Highlights

- In 2021, at least 4.2 million people were internally displaced across the country, of which nearly 50 per cent were displaced due to the conflict in Northern Ethiopia. Of these, over 2.1 million were children under 18.
- UNICEF reached nearly 4.9 million people in 2021 with clean water; about 472,000 children were treated for severe acute malnutrition; over 110,000 children and caregivers were provided with mental health and psychosocial support; over 225,000 children were supported with access to formal or non-formal education; and over 19,000 households received humanitarian cash transfers.
- UNICEF dispatched over $42.8 million worth of supplies throughout the country in 2021. Of this amount, $16.3 million worth of supplies were dispatched to Tigray, Afar and Amhara as part of the Northern Ethiopian response.

UNICEF’s Response and Funding Status

<table>
<thead>
<tr>
<th>Category</th>
<th>Measles vaccination</th>
<th>SAM admissions</th>
<th>MHPSS access</th>
<th>Education access</th>
<th>Safe water access</th>
<th>Humanitarian Cash Transfer</th>
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</tbody>
</table>

Funding Status (in US$)

- **Funds received, $120,690,908** (48%)
- **Funding gap, $83,525,956** (34%)
- **Carry-forward, $44,075,160** (18%)
Situation Overview and Humanitarian Needs

The humanitarian situation across many parts of Ethiopia in 2021 was characterized by conflicts, inter-communal violence, drought, COVID-19, flash flooding and desert locust infestation, with a significant increase in internal displacement and people in need of assistance as compared to 2020. According to the International Organization for Migration (IOM)^1, as of September 2021, a total of 4.2 million internally displaced persons (IDPs) had been identified across the country, of which 2.1 million were displaced in Afar, Amhara and Tigray due to the conflict in the Northern Ethiopia. 43 per cent of these IDPs in North Ethiopia are children. Out of the total people displaced, over 2.1 million were children under 18 accounted for half the displaced population. Across the country, out of the total 4.2 million IDPs, 3.5 million (85%) were displaced due to conflict, 307,871 (7%) due to drought, and 139,199 (3%) were displaced due to seasonal floods.

The humanitarian situation in the northern regions of Tigray, Amhara and Afar significantly deteriorated over the course of 2021. In Tigray, restrictions on the flow of humanitarian supplies into the region, limitations of fuel and access to cash, telecommunications and power blackouts greatly hampered humanitarian operations and contributed to a worsening situation for children and women. DTM Emergency Site Assessment Round 8 (October 2021) identified over 1.8 million IDPs residing in 581 accessible sites, including 79 schools across Tigray. The assessment also identified about 150,000 IDPs in Afar and over 151,000 IDPs in Amhara. Of the total IDPs across the three regions, approximately 43 per cent are children and 51 per cent are female^3.

Across Tigray, Amhara and Afar, of 8,145 schools assessed, 1,665 schools were fully damaged, 4,458 were partially damaged and over 2,000 schools were closed. A damage assessment conducted in August across 2,054 schools, health, education and water facilities in Tigray showed an unprecedented level of destruction and lack of functionality of basic services. As a result, over 3.5 million people do not have access to safe drinking water while 70 per cent of the health facilities were severely affected (damaged and looted); 2.4 million school-aged children (between 5 to 18 years old) could not access formal education; an estimated 575 schools were destroyed and over 1,000 schools were found to have significant to moderate structural damage. In Amhara, based on reports received from regional authorities, 52 per cent of the government health facilities (40 hospitals, 453 health centers and 1,850 health posts) are non-functional. This has led to 160,000 children missing out on routine vaccinations since July 2021. In addition, over 4,100 schools (42% of schools in the region) were reportedly damaged and looted, interrupting education services for 1.9 million children (50% girls). Similarly, in Afar, the Regional Education Bureau (REB) reported that over 150,000 students (45% girls) are directly or indirectly affected with 65 schools reported to be totally damaged and 138 schools partially damaged as a result of the spillover of the conflict in the North. Over 320 schools in zones 1,2,4 and 5 remained closed as of the time of this report, forcing 57,000 students to be out of school. Water, sanitation and hygiene (WASH) assessments in the region also indicated significant damage to water supply infrastructures, with up to 57 per cent of the boreholes reported as non-functional due to damage/looting as a result of the Northern Ethiopia conflict.

In Oromia, severe drought in 2021 extended to the lowland areas of Borena, Guji, East Hararghe, West Hararghe, Bale, East Bale and the West Guji zones. Based on the ‘Meher’ assessment report, the average number of people in need of humanitarian assistance due to the drought is 2.8 million. In the Zones affected by drought, massive death of livestock and depletion of livestock products was reported which directly impacts the nutritional status of children and women. With the usual low rainfall expected after four months (end of March 2022), there is a risk of more worsening and devastating condition. The Regional Disaster Risk Management Commission (DRMC) reported that 2.2 million people in the seven zones and 55 woredas remain affected by water scarcity. Altogether, 904 water schemes are non-functional, 217 schools in Borena, East Bale and Guji are closed, directly affecting over 25,000 students. Another 793 schools are at high risk of closure due to the drought, leaving over 577,000 students at risk of school drop-out. Compounding the drought in 2021 were several active conflicts and damaging and looting of 91 health facilities in Guji, West Guji, West Wollega, East Wollega, Kellem Wollega and Horaguduru Wollega zones, which impacted the provision of basic health services. Furthermore, 956 schools in 47 woredas were forced to close due to insecurity, leading to over 249,000 students missing out on an education.

In Somali, in addition to a worsening drought, the region experienced flooding, inter-communal conflict and food insecurity throughout the year. According to a recent ‘Deyr’ Assessment report, nearly 2.3 million people in Somali are in need of humanitarian assistance across 86 woredas due to the drought. The needs of 24,000 displaced persons were further aggravated by flash flooding in April and May, and another 32,000 displaced plus 160,000 host community members were affected by Somali-Afar inter-communal clashes.

Oromia and Somali regions together account for 60 per cent of the annual Severe Acute Malnutrition (SAM) caseload, and UNICEF is projecting up to 10 per cent increase in SAM caseload due to the drought crisis. In Tigray, Amhara and Afar, the conflict remains active in some pocket woredas, while the devastation of the conflict from 2021 is now being reported through inter-agency assessments, which project a 20 per cent increase in SAM admissions in 2022.

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^1 National Displacement Report 10 (August - September 2021)
^2 DTM Ethiopia Site Assessment Round 27 and DTM Ethiopia Emergency Site Assessment Round 8
^3 Regional authorities in Afar and Amhara have reported that due to the expansion of the Tigray conflict into their respective regions in November and December, there are now 1.4 million people displaced in Amhara and 377,000 displaced people in Afar.
In Benishangul Gumuz, sporadic conflict across 16 woredas in Metekel, Kamashi and Assosa zones left over 440,000 people displaced, as reported by the Regional Disaster Risk Management Commission (DRMC). This number decreased to 288,000 in December 2021 with the return of IDPs to their places of origin due to relative improvement in the security situation. Of the total number of IDPs, 50,207 (17.40%) are children under five years of age and 18,792 (6.5%) are Pregnant and Lactating Women (PLW). Due to the ethnic based conflict, 16 woredas are affected (7 woredas from Metekel zone, 6 woredas from Kamashi zone and 4 woredas from Assosa zone). Based on regional government reports, 97 Health Posts and six Health Centers were partially damaged, 42 primary schools and five secondary schools were partially damaged, and 103 primary and six secondary schools were fully damaged in the seven-conflict affected woredas of Metekel zone. At present, the security situation in Metekel zone has relatively improved, however the situation in Kamashi zone and some woredas of Assosa zone continue to be fragile and unpredictable. According to the Regional Health Bureau, 64 per cent of health facilities in Kamashi and Metekel zone are not providing routine health and nutrition services. Out of 190 health facilities (3 hospitals, 22 health center and 165 health post) in the seven-conflict affected woredas of Metekel zone, only 88 health facilities are functional (3 hospitals, 16 health centers and 69 health posts) while 102 health facilities are inaccessible. In Kamashi zone, out of 60 health facilities (8 health centers and 52 health posts), only 2 health centers are functional, and 58 health facilities are inaccessible.

In Gambella, flooding impacted the health, sanitation, and livelihoods of most communities. According to the Regional DRMC, over 28,500 people in Lare, Jor, Jikawo, Gog, Makuey, Itang, Wanthawo and Abobo woredas were affected by floods from June to September 2021. Of those affected, 13,500 were displaced and require urgent humanitarian assistance. In all, 37 water schemes were damaged, leaving over 92,000 people with no access to clean and safe water. In addition, 52 schools were damaged, affecting over 18,500 students.

As the third-largest refugee-hosting country in Africa, Ethiopia is sheltering over 800,000 registered refugees and asylum-seekers as of 31 December 2021. The overwhelming majority originate from South Sudan, Somalia and Eritrea. To date, 10,892 refugees have received COVID-19 vaccines; 6,152 refugees are now fully vaccinated. Refugee needs vary across the regions. While Gambella and Somali host the largest refugee populations in Ethiopia, the refugees in Tigray were severely affected in 2021 by the ongoing war, suffering from extreme hunger, grave violations against human rights and other protection risks. After two refugee camps (Hitsats and Shimbella) were destroyed, the number of refugees in Tigray reduced from 90,000 to 25,000, with most refugees located in the two camps of Adi-Arush and Mai-Ayni. In addition, lack of access to basic services and humanitarian aid deliveries are some of the top priorities especially in Tigray, with many of the rural areas inaccessible and several urban locations not reachable for several months at a time. Armed conflict and arbitrary denial of access by armed forces remains the main access impediment.

