2018

ETHIOPIA

Humanitarian and Disaster Resilience Plan
MID-YEAR REVIEW



REVISED HUMANITARIAN AND DISASTER RESILIENCE PLAN

AT A GLANCE

STRATEGIC OBJECTIVE 1



Save and protect lives and reduce morbidity In complex emergencies and natural disasters

STRATEGIC OBJECTIVE 2



Protect and restore livelihoods

STRATEGIC OBJECTIVE 3



Prepare for and respond to other humanitarian shocks, including natural disasters, conflict and displacement

Cross-cutting:

Shared analysis guides disaster resilient investments in recurrently crisis hit areas.

PEOPLE TARGETED (FOOD)



PEOPLE TARGETED (NON-FOOD)



 $9.45_{\rm M}$

REVISED REQUIREMENTS (US\$)

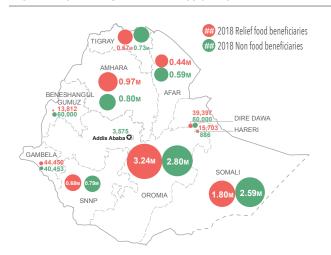
VERSUS JANUARY 2018 HDRP

494B

CURRENT GAP (US\$)



PEOPLE WHO NEED HUMANITARIAN ASSISTANCE



The belg harvest assessment and projections for 2018 indicate the following priority needs:

- 2.2M households targeted by Agriculture cluster
- 4.16M moderately acute malnourished
- 370,000 severely acute malnourished
- 2,888 Acute Watery Diarrhoea(AWD) confirmed cases

Key humanitarian issues

- Conflict induced displacement
- Continuing acute food insecurity, malnutrition and water shortages, mostly pastoral areas.
- Continued risk of life-threatening disease outbreaks 3.
- Acute food insecurity in lowland areas 4.
- Protection concerns due to conflict and drought.

SECTOR	# PEOPLE TARGETED IN JAN (in millions)	REVISED # PEOPLE TARGETED IN SEP (in millions)	FUNDING REQUIRED IN JAN (US\$ million)	REVISED REQUIREMENTS IN SEP (US\$ million)	CARRY OVER FROM 2017 (US\$ million)	NATIONAL / INTERNATIONAL CONTRIBUTIONS 2018 (US\$ million)	GAP (US\$ million)
ÿ	3.4 (HHs)	2.2 (HHs)	104.4	83.3	2.7	10.2	70.4
Education	2.2	2.6	34.5	40.9	1.0	17.9	22.1
Emergency Shelter/NFI	1.5	2.8	94.9	132.3	4.6	21.3	106.4
≥ Food	7.9	7.9	1,035.7	750.8	121.6	577.8	51.4
* Health	6.5	7.5	74.0	114.8	6.0	9.5	99.2
Logistics		1.9		0.4		0	0.4
Nutrition	3.8	4.5	198.3	218.3	65.1	81.8	71.3
Protection	0.3	0.9	17.3	11.3	1.2	9.3	0.8
₹ WASH	6.9	8.2	99.0	142.3	12.7	42.6	87.1
Multi-sector						92.3	- 92.3
Total			1,658	1,494	214.9	862.6	416.4

CHANGE IN CONTEXT/ SITUATION

OVERVIEW

In the second half of the year, Ethiopia has faced with an unprecedented surge of inter-communal conflict in Gedeo zone (SNNP region) and West Guji zone (Oromia region), which at its height, displaced some 818,000 people.

The Government and Humanitarian partners had to respond to this dramatic increase in displacement, while at the same time, responding to the continuing needs of some 1.1 million people displaced along the Oromia – Somali boundary since September 2017. While the 2018 *belg* rains were generally favorable, they also led to flooding along river basins in Oromia, Somali and SNNP regions, affecting some 382,000 people; displacing some 172,000 people in Somali region alone. The total number of people targeted for relief food and cash activities has been staying more or less unchanged, despite a generally positive Belg performance. This is due to the increase in conflict induced displaced persons.

