces or to ensure continuity of "home"-based learning which is reflected in the indicator above # children receiving learning materials.
### Annex B
2021 HAC Funding Status including Northern Ethiopia Response

<table>
<thead>
<tr>
<th>Sector</th>
<th>2021 HAC including Northern Ethiopia Response</th>
<th>Total Funds Available (USD)</th>
<th>Funding gap (USD)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Funds received in 2021</td>
<td>Carry over</td>
<td>Total</td>
</tr>
<tr>
<td>Health</td>
<td>32,594,100</td>
<td>4,013,966</td>
<td>6,761,607</td>
</tr>
<tr>
<td>Nutrition</td>
<td>72,915,205</td>
<td>14,779,504</td>
<td>15,803,290</td>
</tr>
<tr>
<td>Child Protection, GBViE, PSEA</td>
<td>22,808,032</td>
<td>6,271,314</td>
<td>6,163,683</td>
</tr>
<tr>
<td>Education</td>
<td>18,788,716</td>
<td>5,891,882</td>
<td>3,212,626</td>
</tr>
<tr>
<td>WASH</td>
<td>75,102,852</td>
<td>13,678,522</td>
<td>12,133,954</td>
</tr>
<tr>
<td>Social Protection</td>
<td>7,621,998</td>
<td>3,188,934</td>
<td>0</td>
</tr>
<tr>
<td>C4D, community engagement and AAP</td>
<td>8,830,349</td>
<td>129,600</td>
<td>0</td>
</tr>
<tr>
<td>Cluster Coordination</td>
<td>1,623,326</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Monitoring / operational cross-cutting costs</td>
<td>8,007,446</td>
<td>1,564,859</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>248,292,024</td>
<td>49,518,581</td>
<td>44,075,160</td>
</tr>
</tbody>
</table>

### Annex C
2021 Northern Ethiopia Response Funding Status

<table>
<thead>
<tr>
<th>Sector</th>
<th>2021 Northern Ethiopia Response</th>
<th>Total Funds Available</th>
<th>Funding gap (USD)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>$</td>
<td>%</td>
</tr>
<tr>
<td>Nutrition</td>
<td>25,750,984</td>
<td>10,426,100</td>
<td>15,324,884</td>
</tr>
<tr>
<td>Health</td>
<td>12,908,480</td>
<td>4,771,599</td>
<td>8,136,881</td>
</tr>
<tr>
<td>Child Protection</td>
<td>6,455,737</td>
<td>2,854,934</td>
<td>3,602,803</td>
</tr>
<tr>
<td>WASH</td>
<td>31,658,927</td>
<td>11,847,716</td>
<td>19,811,211</td>
</tr>
<tr>
<td>Education</td>
<td>11,809,115</td>
<td>3,506,141</td>
<td>8,302,974</td>
</tr>
<tr>
<td>Social Protection</td>
<td>4,729,600</td>
<td>1,382,381</td>
<td>3,347,219</td>
</tr>
<tr>
<td>PSEA</td>
<td>930,646</td>
<td>750,000</td>
<td>180,646</td>
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<td>GBViE</td>
<td>5,081,302</td>
<td>0</td>
<td>5,081,302</td>
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<td>C4D</td>
<td>768,280</td>
<td>129,600</td>
<td>638,680</td>
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<td>Monitoring / operational cross-cutting costs</td>
<td>8,007,446</td>
<td>1,564,859</td>
<td>6,442,587</td>
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<tr>
<td>Total</td>
<td>108,100,517</td>
<td>37,233,330</td>
<td>70,867,187</td>
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