By the end of 2021, Ethiopia saw a cumulative total of 420,342 confirmed COVID-19 cases and 6,937 deaths (Case Fatality Rate (CFR) of 1.65%) since the onset of the outbreak in March 2020. A total of 355,046 (84.5%) patients were reported to have recovered and 290 severe COVID-19 cases were admitted in designated treatment centers. The trend of COVID-19 positive cases increased in December compared to previous months and indicates a fourth wave of the pandemic which might be related to the Omicron variant. Altogether, as of 31 December, a total of 10,916,152 COVID-19 vaccine doses had been administered to a total of 9,344,163 people (8% of target). By the end of the year, Ethiopia had received over 22.9 million doses of COVID vaccines, with 18.8 million doses in pipeline.

Further to COVID-19, a total of 4,539 suspected measles cases and 25 deaths were reported across the country in 2021, in addition to seven confirmed Polio (cVDPV2 AFP) cases and 2,132 cholera cases, including 18 deaths (14% children under five).

Summary Analysis of Programme Response

Child Protection
As the humanitarian situation of conflict inducing IDPs, returnees and host communities evolved throughout the year, UNICEF worked closely with the Government and 15 NGO partners at the national and regional levels to respond to the specific child protection needs of internally displaced or returnee and refugee children.

From January to December 2021, UNICEF supported the Bureau of Women and Social Affairs (BoWSA) and NGO partners (Imagine 1 Day, IMC, Organization for Welfare and Development in Action, OWS Development Fund, Plan International and World Vision) ensuring the continued delivery of child protection services in emergency affected woredas through a coordinated case management system and deployment of qualified social service workers.

A Child Protection case management system was established and strengthened in more than 50 woredas in Amhara, Benishangul Gumuz, Oromia, Somali, Gambella, and SNNPR for identification and responding to cases of violence including facilitation of family tracing and reunification or alternative care services for unaccompanied and separated children (UASC).

As part of strengthening the child protection case management system, UNICEF also supported the deployment 250 qualified social workers and community service workers within woreda level Women and Social Affairs offices. The capacities of these social workers were built on a set of skills required for managing cases of vulnerable children
UNICEF supported partners to establish and strengthen community-based child protection mechanisms. A total of 350 members of these structures across all regions were trained to facilitate the prevention and response to abuse, neglect, exploitation, and violence against children at community level and their capacities were improved for identifying and referring children and families for basic and specialized services.

From January to December 2021, over 5,600 children (2,900 girls and 2,700 boys) who experienced violence were reached by health, social work and legal/law enforcement services in Amhara, Benishangul Gumuz, Oromia, Somali, Gambella, and SNNPR. In addition, over 3,000 children (1,350 girls and 1,650 boys) were reunified with their families/primary caregivers and placed in alternative care arrangements.

Recognizing the increase of psychosocial distress in the emergency affected areas, UNICEF strengthened the capacities of frontline workers with Mental Health and Psychosocial Support (MHPSS). MHPSS and Psychological First Aid training was provided to 50 child protection staff and social workers from both government and NGO partners. The training equipped these front liners with the knowledge and skills required 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.

A total of 30,122 children and care givers were reached through community-based mental health and psychosocial support interventions facilitated through safe spaces, peer/group support activities, socio emotional learning and parenting skill education sessions Amhara, Benishangul Gumuz, Oromia, Somali, Gambella, and SNNPR. Out of the total children reached, 29,994 were reached with child protection services through ‘Bete’ integrated programme by four NGO partners in four regions (in addition to the Northern Response). ‘Bete’, meaning ‘My Home’ in Amharic, is a joint education and child protection initiative designed to provide a safe space for boys and girls living in the midst of humanitarian emergencies in Ethiopia, including IDPs, refugees and their host communities. It integrates accelerated learning, child protection (psychosocial support and case management) and skills development for adolescents.

UNICEF strengthened communities’ ability to monitor and address gender-based violence (GBV) risks and to provide children and their caregivers with information on where and how they can seek support. Throughout 2021, 59,803 children and caregivers, (27,019 female and 32,784 male) were provided with gender-based violence (GBV) risk mitigation, prevention, and response services. The awareness-raising sessions focused on information on intimate partner violence, sexual exploitation, benefits of early reporting of GBV incidents (within 72 hours), where to report risks/threats and how to access GBV response services. These interventions have contributed to the increase in reports/referrals of cases. UNICEF supported 187 survivors of GBV to access multisectoral services.

To enable reporting on sexual exploitation and abuse (SEA), safe and confidential reporting mechanisms for management of protection against sexual exploitation and abuse (PSEA) cases were established. A total of 61,104 community members were provided with access to safe and accessible channels to report SEA.

In addition, 42 partner staff (17 female and 25 male) and 160 social workers/volunteers (93 female and 67 male) were trained on PSEA in Gambella and Dolo Ado refugee camps. The training focused on basic concepts of GBV, SEA, Inter-Agency Standing Committee (IASC) core principles to properly mitigate, prevent, and respond to SEA. In all, 15 female caseworkers were trained to address the specific complexities of SEA, such as barriers to reporting SEA cases, understanding and addressing survivors’ fear of retaliation and needs. The training intended to improve the knowledge, skills, and attitudes of case workers while addressing SEA cases. In all, 10,251 IDPs and refugees in Oromia, Somali, Benishangul Gumuz and Gambella received information on PSEA key messages through pictorial billboard stickers and posters.

**Child Protection - Northern Ethiopia Response (Tigray, Amhara, Afar)**

A total of 244,529 girls, boys, women and men across the three conflict-affected regions (Tigray, Amhara and Afar) were reached with child protection and GBV prevention and response services including GBV risk mitigation and response interventions, case management services, support to GBV survivors and UASC, as well as MHPSS for children and their caregivers and PSEA.

In 2021, UNICEF together with Child Protection partners continued to provide protection services to children and their caregivers affected by the crisis. In 2021, a total of 89,072 children and caregivers (40,974 girls) received MHPSS services. This included 393 children (260 girls) in Afar region, 10,121 children and caregivers (1,261 girls) in Amhara and 73,226 children and caregivers (40,014 girls) in Tigray regions. MHPSS services included group counselling, individual counselling, recreational activities at child friendly spaces (CFS) and specialized and non-specialized services managed by social workers, CFS facilitators, professional psychologists, and psychiatrists, the service delivery modality depends on individual and group counselling activities. Through the ‘Betè’ approach, psychosocial support services (including UASC), through consecutive trainings and on the job mentoring sessions. These social workers were also provided with personal protective equipment for self-care and messages on lifesaving/ behaviour change messages so that they do their job safely.

To help ensure that children received coordinated support though case management services, UNICEF also supported development of referral pathways across all targeted emergency affected woredas.
and case management are often linked to Education in Emergencies programmes. In the Northern Response, four NGO partners are implementing ‘Bete’ and thereby ensuring an integrated and multi-sectoral approach.

Through activating the rapid deployment model, 35 consultants (20 social workers, 12 psychologists, 3 psychiatry professionals) were engaged in 13 towns in South Wollo, South Gondar, North Gondar and North Shoal zones as part of MHPSS response. The deployment was made in coordination with the MHPSS units of the Ethiopian Public Health Institute and the Amhara Public Health Institute. The consultants were deployed in hospitals, IDP sites and one stop centers with a focus to support restoration and provision of MHPSS services to survivors of GBV and broadly to children and women survivors of violence. The day-to-day services of these consultants were coordinated and managed by the facilities they are deployed in while a common reporting mechanism and nationally agreed set of indicators were used to track services provided. A pre-deployment orientation was provided to the consultants in Addis Ababa by Ethiopian Psychologists Association (EPA) on integrated delivery of mental health and psychosocial support covering topics such as MHPSS case-flow, GBV, trauma informed care, common psychological interventions and self-care. EPA will follow-up with the consultants through weekly telephone supervisions and monthly in-person supervision visits to quality assure services and provide on-the-job technical support.

Across Tigray, Amhara and Afar a total of 6,043 UASC were identified and registered, of which over 3,900 were supported with reunification and/or alternative family-based care arrangements.

In Tigray region, 1,029 girls and boys who have experienced violence were reached by health, social work, and law enforcement services. A total of 3,299 UASC were supported with family reunification and alternative care services by UNICEF partners, including 218 who were reunified with their families. Family tracing and reunification was challenged, however, due to communication blackout and shortage of fuel for transportation to visit communities for active tracing. Services for UASC were insufficient and were focused on identification and registration. Moreover, partners reported constraints in the alternative care activity as families have not able to cope with supporting additional children with food and cash due to receiving limited humanitarian assistance for several months in 2021.

In Amhara, 2,077 children (575 girls) were provided with child protection case management services. In addition, 1,477 UASC were identified, and of these 591 children were reunified and placed in alternative care. In Afar region, 39 children (22 girls) were placed under alternative care arrangement. In Amhara and Afar regions, UNICEF is expanding partnerships with several NGOs and the total number of UASCs to be identified in conflict affected woredas of the regions is expected to be higher. In order to harmonize partners approach towards family tracing and reunification/alternative care, UNICEF also supported the Child Protection Area of Responsibility (AoR) in developing a family tracing and reunification/alternative care SOP for Northern Ethiopia Response.