In early August, two days of inter-communal fighting in Jijijga and other towns across Somali region, led to an additional 141,000 people becoming displaced. Despite several peace and reconciliation efforts led by the Government of Ethiopia for the Gedeo/West Guji and Oromia/Somali regional conflicts in seeking durable solutions to the grievances expressed by all sides, the current levels of displacement are anticipated to stay the same, requiring sustained levels of humanitarian assistance for the remainder of 2018.

On the political front several positive developments also took place during the first half of the year. On 2 April, Prime Minister Abiye Ahmed was sworn in by Parliament, with a mandate to implement democratic reforms, partly aimed at defusing ethnic tensions in the Oromiya province. A major achievement has been the reestablishment of Ethiopia-Eritrea relations after the recognition of the Algiers Peace Agreement. Another positive development was the appointment of a new President for the Somali region in August.

The overall findings of the 2018 belg assessment indicate favorable harvests for most parts of the country, with a few pocket areas of Afar, Amhara, Tigray and Somali regions reporting below

normal rains. Favorable rains also led to some improvements in the livelihoods pastoralists of and agropastoralists Somali region who suffered the brunt of the Indian Dipoleinduced lowland drought which struck much of the region in 2017, decreasing

Region	Meher+Belg+IDP beneficiary Number
Oromia	3,240,385
Somali	1,799,679
Amhara	996,632
Tigray	674,693
SNNPR	684,201
Afar	444,941
Gambela	44,450
Diredawa	39,397
B/Gumuz	13,812
Harari	15,703
Grand Total	7,953,893

livestock herd sizes and limiting access to food and incomes in pastoralist areas. The predicted rain reduction over southern and eastern lowland areas due to La Nina did not materialize. The favorable belg rains led to an increase in harvests, compared to previous years, and the number of beneficiaries requiring food assistance being revised to 7.9 million.

The updated figure of 7.9m relief food beneficiaries is a composite figure of all those assessed as being acutely food insecure comprising 'resident' Ethiopians, IDPs and returnees – with immediate needs to be addressed for the remainder of the year through the provision of two rounds of assistance. Following the release of this Mid-Year Review local level authorities will be instructed to complete retargeting exercises, to ensure that those with the greatest needs are assisted.

CRISISTIMELINE Mar DTM round 3 identified 385,720 climate induced IDPs DTM round 2 identified 385,000 climate induced IDPs DTM round 2 identified 385,000 climate induced IDPs DTM round 2 identified 385,000 climate induced IDPs DTM round 3 identified 385,000 climate induced IDPs DTM round 5 identified 375,000 climate induced IDPs DTM round 6 identified 375,000 climate induced IDPs DTM round 7 identified 425,000 climate induced IDPs DTM round 8 identified 31,1million conflict induced IDPs DTM round 9 identified 1,1million conflict induced IDPs DTM

Over 3.3 million people from the **Productive Safety Net Programme (PSNP)** Public Work (PW) clients in hotspot priority one woreda (P1) will receive food assistance to the end of 2018. Although beneficiaries are not formally included in the HDRP MYR, the financial requirements are estimated at USD 70M and are part of this MYR (Food cluster part).

In areas where the *belg* rains were below normal, there are indications of low crop production in *belg* producing areas due to outbreak of pests, late onset and poorly distributed rains, and high variation in temporal and spatial distribution, and will require sustained humanitarian assistance for the remainder of 2018. Looking forward, and based on current meteorological predictions, flooding is anticipated to affect most regions of the country for the next season.