In Tigray, 1,163 GBV survivors were provided with case management, medical and psychosocial services since the beginning of the conflict, including amongst IDPs, host communities and refugee camps populations. In addition, 48 GBV survivors (37 women and 11 girls) in Amhara region were referred for multisectoral response services. Overall, reporting and help-seeking behaviour of GBV survivors continues to be low, as stigma and fear of harassment or repeat attacks inhibit survivors from seeking support. In Afar Region, UNICEF in collaboration with partners has furnished and strengthened a women and girls-friendly space in Yallo woreda, for provision of psychosocial support to women and girls and raising awareness of availability of services. Trained social workers were assigned in the spaces to provide services as needed, including on GBV case management and psychological first aid. A total of 155 women and girls received services in these women and girl-friendly spaces.

In all, 114,772 women, men, girls, and boys accessed GBV risk mitigation, prevention, or response interventions. This included 6,483 refugees in May Ayni and Adi Harush refugee camps until June, as well as 98,148 IDPs across conflict affected areas of Tigray, 8,939 in Amhara and 1,202 in Afar regions. Activities provided by partners included awareness-raising on GBV consequences and available services.

Since the start of interventions in 2021, 36,388 Dignity Kits and other material support were provided to women and adolescent girls across the three regions as part of GBV risk mitigation efforts. UNICEF also supported capacity building of partners on GBV response and risk mitigation, especially on GBV case management where a training was provided to 59 frontline service providers from eight partners.

Furthermore, UNICEF provided coordination support with government and NGO partners during the celebration of 16 days of activism to end violence against women and girls. Series of small events were organized and aimed at raising awareness of services and provision of food and non-food items focused on addressing women and girl’s needs, distributed to GBV survivors and others at risk of violence.

Given the declining humanitarian situation, sexual exploitation and abuse risks significantly increased throughout the year. UNICEF stepped up efforts to support the wider humanitarian community, engaging as co-chair for the Mekelle and Shire hubs PSEA networks. Furthermore, UNICEF partners engaged 39,345 people through PSEA awareness.

4 Co-chaired with UNHCR
raising interventions utilising inclusive awareness raising materials development by the PSEA network and translated into Tigrigna.

**Child Protection Area of Responsibility**

In 2021, the Child Protection Area of Responsibility (AoR) along with the GBV AoR developed a number of strategic documents to ensure the coordination is grounded in the national legal framework for the protection of children and women and is in line with humanitarian principles and national strategies. Among others, a two-year (2021-2022) strategy was developed in consultation with members as well as a work plan and a monitoring framework for the same period.

During 2021, with the increased cases of UASC and with the support of UNICEF, Standard Operating Procedures for support to UASC were developed. The document was initially developed for Tigray but was later extended to cover the situation of UASC in Afar and Amhara in the light of the Northern Ethiopia conflict dynamic. The AoR also worked and issued minimum standards for Child Friendly Spaces building on the Minimum Standards for Child Protection in Humanitarian Action in order to improve the quality of response and interventions provided to children and caregivers in the safe spaces. Integration work with the Education Cluster began through the organization of a virtual round table on the subject and partners from both sectors have agreed to strengthen this collaboration, including through a joint response framework.

Finally, the AoR also contributed to the inter-agency 2022 Humanitarian Needs Overview (HNO) process, which started in the latter part of 2021, highlighting the particular needs of adolescent girls and children with disability in emergencies, as well as children affected by armed conflict, among other vulnerabilities affecting children in Ethiopia.

**Nutrition**

In 2021, UNICEF provided lifesaving therapeutic and preventative nutrition services to IDPs, refugees and vulnerable host populations across the country. Over 471,923 children with severe acute malnutrition (SAM) were admitted and treated with performance indicators within SPHERE standards (about 90% cure rate, 0.2% death rate and 3.1% default rate and 6.5% non-recovered rate). Over 3.3 million children aged 6-59 months received vitamin A supplementation (VAS) in the first semester (January-June) and over 1.5 million children received VAS in the second semester (July-Dec). A total of 434,105 pregnant and lactating women (PLW) received infant and young child feeding (IYCF) counselling services and 758,032 pregnant women received folic acid. UNICEF delivered about $40 million worth of ready-to-use-therapeutic food (RUTF), therapeutic milk and medicines, including 20 per cent local procurement to ensure timely and adequate treatment of children.

UNICEF Nutrition partners in coordination with government counterparts at the federal, regional and zonal levels drove the emergency nutrition response, including leadership and coordination of the response; strengthening the response through deployment of MHNTs; scaling up ‘Find and Treat’ campaign, rolling out a family/mother Mid Upper Arm Circumference (MUAC) approach (this entails early detection of acute malnutrition using a MUAC strip by caregivers/mothers at home and referral to a treatment center); and deploying 42 Emergency Nutrition Officers (ENOs) across the country, particularly in conflict-affected areas. The presence of third-party ENOs provided strong sub-regional capacity for effective coordination mechanisms through the decentralized clusters. SAM treatment was delivered through 19,533 treatment sites (17,241 outpatient treatment programs (OTPs) and 2,292 stabilization centers (SCs)), complemented by more than 100 MHNTs in hard-to-reach areas in Somali, Tigray, Amhara and Afar regions.

In Benishangul Gumuz, over 1,800 children with SAM were admitted for treatment. UNICEF provided 1,850 cartons of high energy biscuits (HEB) 2,679 cartons of RUTF, 250 cartons of F75 therapeutic milk and 23 cartons of F100 therapeutic milk for emergency nutrition services in 2021.

In Gambella, over 1,400 children with SAM including refugees were admitted to nutrition service delivery sites. In addition to treatment, technical support was also provided to health and nutrition workers in 35 health facilities (reaching 43 staff health workers per visit). Technical support on guidelines and documentation, supply utilization, and transportation support in mobilizing the supplies was also provided.

In Southern Nations Nationalities and People’s Region (SNNPR) and Sidama, a total of 49,997 SAM cases in SNNPR and 13,185 in Sidama region were admitted to OTPs and SCs. Compared to the previous year, SAM admission in SNNPR and Sidama increased by 32 per cent over the course of 2021. The increase in SAM cases can be partly attributed to the change in admission criteria, as well as the deterioration in food security in both regions. UNICEF ENOs provided technical support for the management of SAM and IYCF in the context of COVID-19 and Open Data Kit (ODK) database utilization.

With support from UNICEF, in Somali 89,724 children were reached with SAM treatment through continued capacity development of service providers (over 269 staff), health supply pipeline and continued monitoring through third party

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5 It is expected that the 2022 Humanitarian Needs overview (HNO) will be released during Q1 of 2022.

6 December data is still being compiled by the Government and expected to top 500,000 children when finalized.
ENOs. Two rounds of MUAC screening/VAS across all 93 woredas were conducted in six months intervals through the Regional Health Bureau (RHB) with over 80 per cent coverage.

One of the key challenges faced during the year was delayed resource mobilization. This affected UNICEF’s ability to deliver RUTF and other supplies on quarterly basis and instead resorted to monthly distribution, which put such a large-scale national programme under intense logistics distress. The revolving buffer stock was also depleted and unreplenished, greatly affecting planning of responses.

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

In 2021, UNICEF and partners across the three northern regions reached 100,921 children with SAM treatment, over 1.9 million children received VAS in the first semester of the year (January - June) and 860,756 children received VAS in the second semester (July - December); 234,546 primary caregivers of children aged 0 to 23 months received IYCF counselling services; and 312,456 pregnant women received iron and folic acid supplementation.

In Tigray, UNICEF focused on the provision of life saving nutrition services for children under five and pregnant and lactating women. UNICEF and partners screened 824,771 children under five and supported the treatment of 36,482 children with SAM. This achievement, which is reported across 95 sites, is significantly higher compared to 10,933 recorded in 2020 for a similar period reported across 823 sites. UNICEF continued to support the provision of supplies for SAM treatment and procured and distributed about 40,000 RUTF cartons, 300 cartons of F-75 and 100 cartons of F-100 for the treatment of SAM in the region. UNICEF and partners also reached 224,881 caregivers, pregnant and lactating women with IYCF counselling. Thirty MHNTs were established to provide services in health facilities that were damaged and unable to sustain services. UNICEF also provided technical support through third party ENOs and partnerships with eight international non-governmental organisations (INGOs) in 40 out of the 93 woredas in the region. One of the key challenges faced in Tigray was delayed programme implementation by UNICEF partners due to shortages of fuel and cash. Last mile distribution was impacted and shortages of RUTF were reported in some woredas from time to time. The telephone line interruptions also affected reporting. UNICEF used the ENO’s to manually collect reports from woredas and sent to Mekelle through the local commercial transport system for compilation.

In Amhara, a total of 44,478 children suffering from SAM were admitted for treatment in OTPs and SC programmes within the region. The admission rate decreased by 13.2 per cent compared to the previous year, possibly linked to lack of access into areas which used to report high number of SAM cases in previous years. Over 470 health workers received training on SAM management in conflict-affected woredas to strengthen and establish SCs in both IDP and host communities, while over 520 health extension workers received IMAM training focused on OTP management and IYCF counselling.

In Afar, a total of 19,961 children were admitted to Therapeutic Feeding Programmes (TFPs) and treated for SAM. Of these, 586 children (3%) received inpatient treatment for complicated and severe acute malnutrition. Out of the total admitted children, 82.5 per cent were cured, with a 2.6 per cent fatality and 1.4 per cent defaulter rate. UNICEF deployed an additional 10 MHNTs in response to the existing 20 MHNT (a total of 30) that provide lifesaving mobile health and nutrition services in hard-to-reach areas of the region.

**Nutrition Cluster**

The nutrition cluster in coordination with 33 active partners anticipated that the consequences of climate induced shocks and intercommunal conflicts would result in an increased number of children and pregnant and lactating women facing acute malnutrition in 2021. Accordingly, seven million children and PLWs were estimated to suffer from global acute malnutrition and the cluster targeted 3.5 million (0.5 million SAM, 2 million moderate acute malnutrition (MAM) for children under five and 1 million MAM for PLWs). To manage these caseloads, nutrition partners required a total of US $181 million. By the end of 2021, nutrition cluster partners had reached 79.4 per cent of the target for SAM management in children under five with 48.9 per cent funding against the requirements.

Nutrition cluster meetings were held fortnightly with participation from government counterparts, major donors (ECHO, DFID and USAID/BHA), international and national INGOs. Major agenda items discussed included nutrition and food security situation updates focusing on northern Ethiopia, drought and conflict affected parts of the country, Ethiopia Humanitarian Fund (EHF) / Central Emergency Response Fund (CERF) allocations, Humanitarian Needs Overview (HNO) / Humanitarian Response Plan (HRP) and other major issues.

Among the key deliverables in 2021 included the development and revision of the Northern Ethiopia Response Plan and 2021 HRP, both of which guided partners on nutrition implementation. The nutrition cluster conducted the 2021 Cluster coordination performance monitoring (CCPM) which will be finalized in 2022 with a workshop to contextualize and action the findings.

Further to the above, the Nutrition cluster supported the government in conducting two rounds of woreda ‘hotspot’ classification exercises undertaken in January and July, following the main rainy seasons. The outcome of the exercise was used to prioritize woredas for response and advocacy.
Due to challenges in conducting a nutrition assessment in northern Ethiopia, specifically in Tigray region due to the ongoing conflict, the cluster developed a nutrition assessment guidance tool to determine the type of nutrition assessment (complete SMART survey, rapid SMART survey or rapid nutrition assessment using MUAC only) to be conducted in situations where access is difficult.

Over 2021, the Nutrition cluster coordinated more than 15 SMART surveys to assess the nutrition situation in drought and conflict affected areas throughout the country.

Further to the above, the Nutrition cluster compiled monthly admission of TFP data and produced monthly synopsis and shared with partners and donors while also contributing inputs to the nutrition situation in the OCHA northern Ethiopia weekly sitrep.

With the support from the SMART initiative, Global Technical Alliance and Action Against Hunger, the Nutrition cluster organized three rounds of training for SMART survey managers whereby 58 participants (11 female) were from Government, UN agencies and NGOs participated. Based on the post training evaluation 15 participants (26%) received ‘Distinction’, 31 participants (52%) ‘Passed’ and 12 participants (20%) ‘Participated’.

Several major challenges were faced over the year, including inaccessibility of partners to conflict affected parts of Northern Ethiopia, which prevented a humanitarian response for several months. Additionally, due to the limited capacity of partners and operational challenges, the full scale of needs could not be met. Only 48.9 per cent of the funding required were received in 2021 limiting the availability of lifesaving commodities such as RUTF and prompting the partners to prioritize.

**Education**

In 2021, UNICEF in collaboration with nine partners (International Rescue Committee, Imagine 1 Day, Norwegian Refugee Council, Save the Children International, Geneva Global Ethiopia, World Vision International, Edukan Foundation, Organization for Welfare and Development in Action, and Plan International) provided education assistance for over 300,000 children with access to learning opportunities through safe and protective learning environments by providing formal or non-formal education services opportunities, as well as recreational and learning materials. In addition, a total of 103,403 children gained access to formal and non-formal school readiness programmes.

In 2021, over 31,000 children (49% girls) were reached through the provision of integrated education and child protection services (‘Bete’ approach) in Afar, Amhara, Benishangul Gumuz, Oromia, SNNPR, Tigray, in partnership with Edukan Foundation, Plan International, Imagine One Day, World Vision and the Regional Education Bureaus, including 28,181 children who benefitted from the programme in regions (Afar, Amhara, Tigray) affected by the Northern Ethiopia conflict.

In 2021, the Education Cannot Wait Early Childhood Development Project (‘ECW ECD Project’) began the transition from the inception phase (2020) toward implementation phase in key phased process in partnerships with the Ministry of Education (MoE), Amhara, Oromia and Benishangul Gumuz Regional Education Bureaus (REBs) and Colleague of Teachers Education. Despite well-documented constraints due to the global COVID-19 pandemic and government restrictions due to insecurity, the project implemented foundational activities in 2021 to improve the existing international, national and sub-national Early Childhood Education (ECE) networks and to make play-based ECE more central to education in emergencies. UNICEF collaborated with local community leaders and Regional Education Bureaus to expand their perception of play-based learning and to reflect on ways to promote active learning at local/ regional/national level. Regional level steering committees were created, woreda-level discussions on the importance of play-based early learning were conducted and baseline assessment tools were developed to drive advocacy agenda.

UNICEF, as co-grantee of the Education Cannot Wait Multi-Year Resilience Programme, provided assistance for children in Amhara and Oromia in partnership with NGO partners and REB. Nearly 15,000 children (47% girls) benefitted from the provision of learning spaces, WASH in school facilities, teaching and learning materials (TLM), school feeding support, and teacher training, while over 21,000 children (46% girls) were supported through TLM provision by REBs.

UNICEF implemented three projects to strengthen drought preparedness in Afar, Somali, SNNPR to support the provision of water tanks and rehabilitation of water points in schools and provide cash-based assistance for children from vulnerable households. A total of 23,835 children (50% girls) and 71 schools were supported. This included 9,589 children (51% girls) and 27 schools in Afar, 9,846 children (48% girls) and 28 schools in Somali, and 4,400 children (52% girls) and 16 schools in SNNPR.

In Konso zone of SNNPR, UNICEF together with partner Imagine 1 Day, supported 2,146 conflict-affected young children (1,131 girls) to access the Accelerated School Readiness (ASR) Programme. In November 2021, UNICEF and Imagine 1 Day started support for the Accelerated Learning Programme (ALP) for 1,759 students (907 girls) in Konso zone and 65 ALP facilitators (21 female) received training on the condensed and semi-condensed flexible curriculum materials and interactive pedagogy.

In Benishangul Gumuz, UNICEF in partnership with the REB supported the training of 30 school directors and 30 female gender club focal persons, 56 teachers from 35 schools in Bildigilu, Mange, and Undul woredas, and 6 educational
officials from the REB on the contents and implementation of life-skills education; 2,800 children (2,100 girls), of which 933 are displaced or returnees, will benefit from life skills education provided by the trainees.

In Afar, UNICEF implemented integrated education and child protection programmes in partnership with Edukans Foundation. While the programme implementation was negatively impacted by insecurity and access challenges, site selection for five semi-permanent learning spaces was finalized in Awash-Fentale and Dubti woredas. The selection process in the remaining targeted woredas (Megale, Koneba and Berhale) remains pending due to insecurity. UNICEF and Edukans Foundation also supported the development of life-skills education manuals for children aged 7-10 and 11-14, respectively. The distribution of 4,000 USB flashcards with 500 audio lessons commenced in December 2021 and will continue into 2022.

In Somali, UNICEF with partner Geneva Global Ethiopia and Organization for Welfare and Development in Action launched a 10-month project to support the provision of ALP (Speed Schools) for 2,750 out-of-school adolescents aged 9-14 in in IDP and host communities in Babile woreda in Jijiga.

In Oromia, UNICEF with partner Imagine 1 Day, supported the implementation of integrated education and child protection services based on ‘Bete’ approach. In November, construction of TLS started and scholastic materials were distributed in 10 selected woredas; over 15,000 emergency-affected children accessed integrated education and child protection services.

With funding from ECW Multi-Year Resilience Programme, UNICEF in collaboration with 10 REBs enhanced the capacity of 770 education managers, education experts on Education in Emergencies (EIE) planning, implementation, monitoring and reporting capacity. In addition, a series of training workshops for 1,850 teachers and School Directors in Amhara, SNNPR and Tigray was provided, which will benefit 92,500 conflict-affected primary school IDP children with Psychosocial Support and Social Emotional Learning, peace building and social cohesion and life skills support.

Since June 2021, UNICEF contributed over US$ 1.8 million to provide furniture, innovative/local tents, recreational and learning materials, solar radios, COVID-19 preventive supplies, schools-in-a-cartoon, recreational and ECD kits-in-a-cartoon to restore education of affected children in Tigray, Amhara, Afar, SNNPR, Benishangul Gumuz, Oromia and Gambella.

As part of UNICEF’s ongoing assistance to MoE and REBs‘ communication and advocacy efforts for promoting safe back-to-school/learning initiative, UNICEF procured and dispatched 30,000 school bags with individual learning materials to Amhara, SNNPR, Afar, Gambella and Oromia. An additional 100,000 school bags to support the back to learning campaign were ordered but due to global logistics challenges delivery has been delayed.

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

In 2021, UNICEF reached a total of 108,610 children (50% girls) in Tigray (35,229), Amhara (68,555), and Afar (4,826) through TLS, learning materials and other programme activities in partnership with Imagine 1 Day, International Rescue Committee (IRC), Norwegian Refugee Council (NRC), World Vision, Plan International, and with REBs.