The escalation of the Gedeo-West Guji crisis has been the most notable change in the national context, leading to the establishment of two Emergency Operation Centers in Dilla, Gedeo zone, and Bule Hora of West Guji zone in June to coordinate the response to the magnitude of humanitarian needs. At time of drafting of the 2018 Mid-Year Review (MYR), the situation remained dynamic, with significant numbers of people preparing to return either to their home communities, or to sites close to these, from which they can assess the safety of permanent return. IDPs in Gedeo and West Guji are progressively returning to their areas of origin, but there are still many IDPs in sites. However, the threat of secondary displacement remains, until peace and reconciliation efforts lead to durable solutions and an easing of tensions between

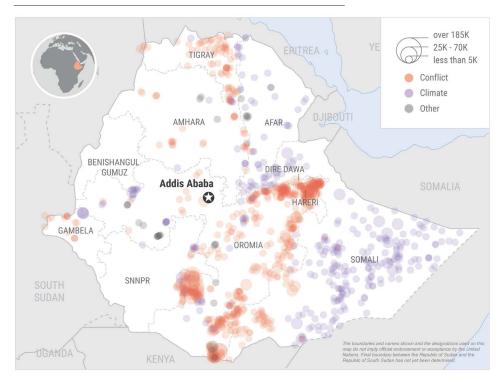
communities. In cases where IDPs remain in their areas of return, substantive assistance will continue to be required, as many of the returning IDPs are faced with destroyed homes, fallow fields, loss of livelihoods, and ongoing protection concerns.

As intermittent clashes continue to be reported along the Oromia-Somali regional boundary, a long-term solution to the Oromia-Somali border conflict is yet to be reached. Prevailing insecurity is likely to maintain the current levels of displacement in both Oromia and Somali region, requiring continuous humanitarian support to once productive households that have lost their livelihoods and only sources of income. Government return and relocation plans for those affected by the crisis have yet to materialize raising the prospect for continued support for the remainder of 2018. As the events that took place in Jijiga in early August demonstrate, Somali region will remain vulnerable to intermittent bouts of inter-communal conflict.

For the first six months, there has been an overall good national and international response to the humanitarian requirements. Over 6.8M people were reached with non food items out of the planned 8.4M beneficiaries. A minimum of 9,322,938 beneficiaries have been reached with at least 1 round of food assistance. The cluster achieved 32.6% of the planned delivery of food assistance for 2018.

Due to late *belg* assessment reports and the late release of food beneficiaries figures, this year Mid Year Review report is exceptionally released in early October.

CAUSE OF DISPLACEMENT

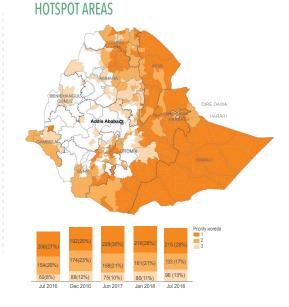


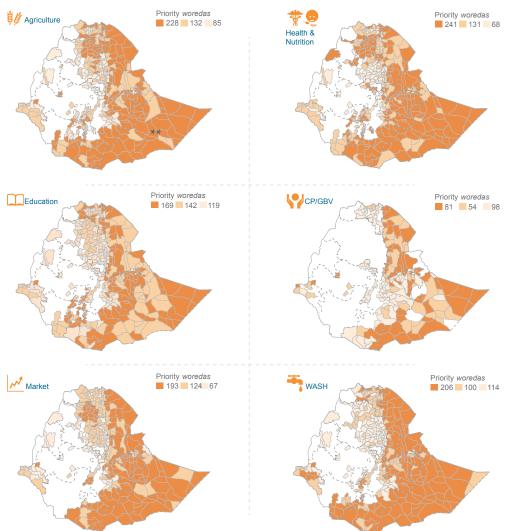
REVISED SUMMARY OF NEEDS, TARGETS

&REQUIREMENTS

In the second half of 2018, some 7.9 million people will require food assistance, and some 9.45 million will require non-food assistance. Humanitarian partners will support over 2.6M school-aged children (4-14 years), including 1.1 M receiving school feeding. Over 750,000 IDP and host communities will receive medicine. Over 370,000 SAM cases and 4.16M MAM cases of under five years and pregnant and lactating woman will be treated. Out of those, at least 20,000 acutely malnourished children recently displaced will also be treated. Close to a million will be targeted for protection assistance. Over 2.2 million households will require livestock support until the end of 2018. The overall funding requirement is 1.4BN USD

The overall findings of the 2018 *belg* assessment indicate favorable spring harvest for most parts of the country, with a few pocket areas of Afar, Amhara, Tigray and Somali regions reporting below normal performance. Favorable rains also led to some improvements in the livelihoods of pastoralists and agro-pastoralists in Somali region who suffered the brunt of the Indian Dipole-induced lowland drought which struck much of the region in 2017, decreasing livestock herd sizes and limiting access to food and incomes in pastoralist areas.