UNICEF continued to provide pre-primary and non-formal education to IDP children and members of the host community to bridge the gap while schools remain closed in Tigray. A total of 25,591 children were reached with age-appropriate non-formal learning through a combination of Early Childhood Care and Development (ECCD), ASR and ALP. The combination of learning programmes provided follows a lifecycle approach, with 4,280 children (2,187 girls) aged 5 to 6 reached through ECCD, 8,063 children (3,903 girls) aged 6 to 7 reached with ASR, and 13,248 (6,589 girls) aged 7 to 14 reached with ALP classes.

To improve the quality of learning, 460 facilitators and teachers from IDP and host community schools in Tigray gained improved skills on education in emergencies and basic teaching methodologies through training received from INGO partners. In addition, 181 TLS were established in IDP sites and schools where many IDPs are hosted by the community. A total of 21,905 children (41% girls) were reached with teaching, learning and scholastic materials. In Shire, 55 solar radios and outdoor play materials for recreational activities and play based learning were distributed to five education facilities within the IDP sites. Following the integrated education and child-protection ‘Gezay’ approach, 230 ALP facilitators also gained skills on MHPSS and PFA through training received from Imagine 1 Day and IRC. Cumulatively, 246 ALP facilitators and education partners were trained on integrated child protection and education programming through direct capacity building support from UNICEF through the Education Cluster.

Recognizing the nutrition related challenges for school aged children across the region, 4,280 children accessing ECCD programmes in Shire and Mai Tsebiri were provided with a school meal daily to encourage regular attendance and ensure they have the adequate nutrients to support learning. School feeding targets were significantly impacted by a lack of available high energy biscuits and cash to procure alternative food items on the local market.

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7 See footnote 3  ‘Bete’ Programme visibility | UNICEF Ethiopia
In Tigray, UNICEF also supported zonal level monitoring of school reopening and supported various woreda education office heads in school reopening planning, including providing training on EIE and how to conduct advocacy to bring children back to learning. The local community supported cleaning in schools, construction of TLS using local materials and repairing of school facilities. Northern Ethiopia has been facing critical shortages of teaching, learning and scholastic supplies in schools.

**Education Cluster**

A total of 795,664 out of school children (48.3% girls) gained access to education during 2021 with the various interventions of 14 education cluster partners (35% reached against the 2021 HRP target of 2.3 million children). These children were reached by partners through distribution of teaching and learning materials and establishment of TLS. The children also benefited from ALP and ASR. The key challenges in reaching the target was primarily due to school closures due to conflict, COVID-19, flooding, drought and limited funding for the Education Cluster.

The Education Cluster took initiatives to improve the capacity of local NGOs through localization efforts to ensure immediate response to the affected population. In line with this, the Education cluster conducted a workshop on localization for cluster partners with the presence of donors as well. The Education Cluster also selected three NGOs to build their capacities through its pilot project under localization efforts in 2021. The cluster worked closely with the MoE and UNESCO on facilitating a workshop to incorporate the EIE data into EMIS and making a technical working group for EIE data management. The Education cluster has facilitated Rapid Response Mechanism (RRM) training for cluster team with the support of the Global Education Cluster (GEC) with 22 participants across Ethiopia to enhance their capacities on RRM and assessments.

UNICEF’s chair/co-chair roles within the Education, Child Protection AoR, Nutrition and WASH clusters at the national and sub-national levels enabled a useful inter-cluster coordination, as well as in applying inter-cluster approaches. As one example, in 2021, the Education cluster together with Child Protection AoR conducted a round table virtual discussion on Child protection and Education in the context of Ethiopia to mark the celebration of World Children’s Day in November. This platform was used to highlight the importance of inter-sectoral approaches in addressing the needs of the children and women especially within the humanitarian context. Furthermore, the Education cluster worked together with WASH cluster on rehabilitation of WASH facilitates in schools.

Through advocacy, the Education cluster established donor relations with ECHO, FCDO, USAID and Lego foundation. ECHO allocated US$ 5 million for education for 2022 and also managed to secure CERF and EHF allocations for education cluster partners with its continuous advocacy efforts.

Challenges faced in 2021 included lack of partner capacity on EIE and limited operational presence/personnel in emergency/crisis areas. Most partners have experience within development and were not prepared to provide an EIE/humanitarian response.

There was a severe shortage in resources to respond to the education needs in 2021: out of US$ 43.4 million indicated as need on HRP, education cluster managed to raise only 33 per cent of the resources. In particular, due to the considerable damage, destruction and looting of schools in conflict affected areas, the funding required for renovation or repair of schools was significant as was the gap in funding.

**WASH**

In response to multiple hazards in 2021, mainly conflict, drought, cholera outbreak, flooding, and the COVID-19 pandemic, UNICEF continued to provide safe drinking water, sanitation and hygiene to the affected communities as well as communities on the move or hosting displaced people. UNICEF worked closely with the federal and regional governments and regional water and health bureaus to devise response plans, assess the humanitarian needs, and engage in a timely response. In addition, UNICEF engaged with different partners including IRC, Action Against Hunger (AAH), Ethiopian Red Cross Society (ERCS), Plan international, Catholic Relief Society (CRS), GOAL Ethiopia, CARE, NRC, COOPI and Population Media Center (PMC) and put in place the RRM to accelerate response.

UNICEF was able to provide access to safe water supply to about 4.9 million people (of which 2.2 million people were in the northern regions and almost 2.7 million in other regions) through emergency water rationing, rehabilitation of non-functioning boreholes (ranging from minor fixing to replacement of electromechanical equipment including generators and submersible pumps), expansion of existing water schemes and installation of water treatment plants. Beneficiaries were reached with safe water supply mainly in Oromia, SNNP, Somali, Afar, Amhara, Benishangul Gumuz and Gambella regions.

Almost 1.7 million people (of whom 927,924 people in regions other than the north) were reached with the provision of non-food items (NFIs) since January 2021 in all regions. Basic WASH NFIs distributed included household water treatment chemicals, body and laundry soaps, jerricans, buckets, basins, sanitary pads, underwear, solar torches. Furthermore, 1,015 chlorine drums were also provided to respective duty bearers to ensure adequate chlorination at storage and distribution, which benefited minimum of one million people in the year.
A total of 500,000 people (of whom 279,566 people in regions others than the northern response) received access to basic sanitation facilities in 2021. This intervention was realized through renovation of existing latrines and newly constructed latrines in multiple regions. In host communities, UNICEF mainly supported the social mobilization in collaboration with regional health bureaus, whereas in IDP settlements new latrine construction was accomplished in partnership with NGOs and private contractors. UNICEF provided technical and financial support for the delivery of risk communication messages to over 3.1 million people. These people were reached with basic hygiene messages through public awareness campaigns using mobile audio vans, health extension workers, and community volunteers and behavioral change communication (BCC) materials with focus on COVID-19 and cholera infection prevention and control (IPC).

WASH support to health care facilities was also one of the interventions accomplished in 2021 as part of the COVID-19 response especially for treatment centers; 47 health care facilities were provided safe water supply with storage tanks with 10,000 liters capacity. In addition, 38 health care facilities were supported with cleaning and disinfection supplies, as well as renovation works for the existing latrines to improve sanitation.

In 2021, there was financial resources gap to address huge WASH response needs in multiple regions. Local WASH NFI procurement was a big challenge during the year due to inflation and hard currency shortages in the country and UNICEF was frequently obliged to revise the prices of many supplies.

**WASH - Northern Ethiopia Response (Tigray, Amhara, Afar)**

In 2021, UNICEF provided over 2.2 million conflict affected people in Tigray, Amhara and Afar regions with access to safe water supply mainly through water trucking and rehabilitation of existing water schemes. The implementation was facilitated mainly through partnerships with NGO partners, private contractors and regional water and health bureaus. A total of 765,409 people were reached through provision of NFIs since the beginning of the year. A total of 219,950 people received access to basic sanitation facilities. Furthermore, UNICEF provided technical and financial support for the delivery of risk communication messages to 950,906 people.

In Tigray, UNICEF together with partners was able to provide access to safe water supply to million conflict affected people in multiple locations of Tigray region through water trucking and rehabilitation of water schemes. A total of 205,979 people were reached through provision of NFIs since the beginning of the year. Moreover, 48,197 people mainly in IDP settings has received access to basic sanitation facilities through construction of semi-permanent communal latrines. Furthermore, UNICEF provided technical and financial support for the delivery of risk communication messages to 135,230 people in different woredas with RRM partners and ERCS.

In Afar, UNICEF in collaboration with Afar regional water and health bureaus and NGOs, provided access to safe water supply to 338,049 conflict affected people mainly in areas bordering Tigray region through water trucking and rehabilitation of water schemes. A total of 161,862 people were reached through provision of basic WASH NFIs. Moreover, 66,491 people received access to basic sanitation facilities. UNICEF provided technical and financial support for the delivery of risk communication messages to 181,040 people.

In Amhara, UNICEF in collaboration with partners, was able to provide access to safe water supply to 193,864 conflict affected people through water trucking and rehabilitation of water schemes. A total of 368,317 people were reached through provision of NFIs in the year. In addition, 28,362 people received access to basic sanitation facilities. UNICEF provided technical and financial support for the delivery of risk communication messages to 296,947 people using different channels.

The key challenges that constrained implementation and service delivery were restrictions placed on cash flow to Tigray region, limited fuel, and other critical WASH supplies (such as WASH NFIs and spare parts for rehabilitation/construction of water schemes) in the market. Other challenges included ongoing insecurity that often-limited travel and monitoring of projects within the region, disruption of critical communication facilities, such as internet access and mobile network. The situation was further exacerbated by weak local government structures, especially at woreda/town and tabia levels, occasioned by non-payment of remuneration for personnel. In Amhara, long interruptions in power supply in conflict affected locations affected WASH service delivery for IDPs and host communities.

**WASH Cluster**

As the WASH cluster lead agency, UNICEF continued to support WASH service delivery, to inform the humanitarian strategy and to advocate for further resource mobilization for WASH emergency responses. The cluster coordination team worked closely with the Ministry of Water, Irrigation and Energy (MOWIE) to develop the cluster’s strategy and priorities.

As in previous years, the WASH cluster continued to address the needs of chronically drought-affected communities with more resilient programmes/durable solutions, with the intent of breaking the cycle of yearly emergency responses. To respond to the northern crisis and the increase in IDP numbers in the country in 2021, the WASH cluster partners implemented various RRM, such as the UNICEF-led RRM and the Save the Children-led SWAN consortium mechanism. This allowed WASH services to be quickly deployed in a fluid environment requiring a very agile response.
The WASH cluster coordination continues to be strong at sub-national level with eight regional coordination hubs, providing strong field presence and coordination capacity.

In 2021 there were 47 partner organizations in the cluster. National level meetings were held on a monthly basis and then fortnightly as the Northern crisis developed. Chaired by government counterparts, the meetings were attended by international and local NGOs and major WASH donors. The WASH cluster established regular donor relations with ECHO, FCDO and USAID and secured CERF and EHF allocations for WASH cluster partners.

The main challenges were linked to an increased need and an overall lack of resources and partner capacity to meet them. In particular, partners struggled to maintain presence in areas with security threats. Local partners with strong ties to the community were more resilient to maintain presence. However, their limited number was a limit and highlights the importance of strengthening the localization strategy going forwards.

Health

In 2021, a total of 2,132 cholera cases (8 confirmed) with 18 death cases (CFR 0.84%) were reported in SNNPR, Sidama, Oromia and Somali regions. UNICEF supported the cholera outbreak response through provision of technical assistance in planning and motorizing the preparedness and response, distribution of 83 Cholera Treatment Centre (CTC) kits for effective case management of cholera cases in affected regions and preparedness prepositioned in hot spot areas. The cholera response was well integrated with WASH in terms of technical assistance, field level support as well as provision of health and WASH supplies.

Since January 2021, 1,502,211 women and children were provided with medical consultations in all regions including over 552,000 consultations in conflict affected regions of Northern Ethiopia. A total of 950,029 children and women received primary health care (PHC) services in UNICEF supported health facilities across the country. Of the 950,029 consultations provided in the areas which were not affected by the northern conflict, 282,801 consultations were conducted in Afar and Somali regions and the remaining in Benishangul Gumuz, Oromia, Gambella and SNNP. The medical consultations in Afar and Somali were performed by 46 UNICEF-supported MHNTs and SOS teams in 27 health centers in the regions. In Benishangul Gumuz, SNNPR, Sidama, Oromia, UNICEF supported conflict affected areas in provision of essential maternal, newborn and child health services using fixed, outreach or MHNTs since January 2021.

In SNNPR, UNICEF supported selective measles vaccinations to prevent further spread of the outbreak and to strengthen routine immunization in South Omo zone where a measles outbreak affected three woredas (Salamago, Male and North Ari). A total of 72,606 children under five were vaccinated. In Gambella, 11,066 children aged 6 months to 15 years were vaccinated against measles. In addition, 8,855 refugee children and women accessed primary healthcare in UNICEF supported facilities at entry points.

A nationwide nOPV2 R1 campaign was conducted by the end of October 2021. According to the administrative coverage data, over 16.7 million children (101% coverage rate) from the 10 regions were reached. In Afar and Tigray, however, the campaign was postponed due to the ongoing conflict. UNICEF key support focused on vaccine management, logistics, communication and social mobilization.

For the prevention of COVID-19 and continuation of essential health services, UNICEF distributed personal protective equipment (PPEs) to health workers. In all, 242,118 N95 masks, 592,330 surgical masks, 2,424 protection coveralls, 1,600 surgical gowns and 1,000 face shields were distributed to health workers across all regions of the country.

UNICEF has also mobilized resource to support the overall vaccine and cold chain management. A total of 627 refrigerators, 14 walk-in cold rooms, 1,620 cold boxes and 12,150 vaccine carriers were procured. UNICEF is procuring additional 2 walk-in cold rooms, 40 refrigerators and 1,880 vaccine carriers to ensure health facilities are equipped with optimal cold chain to effectively manage COVID-19 vaccine all levels. UNICEF also supported the distribution of COVID-19 vaccine and supplies by contracting vehicles to transport supplies from central ESPA to hub and health facilities. Training on effective vaccine management was also provided for supply chain work force and health officers at national and subnational level.

UNICEF developed a partnership with M&C Saatchi World Services which is a global SBC LTA holder on developing, implementation, monitoring and evaluation of evidence-based interventions on COVID-19 vaccination among conflict affected communities in Amhara, Afar, Benishangul Gumuz and Somali regions in an integrated manner. UNICEF also established a local partnership with REST for integrated social and behavior change interventions in Tigray region including COVID-19 vaccination.

At the beginning of the COVID-19 vaccines introduction in Ethiopia, the prominent challenge was low acceptance of COVID-19 vaccination among health workers. In order to explore the underlying reasons, UNICEF supported conducting small-scale qualitative rapid assessment by utilizing Behavior and Social Drivers of COVID-19 vaccination (BeSD) tools. Based on the key findings from the assessment, UNICEF facilitated ideation sessions with health workers in collaboration with Federal Ministry of Health (FMOH) and Regional Health Bureaus. Ideas generated from the
sessions were shared with the Federal MOH and later implemented with partner agencies, the key outputs from the ideation sessions included partnership with medical professional associations, engagement with media agencies and prominent religious leaders, provision of face-to-face trainings for the health workers. Based on this experience, UNICEF supported the Federal MOH to conduct a national BeSD survey in partnership with VIAMO, which became a baseline for the demand promotion on COVID-19 vaccination plan of action. UNICEF is already in process of conducting the second round of nationwide BeSD survey in mid-February 2022. It will be a key monitoring tool for the effectiveness, impact and gaps of the demand promotion interventions on COVID-19 vaccinations.

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

UNICEF continued to provide essential health services to Tigray, Afar and Amhara conflict affected communities. In 2021, a total of 552,182 children and women received PHO services through UNICEF supported health facilities and 70 MHNTs (281,260 in Tigray, 241,273 in Amhara and 29,649 in Afar).

In collaboration with partners, IRC, IMC, Concern Worldwide, AAH, Goal and CRS, UNICEF provided a comprehensive health response in Tigray. A total of 237 emergency drug kits (EDKs) and 154 renewable kits were distributed to treat over 592,500 consultations through MHNTs to provide services to the hard-to-reach areas and through health facilities in IPC5 and IPC4 woredas. In addition, UNICEF dispatched 20,000 Long Lasting Insecticidal Nets (LLINs) (enough for 40,000 people) to Shire for the prevention and control of malaria cases. The measles vaccination campaign was repeatedly postponed due to unavailability of vaccines in the region, however by the end of the year, 860,000 doses were delivered with MOH support and the cold chain as well as other necessary preparations were finalized to start the campaign by the start of 2022 in Mekelle Zone (phase I) and will further expand to other zones on a phase-by-phase basis. UNICEF continued to provide multisectoral support for the cholera prevention, as part of preparedness, a first dose of oral Cholera Vaccine (OCV) was given to 965,789 IDPs and host communities focusing on 13 hotspot sites in the region, which was 48 per cent of the targeted two million people to be vaccinated. However, the second dose of OCV was not administered until the end of 2021, as there was a large-scale conflict in the region by the time the second round of OCV was planned to rollout. Technical support to health care providers and to health facilities was provided through supervision visits carried out by implementing partners and third-party consultants.

In Amhara, UNICEF supported the RHB to deploy 30 MHNTs in conflict affected areas. The support included UNICEF financial, drugs and supplies and technical support. UNICEF provided 184 EDKs (enough for 460,000 medical consultations), 60 Inter-agency Emergency Health Kits (IEHKs), 20 CTC kits, 53,458 LLINs for 106,916 people, 300 Midwifery kits, 5 room heaters and 5 generators for IDPs and health facility strengthening and service restoration.

In Afar, UNICEF supported seven MHNTs (5 with the RHB and 2 with IMC) in conflict affected areas. UNICEF supported 105 EDKs and 58 IEHKs to Afar RHB (including 80 EDK and 40 IEHK for 20 regular MHNTs) which was enough to provide 262,500 medical consultations.

Social Protection

In mid-2021, UNICEF collaborated with Bureau of Women, Children and Social Affair (BoWCSA) to cover 31,453 IDPs with humanitarian cash transfers (HCTs) in Amhara region.