NUMBER OF PEOPLE IN NEED, BY REGION

	Food*	Agriculture	**Education	ESNFI	Health	Nutrition	Protection	WASH	Non-Food***
Addis Ababa	0	0	1,543	10,169	0	1,000	0	0	10,170
Afar	444,941	88,917	86,101	80,623	386,163	305,136	0	508,471	508,471
Amhara	996,632	74,594	332,121	44,032	299,144	749,677	0	639,742	749,677
Benishangul	13,812	0	0	0	101,195	2,700	0	0	101,195
Dire Dawa	39,397	0	3,232	18,020	0	3,207	0	0	18,021
Gambella	44,450	0	3,822	38,449	29,000	6,957	0	28,500	38,450
Harari	15,703	0	904	8,820	0	890	0	0	8,820
Oromia	3,240,385	208,124	839,872	1,217,145	4,091,002	1,468,995	404,461	3,082,853	4,091,002
SNNP	684,201	1,004,816	668,493	271,006	1,049,993	758,078	250,263	1,480,474	1,480,474
Somali	1,799,679	830,830	404,617	1,022,543	1,179,694	1,000,144	266,551	1,977,752	1,977,752
Tigray	674,693	37,297	266,064	72,380	321,362	241,945	0	467,729	467,729
	7.95M	2.24M	2.61M	2.78M	7.46M	4.54M	0.92M	8.19M	9.45M

PEOPLE IN NEED OF HUMANITARIAN ASSISTANCE





TREND OF PEOPLE IN NEED OF FOOD ASSISTANCE (IN MILLIONS)



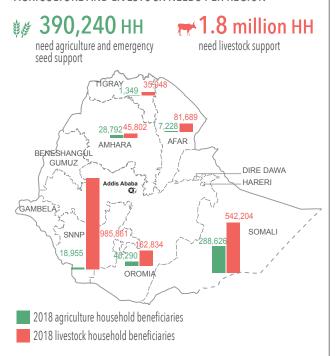
^{*} The updated figure of 7.95m relief food beneficiaries is a composite figure of all those assessed as being acutely food insecure – comprising 'resident' Ethiopians, IDPs and returnees – with immediate needs to be addressed for the remainder of the year through the provision of two rounds of assistance. Following the release of this Mid-Year Review local level authorities will be instructed to complete retargeting exercises, to ensure that those with the greatest needs are assisted.

^{**} For Livestock interventions, the Agriculture and Livestock Cluster calculate households based on an average herd size. This makes it difficult to include these beneficiaries in a calculation of the overall non-food beneficiaries. Hence, for the Agriculture and Livestock Cluster, only the Agriculture interventions are taken into account when calculating the overall targeted non-food beneficiaries.

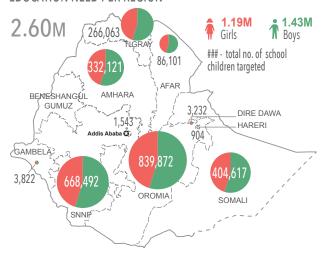
^{****} Following recommendations by the IASC Information Management Working Group, a bottom up approach is used to estimate the non-food inter-sectoral number of people targeted by taking the highest sectoral estimate for each region as a proxy for the total number of people targeted in that respective region. The total number of people targeted in the non-food sectors is the sum of these regional highest sectoral estimates. For more information on the methodology used, see https://www.humanitarianresponse.info/system/files/documents/files/humanitarianprofilesupportguidance_final_may2016.pdf