The HCTs were piloted in North Shewa and Oromo Special Zones covering 3,626 IDPs, of which 55 per cent were women and 56 per cent were children. Post distribution monitoring was conducted through a mobile application (KoboCollect) and found that 95 per cent of IDPs received their HCT at the time of the survey, and 99 per cent had no challenges in accessing their HCTs. Most used the cash to buy food for their family, 60 per cent purchased blankets, and 46 per cent purchased drinking water.

In early 2021, top-up cash transfers were also provided to 5,432 COVID-19 affected Urban Productive Safety Net Programme households with pregnant and lactating women in Addis Ababa (19,012 individuals in total).

In Gambella, UNICEF met with woreda administrative counterparts to establish targeting and appeals committees to support the roll-out of the HCT for the flood-affected population. The HCTs will cover 5,800 people and will be disbursed in early 2022.

In the reporting period, in three Integrated Safety Net Programme (ISNP) woredas in Amhara region, 60,099 Productive Safety Net Programme (PSNP) clients were reached with key messages on GBV risk mitigation measures by community level social workers during household visits, public work sessions, and cash transfer/payment days and on regular follow-up visits. Just over half of these PSNP clients were female (51%).

Community Care Collations and PSNP task force appeal committees were strengthened in three woredas in two additional kebeles in Amhara during the reporting period, and access to safe channels to report sexual exploitation and abuse (SEA) was ensured in these kebeles. As a result, access to safe channels to report SEA was established to cover 58,991 (52% female) PSNP clients.
Social Protection - Northern Ethiopia Response (Tigray, Afar, and Amhara)

In Amhara, UNICEF is a member of the Region’s Emergency Coordination Centre (ECC) – chaired by Regional Disaster Risk Management (DRM). The ECC was established by government to ensure close coordination with humanitarian actors in the region. UNICEF is also a member of the Amhara Cash Working Group – lead and co-lead are BoWCSA and Regional DRM, respectively. With technical support of UNICEF, BoWCSA developed a Humanitarian Cash Transfer Guide, and this was endorsed by the ECC for all humanitarian partners to use in the region.

In 2021, UNICEF and BoWCSA provided HCTs to 27,829 IDPs (58% female and 50% children). This covered 10,010 IDPs in Dessie, 16,860 IDPs in Debark, and with some efficiency gains made on administrative costs, a further 914 IDPs were covered in Debre Birhan, and 43 IDPs in Bahir Dar.

Post distribution monitoring (PDM) is ongoing, and for Dessie this was conducted through KoboCollect with 276 IDP households. The PDM found that almost all (97%) respondents received their cash transfer at the time of the survey, and of those, 98 per cent said they had no challenges in accessing their cash. Nearly all respondents used the cash to buy food for their family (96%), or specifically mentioned buying food for their children (50%), followed by purchasing clothing for children (20%). Nearly all respondents (95%) received some support from a social worker or other government frontline worker. Nearly a quarter of respondent households (22%), have separated (84%), orphaned (10%) or unaccompanied (5%) children under their care. Of these households, 62 per cent received support from a social worker. Most received support accessing nutrition services (83%), 17 per cent received psychosocial support/counselling, and 8 per cent received access to health service and per cent received material goods (clothes/blankets etc.).

In Afar, a comprehensive household-level vulnerability assessment was conducted in Chifra woreda/district, covering 27,576 IDPs (4,596 HH) residing in the Waka/50 IDP site. The first round of targeting was also completed, and based on the agreed vulnerability criteria, 3,800 IDPs were identified as potential target beneficiaries. The exercise was done with the full involvement of the Chifra woreda steering committee, including representatives from the IDP community. In early 2022, another round of screening is scheduled to narrow down the identified IDPs to 3,640 for the HCTs. Disbursement of the HCTs will commence in early 2022.

In Tigray, UNICEF collaborated with federal and regional government counterparts to implement a cash transfer initiative for IDPs in Mekelle through the Urban Productive Safety Net Project (UPSNP). Good progress was made with the selection of IDP sites, targeting of IDPs, updating of the UPSNP system to allow registration and payment of IDPs, and approval for the disbursement of funds to IDPs through Commercial Bank of Ethiopia bank accounts. However, due to the rapidly evolving situation in Tigray, the initiative was suspended before any cash transfers were disbursed to IDP clients because of disruptions in government systems and personnel, limited access and communications, and closure of banks. With the interim government leaving Tigray, accounts were frozen, and UNICEF is discussing next steps with the Ministry of Finance (MoF) regarding the funds that were transferred to the Tigray regional Bureau of Finance (BoF).

In Mekelle, in early 2021, top-up cash transfers were provided to 2,398 clients (75% female) affected by COVID-19 and conflict, who already participated in UPSNP.

Social and Behavioural Change (SBC)

In the year 2021, UNICEF reached over 15,777,074 people in all regions of Ethiopia out of which 1,301,287 were in conflict affected regions of Tigray, Amhara, and Afar. People were reached messages focusing on issues such as COVID-19 prevention, maternal neonatal and child health (MNCH), nutrition, hygiene and sanitation, and GBV prevention and mitigation. To ensure community engagement, people were mainly reached through community outreach agents, religious and community leaders, health workers, and community workers.

In 2021, UNICEF particularly supported demand generation for COVID-19 vaccine. A community rapid assessment conducted at the beginning of the year indicated that 80 per cent of the population were willing to take vaccines when available, though the percentage declined to 65 per cent with the introduction of the vaccine in Ethiopia. To increase the uptake of COVID-19 vaccine, UNICEF worked with Ministry of Health (MOH) on strategic communication, developing targeted messages, production and deployment of materials. UNICEF supported, both technically and financially, the rollout of the national and sub-national demand generation activities via multi-channel communication. The campaign reached over 20 million people using mass media, social influencers, and audio-mounted vans. As per the MoH, during the campaign period, over 4.9 million people (80% of campaign targets as per vaccine doses available) were vaccinated against COVID-19. COVID-19 vaccine demand generation was also acclaimed as a good practice by the MoH.

UNICEF worked with different partners to reach and engage people in a more sustained way. UNICEF partnered with Girl Effect® to particularly reach adolescents with messages on COVID-19, nutrition, GBV, and MHH. An estimated nine million adolescents were reached through Girl Effect’s ‘Yegna’ drama series. Findings from an assessment conducted

6 Girl Effect is an international non-profit that builds media that girls want, trust, and need. Girl Effect’s programme in Ethiopia, ‘Yegna’, encourages positive behaviour change for girls in Ethiopia by tackling real-life challenges through a TV drama, digital channels, music, and club networks. https://global.girleffect.org
by Girl Effect to monitor the impact of the drama series showed that 51 per cent of viewers said that they gained knowledge about nutrition while 78 per cent claimed to have made some changes to their diet.

UNICEF also supported capacity building of different stakeholders engaged in implementation of social and behaviour change (SBC) activities. Among others, UNICEF supported training of over 23,326 health education workers (HEWs) and 1,812 HEW supervisors on COVID-19 risk communication and community engagement. Moreover, training was provided on COVID-19 vaccine introduction to 73 hotline operators and 55 media professionals. The trainings were aimed at debunking rumors about vaccine and providing the correct information during calls and media programming.

During 2021, over 164,511 people provided their feedback and concerns using available mechanisms. The main platforms for sharing feedbacks were hotlines and community events including group discussions and house visits. The main concerns raised by community members included the need for ambulance services, trainings on community mobilization, maintenance of health centers, peace and security, quality of health services, medical logistics and supplies. Some of these concerns were relayed to the relevant pillars within the emergency operation center for actions.

The year presented some challenges for SBC work. The major challenge was lack of sufficient funding to conduct intensive community engagement activities that would have resulted in better behavior changes. Lack of funding also hindered the establishment of a functional feedback mechanism at scale.

Funding Overview
UNICEF Ethiopia appealed for US$248,292,024 in 2021 aiming to provide sustainable life-saving and humanitarian services for women and children in Ethiopia. By the end of December 2021, US$120,690,908 had been received towards the appeal, representing 66 per cent of the required needs to reach children and their families with critical, lifesaving support. Within the appeal, funding dedicated to the Northern Ethiopia Response plan was budgeted for US$108,100,517. At the end of 2021, US$79,229,385.00 was received, representing 73 per cent of the total needs.

Significant gaps were recorded mainly in Nutrition, WASH and Education. Lack of funds had an impact on children, with more than 100,000 children aged 6 to 59 months with severe acute malnutrition (SAM) have not been provided with the lifesaving treatment they require. Furthermore, over 110,000 people were not supported with properly designed latrines, while over 7,800 children were not able to access family-based care and suitable alternative. Due to the funding gap in education, 93,000 children could not access formal and non-formal education.

UNICEF expresses its sincere gratitude to all the donors who contributed to the critical support towards UNICEF’s Humanitarian Action for Children. This includes Australia, Canada, Central Emergency Response Fund (CERF), Denmark, European Civil Protection and Humanitarian Aid Operations (ECHO), Finland, France, Germany, Ireland, Japan, Norway, Sweden, UK Aid, USAID, United Nations Office for the Coordination of Humanitarian Affairs (OCHA), and private sector donor contributions through UNICEF National Committees.

Human Interest Stories and External Media
During 2021, UNICEF continued to produce numerous advocacy and communication products on the situation and needs of children, women and their communities affected by the multiple humanitarian crises across the country.

As a result, the number of followers continued to increase across all UNICEF Ethiopia’s social media platforms (Twitter, Facebook, Instagram, YouTube, LinkedIn). Overall, the total reach across its digital platforms was over 3.2 million. Specifically, there was an increase of 69,500 followers; 15,000 on Facebook, 41,000 on Twitter and 6,000 on Instagram and 181,859 website views were gained with 35 published human interest stories/press releases and reports.