NEEDS PER SECTOR

AGRICULTURE AND LIVESTOCK NEEDS PER REGION



EDUCATION NEED PER REGION

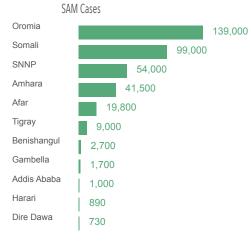


PROTECTION NEED PER REGION

	Child protection	Gender Based Violence (GBV)	General protection	Total
SNNP	26,200	29,120	194,943	250,263
Oromia	54,550	54,680	295,231	404,461
Somali	16,000	8,100	242,451	266,551
Total	96,750	91,900	732,625	921,275

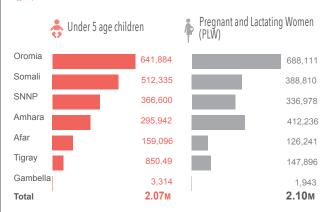
PROJECTED SAM CASELOAD PER REGION

9 370,000

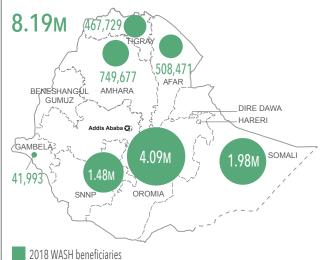


PROJECTED MAM CASELOAD PER REGION

♣ \$4.16Million



WASH NEED PER REGION



REVISED

STRATEGIC OBJECTIVES

The following three overarching Strategic Objectives have been retained from the past two years.

Save lives and reduce morbidity due to drought and acute food insecurity

Protect and restore livelihoods

Prepare for and respond to other humanitarian shocks – natural disasters, conflict and displacement

Cross-cutting: Shared analysis guides disaster resilient investments in recurrently crisis hit areas*

The 2018 Appeal took a new approach with an introduction of three pillars in line with the DRM policy of Ethiopia. Pillar 1-prevention and mitigation- things that will be done to reduce humanitarian needs. Pillar II- preparedness and response- early warning and early action plus typical humanitarian response. P3- national systems strengthening and early recovery- things that can be done to ensure smooth transition from pure humanitarian need and contribute to early recovery.

The MYR will continue working in line with these three strategic objectives with two main differences:

A geographical focus

The unprecedented surge of inter-communal conflict in Gedeo zone (SNNP region) and West Guji zone (Oromia region) and people displaced along the Oromia – Somali boundary since September 2017 led to a new three-pronged approach on the current crisis affecting Ethiopia to better target and monitor assistance provided to IDPs. All clusters activities will therefore be reported under the following three categories:

- (1) Conflict-induced crisis in West Guji and Gedeo
- (2) Conflict-induced crisis in Somali-Oromia border
- (3) Drought and Flood induced crisis and other crisis (AWD)

More inclusive Strategic Objectives

The objectives will also be slightly amended to adapt to the evolving situation involving more conflict-induced IDPs. As such, Strategic objectives will include more protection concerns and be more inclusive in terms of disasters of natural origin and human made. Subsequently, the three revised objectives should be read as follows:

- (1) Save and protect lives and reduce morbidity due to conflict and natural disasters;
- (2) Protect and Restore livelihoods
- (3) Prepare for and respond to other humanitarian shocks natural disasters, conflict and displacement

PROGRESS AGAINST

A THREE PILLAR APPROACH

Government and its partners introduced a three-pillared approach to the 2018 appeal in line with Ethiopia's Disaster Risk Management Framework. Pillar 1 Prevention and Mitigation outlined activities that will immediately reduce humanitarian needs and requirements in 2018 and beyond. Pillar 2 Preparedness and Response reflects humanitarian response specifically relief commodities and partner's presence in hot-spot and IDP affected areas. Under Pillar 3 National Systems Strengthening and Recovery are activities that will strengthen the national system and contribute to early recovery.

During the first half of 2018, Pillar 1 and Pillar 3 received little funding. Some key sectors such as Agriculture, WASH and ESNFI were not able to meaningfully implement their planned activities under Pillar 1 and Pillar 3 despite compelling justification both in terms of cost effectiveness and timely humanitarian assistance. However, with only 7 per cent funding towards its requirement under Pillar 3, ESNFI cluster managed to construct some transitional shelters and support targeted households with repair and rehabilitation of damaged structures.

The national flood taskforce issued consecutive flood alerts and prepared a National Flood Contingency Plan using early warning information. However, preparedness including prepositioning was hugely hampered due to lack of resources. For instance, in April 2018, following intense and prolonged Gu spring rains around 25,238 HHs were displaced in Somali region alone. Except initial Government response, early action couldn't be triggered as SNFI and other essential commodities and services arrived late. Pressing unmet needs of conflict IDPs in Oromia, SNNPR and Somali regions made prepositioning difficult.

Government is also committed to strengthen its early warning system. Ethiopia's Early Warning System is one of the oldest in Africa with many salient features. However, there were limitations in using early warning information to inform early action. There are sufficient experiences and knowledge on early warning system and hazard monitoring in the country but these experience and knowledge are used by different individual organizations for specific purposes/program. Towards this end, NDRMC established an National Early Warning technical watching group to strengthen a well-coordinated and integrated multi-hazard multi-sectoral people-centered EWS at all levels (federal to community) for early warning to trigger early action. This group will also support the IPC roll out. Donors and Partners must support such key initiatives under Pillar 3.





AGRICULTURE AND LIVESTOCK

HOUSEHOLDS TARGETED



2.2_M (HH)

Original 3.43м

REQUIREMENTS (US\$)



83.3м

Original 104.4_M

GAP (US\$)



70.4_M

AGRICULTURE AND LIVESTOCK OBJECTIVE 1:

Saves lives and reduce morbidity due to drought and acute food insecurity through protecting the key livelihoods of the vulnerable households and ensuring milk availability and reducing the likelihood of families requiring emergency food.

AGRICULTURE AND LIVESTOCK OBJECTIVE 1:

Livelihoods are protected and restored through provision of emergency Feed, Seeds and Animal Health services.

AGRICULTURE AND LIVESTOCK OBJECTIVE 1:

To prepare for and effectively respond to humanitarian shock through implementation of mitigation activities like irrigation, Crop, vegetable and fodder production.

Despite the benefit of recent *belg* rains, recovery of pastoral and agro-pastoral livelihoods will not be spontaneous, nor can it be expected without concerted assistance. Consecutive years of drought have eroded the capacity of households to utilize the recent rains to recover their livelihoods. Pastoralists have either sold or lost their breeding stock to disease or ill-health, leaving them with no means to re-establish their herds for years to come.

The findings of the 2018 belg assessment indicate that the remaining livestock in some parts of Afar, Somali (only flooded areas) and Amhara regions have poor body conditions, requiring health interventions and improved feeding. Milk production is also a major concern in these regions, as well as in Oromia. Herd size in Somali, Afar, SNNPR and Oromia was reported as continuing to be reduced due to deaths in the last two to three years of drought. Large parts of pastoral and agro-pastoral populations that have managed to survive years of drought are still at the brink of destitution. At this stage, any additional shock will mean loss of their remaining livelihood assets, likely leading to displacement, food insecurity, malnutrition, increased risk of conflict and IDP populations, increased food requirements and increased needs for moderate and severe acute malnutrition treatment.

Most regions reported that in some pocket areas, rainfall was below normal, delayed, erratic and/or having dry spells. Recent belg (karma/gu) rainfall did not cover all regions equally; particularly in Afar. It was reported to be below normal and compounded the drought situation in many areas. In the low plains of Afar and Somali regions, rain resulted in flooding and damage to irrigation infrastructure and cropland. Some pockets in Afar, Amhara and Tigray reported low or no crop yields. Tigray is of most concern, with around only one-fifth of planted area expected to produce a harvest in the current belg season. Both Oromia and Somali regions highlighted shortages of pasture, cropland, water and market access in many areas due to the cumulative impacts of weather and conflict-induced pasture degradation.