A strong emphasis was placed on the conflict in Northern Ethiopia and working closely with UNICEF HQ and East and Southern Africa Regional Office (ESARO), statements and updates were provided to both international and local media and numerous media interviews conducted on the crisis, including on BBC, CNN, UK Guardian, Reuters and others. Multimedia content was also produced highlighting UNICEF’s programmatic response and results for children impacted by the conflict, drought and floods for resource mobilization.

Various media outlets picked up content produced by the section, including AP and Forbes magazine, and over 8 videos were produced on the crisis in Northern Ethiopia, which were disseminated in the Country Office, Regional, HQ and National Committee digital platforms. Joint field visits with the Government and donors were also undertaken to the impacted regions for advocacy.

Donor-branded multimedia content was produced and published to provide recognition and visibility for multiple donors, including Sweden, UKAID, USAID, Canada, Japan and ECHO.

UNICEF also engaged its supporters and influencers on key advocacy areas, including with Gelila Bekele - advocate for girls and women rights - which resulted in a personal contribution of US$50,000 to a school feeding programme through Imagine1Day, in Tigray.
On COVAX, several hand over ceremonies were held with donors and the Government to acknowledge specific donor contributions of COVID-19 vaccines and to highlight the COVAX facility.

Branding and visibility guidelines including infographics were produced and disseminated for the Bete (*My Home*) campaign which provides integrated protection and education services for boys and girls living in the midst of humanitarian emergencies.

Facebook | Twitter | YouTube | Instagram | unicef.org/ethiopia


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## Annex A

**Summary of Programme Results - including Northern Ethiopia Response 2021 (Tigray, Amhara and Afar)**

<table>
<thead>
<tr>
<th>Sector</th>
<th>UNICEF and IP Results including Northern Response</th>
<th>UNICEF and IP Results Northern Response only</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2021 Targets (Jan - Dec)</td>
<td>Total 2021 Results (Jan - Dec)</td>
</tr>
<tr>
<td><strong>Nutrition</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number children aged 6 to 59 months with severe acute malnutrition admitted for treatment</td>
<td>577,399</td>
<td>471,923</td>
</tr>
<tr>
<td>Number children 6-59 months receiving Vitamin A supplementation every six months</td>
<td>1,446,966</td>
<td>1,520,912*</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>434,105</td>
</tr>
<tr>
<td>Number of pregnant women receiving iron and folic acid supplementation</td>
<td>249,000</td>
<td>758,032</td>
</tr>
<tr>
<td><strong>Health</strong></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>98,178***</td>
</tr>
<tr>
<td>Number of children and women accessing primary health care in UNICEF-supported facilities</td>
<td>852,700</td>
<td>1,502,211</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>62,744</td>
</tr>
<tr>
<td>Number of people affected by cholera accessing life-saving curative interventions</td>
<td>25,800</td>
<td>2,132*****</td>
</tr>
<tr>
<td><strong>WASH</strong></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>4,897,920</td>
</tr>
<tr>
<td>Number of people accessing appropriately designed and managed latrines</td>
<td>610,000</td>
<td>499,516</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>1,693,333</td>
</tr>
<tr>
<td>Number of people reached with key messages on hygiene practices</td>
<td>6,925,930</td>
<td>3,176,890</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>57</td>
</tr>
</tbody>
</table>
*3,333,202 children received Vitamin A supplementation in the first semester of the year (January-June) and 1,325,029 children received Vitamin A supplementation in the second semester of the year (July-December). The current and following reports focus on woredas classified as hotspots as opposed to the previous reports which were inclusive of results in all woredas across the country.

**1,962,233 children received Vitamin A supplementation in the first semester of the year (January-June) and 725,597 children received Vitamin A supplementation in the second semester of the year (July-December). The current and following reports focus on woredas classified as hotspots as opposed to the previous reports which were inclusive of results in all woredas across the 3 regions affected by the North Ethiopia Crisis.

***Targets not reached since the campaign could not take place due to security situation in Tigray.

****Cholera cases reported were fortunately less than projected amount.

*****This number includes the 23,321 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.

******The most marginalized children affected by multiple emergencies, including COVID-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.

******Previous sitreps till August the results for cash transfer were reported in number of people instead of households.

<table>
<thead>
<tr>
<th>Number of health care facilities with improved sanitation (this includes rehabilitation / fixing of existing latrines)</th>
<th>300</th>
<th>38</th>
<th>-</th>
<th>0</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Child Protection</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of girls and boys who have experienced violence reached by health, social work or justice/law enforcement services</td>
<td>26,177</td>
<td>11,520</td>
<td>12,000</td>
<td>5,881</td>
</tr>
<tr>
<td>Number of unaccompanied and separated children accessing family-based care or a suitable alternative</td>
<td>14,800</td>
<td>6,948</td>
<td>11,000</td>
<td>3,929</td>
</tr>
<tr>
<td>Number of children and caregivers accessing mental health and psychosocial support</td>
<td>94,180</td>
<td>119,194</td>
<td>35,000</td>
<td>89,072</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of schools implementing safe school protocols (infection prevention and control)</td>
<td>1,905</td>
<td>293</td>
<td>1,205</td>
<td>74</td>
</tr>
<tr>
<td>Number of children accessing formal or non-formal education and/or skills development trainings, including early learning</td>
<td>318,667</td>
<td>225,569*****</td>
<td>168,000</td>
<td>108,610</td>
</tr>
<tr>
<td>Number of children receiving learning materials</td>
<td>537,096</td>
<td>126,528</td>
<td>348,000</td>
<td>23,997</td>
</tr>
<tr>
<td>Number of children supported with distance/home-based learning</td>
<td>72,600</td>
<td>0*****</td>
<td>-</td>
<td>0</td>
</tr>
<tr>
<td><strong>Social Protection</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of households reached with humanitarian cash transfers across sectors (Households)</td>
<td>25,325******</td>
<td>19,399</td>
<td>14,115</td>
<td>11,344</td>
</tr>
<tr>
<td><strong>PSEA</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of people with access to safe channels to report sexual exploitation and abuse (Cross-sectoral)</td>
<td>694,253</td>
<td>122,950</td>
<td>364,544</td>
<td>0</td>
</tr>
<tr>
<td><strong>GBVIE</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions (Cross-sectoral)</td>
<td>616,132</td>
<td>228,196</td>
<td>220,000</td>
<td>108,289</td>
</tr>
<tr>
<td><strong>Communication for Development (C4D)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of people reached with messages on access to services</td>
<td>17,231,657</td>
<td>15,777,074</td>
<td>690,000</td>
<td>1,301,287</td>
</tr>
<tr>
<td>Number of people who shared their concerns and asked questions/clarifications to address their needs through established feedback mechanisms</td>
<td>407,200</td>
<td>315,173</td>
<td>7,200</td>
<td>5,735</td>
</tr>
</tbody>
</table>
### Annex B
2021 HAC Funding Status including Northern Ethiopia Response

<table>
<thead>
<tr>
<th>Sector</th>
<th>2021 HAC including Northern Ethiopia Response Funding Requirement</th>
<th>Total Funds Available (USD)</th>
<th>Funding gap (USD)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Funds received in 2021 Carry over Total $ %</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health</td>
<td>33,626,778.44 15,250,284.19 6,761,607.09 22,011,891.28 11,614,887.16 35%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nutrition</td>
<td>74,975,283.80 33,762,759.79 15,803,290.23 49,566,050.02 25,409,233.78 34%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child Protection, GBViE, PSEA</td>
<td>23,805,446.84 14,756,213.23 6,163,682.77 20,919,896.00 2,885,550.84 12%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td>19,733,445.24 13,474,327.41 3,212,625.91 16,686,953.32 3,046,491.92 15%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WASH</td>
<td>77,635,566.26 30,945,573.85 12,133,953.92 43,079,527.77 34,556,038.49 45%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social Protection, C4D, community engagement and AAP</td>
<td>8,000,366.02 11,973,843.75 11,973,843.75 (3,973,477.73) 150%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cluster Coordination</td>
<td>8,891,811.40 129,600.00 129,600.00 8,762,211.40 99%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>248,292,024 120,690,908.16 44,075,159.92 164,766,068.08 83,525,955.92 34%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Annex C
2021 Northern Ethiopia Response Funding Status

<table>
<thead>
<tr>
<th>Sector</th>
<th>2021 Northern Ethiopia Response Funding Requirement</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 28,930,576.76 (3,179,592.76) 112%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health</td>
<td>12,908,480 6,336,699.00 6,571,781.00 51%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child Protection</td>
<td>6,455,737 20,122,555.97 11,536,371.03 36%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WASH</td>
<td>31,658,927 6,514,248.44 (58,511.44) 101%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td>11,809,115 2,584,844.58 2,144,755.42 45%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social Protection</td>
<td>4,729,600 11,088,586.72 720,528.28 6%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PSEA</td>
<td>930,646 750,000.00 180,646.00 19%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>GBViE</td>
<td>5,081,302 - 5,081,302.00 100%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C4D</td>
<td>768,280 129,600.00 638,680.00 83%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Monitoring / operational cross-cutting costs</td>
<td>8,007,446 2,772,273.53 5,235,172.47 65%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>108,100,517 79,229,385.00 28,871,132.00 27%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>