Conflict among communities in Gedeo and West Guji has impacted the agriculture livelihood of the displaced, through damages to arable land, loss or displacement of livestock, loss of farming assets and abandonment of land during the last planting season. The returnees will need immediate interventions to maintain their arable land and to protect their remaining core livestock. Support for the host communities is also essential since they have been impacted by increased competition for the already existing resources.

Finally, the *belg* assessment reports that crop and pasture in many parts of the country were impacted by Fall Armyworm (FAW) and prosopis juliflora, overgrazing, erosion, damage or absence of agriculture related infrastructure, hail storms and landslides.

US\$83.3 million is required for the second half of 2018 to target approximately 2.28 million households (the household total does not include the target population under Pillars 1 and 3). The belg assessment recommends support for crop planting, where feasible, during the next meher rainy season, strengthened livestock access to feed and health interventions. All regional governments have advocated for more resilience interventions that would secure feed and water availability during the dry season and provide alternative livelihoods to improve income diversification of households at risk of future climate shocks and conflict. As described in the initial 2018 HDRP, livelihood support is critical to protect livelihood assets of households that have reached levels of extreme vulnerability and completely exhausted their coping mechanisms.

Strategy

Drought and flood-induced crisis

Early intervention in agriculture is particularly cost effective in reducing future needs for food and nutrition assistance, while also giving households the dignity of providing for themselves. FAO research in Ethiopia has found that every dollar spent on early livestock interventions results in seven dollars of benefits due to fewer animals dying of hunger and disease, allowing them to produce up to three times more milk. Milk is vital for children's nutrition. At the end of a drought year in which animals perish, the milk intake of a small child will have fallen by 90 per cent. Thus, support to pastoralist communities with fodder, water, re-stocking and veterinary care are investments which reduce the risk of child malnutrition in the long term.

Different types of interventions are essential to increase the resilience of affected populations and decrease the need for humanitarian interventions in the future. As described in the initial 2018 HDRP, the lack of availability of fodder for livestock is the main factor leading to food insecurity, malnutrition and population displacement. The transport of fodder and livestock feed from distant places comes at a high cost and to the detriment of local producers and economies. To support local production and improve access to pasture for the next dry period, the establishment of local livestock feed banks remains a priority for the sector.

Furthermore, the sector is advocating for irrigation activities as a cost effective means to improve resilience during prolonged dry periods, and to reduce future humanitarian response needs. For example, preliminary estimates suggest that bringing 500 hectares under spate irrigation (using seasonal flooding of rivers, streams, ponds and lakes to fill water storage canals) could cost between \$350,000 and \$400,000. While the average pasture production under natural conditions is less than one ton per hectare, the average production under spate irrigation is about 5 tons per hectare. It is estimated that 500 hectares of spate irrigation could produce 2.5 million kilograms of fodder sufficient to feed 8,000 cattle for three months. By comparison, direct provision of cattle fodder for three months would cost an estimated \$950,000.

The third pillar of the strategy is the reinforcement of systems around response and preparedness/ disaster mitigation. This pillar received little funding during the first six months of 2018. The systems aim at keeping the actions of the other pillars together and ensure that appropriate decisions are being made based on sound analytical basis. This means

having sound food security and nutrition analysis (based on the Integrated Phase Classification – IPC), strengthening animal health services and linkages between destocking and markets. The third pillar is critical for evidence-based decision making (also for other sectors such as food and nutrition), thus optimizing the use of available resources. The timeliness of funding availability and intervention remains critical for the sector.

Conflict-induced crisis (Gedeo-West Guji and Oromia-Somali conflicts)

Not all IDPs across the country have access to land for livestock or crop cultivation, and many (especially in Gedeo and West Guji) are in the process of returning to their areas of origin. The agriculture sector prioritizes interventions with returnees, host communities and IDPs with livestock either at displacement sites or later upon their return home, and who can benefit mainly from animal health activities that prevent the spread of diseases. Where crop and livestock activities are appropriate, this provides displaced people and returnees with the dignity of earning a decent living, supports them in providing for their families and improves their access to food.

Response Plan

The planting window for many crops in highland areas has already passed for this year. However, in some priority areas, the planting season extends to September and October. If immediate support is not provided, this will have long term impacts, as planting cannot commence again until 2019.

Crisis	Pillar	Activity	Beneficiaries	Requirements US \$
Drought and flood-induced	Pillar 1 Prevention and mitigation	Resilience interventions Rehabilitation or building of livestock water points such as ponds, rehabilitation of irrigation infrastructure, Prosopis juliflora clearing or exploitation, flood mitigation, and strengthening community fodder banks		8,000,000
	Subtotal Pillar 1			8,000,000
	Pillar 2 Preparedness and response	Livestock feed provision	732,020	57,500,00
		Emergency seed distribution Crop and vegetables seed Forage seed	390,240 360,740 29,500	2,400,000 2,250,000 150,000
		Animal health support Vaccination Treatment Veterinary equipment	1,854,338 1,724,953 1,756,065	7,500,000 2,300,000 4,600,000 600,000
	Subtotal Pillar 2		2,244,578	67,400,000
	Pillar 3 National Systems Strengthening and recovery	Strengthening of livestock and agriculture systems enhancing animal health services delivery and disease surveillance, strengthening linkages between destocking and livestock markets and achieving nutrition outcomes through milk production, capacity building trainings and enhancement of early warning analysis and planning.		1,000,000
		Supporting vulnerable communities in diversifying livelihood activities through activities such as climate solutions (crop and livestock insurance), strengthening coordination and early warning system and use the analysis of IPC and IGA interventions.		3,000,000
	Subtotal Pillar 3			4,000,000
Conflict-induced IPDs and Returnees from Gedeo-West Guji	Pillar 2 Preparedness and response	Protecting core breeding stock with animal health support, and Crop and vegetable seeds support (for 10% of total affected IDPs and Returnees)	13,953	1,400,000
	Subtotal Pillar 2			1,400,000
Conflict-induced IPDs from Oromia-Somali	Pillar 2 Preparedness and response	Protecting core breeding stock with animal health support (for 10% of total affected IDPs)	26,398	2,500,000
	Subtotal Pillar 2			2,500,000
Total			2.28M	83.3M



EDUCATION

PEOPLE TARGETED



2.6м

Original 2.19м

REQUIREMENTS (US\$)



40.9_M

Original 34.5м

GAP (US\$)



22.1м

EDUCATION OBJECTIVE 1

Ensure that emergency affected school-age girls and boys (including IDPs) continue to have access to safe, quality and inclusive learning opportunities.

The 2018 belg assessment revealed the main determinants preventing emergency-affected children from attending educational services are the unavailability of schools for displaced children in temporary settlements, the lack of water availability in schools and students not being able to acquire the required learning materials. The assessments noted the direct positive impact of school feeding on children's retention in schools. In all regions where school feeding and water were provided, there were far fewer student dropouts. In the 2017/18 academic year, 80 schools closed in Somali and 75 in Oromia regions due to conflict. In addition, a significant number of schools was closed in SNNP by the Gedeo-West Guji conflict.

Nearly 2.2 million school children were targeted in 150 woredas affected by drought and conflict induced emergencies. However, the displacement situation is deteriorating in Somali, Oromia and SNNP regions. The belg performance of some regions like Tigray was also below average. As a result, the hotspot Priority-1 woredas for education reached 204, raising the number of targeted school children to 2.6M, an 18 per cent increase from the target identified in the 2018 HRDP.

Strategy

The cluster will focus efforts on responding to the needs of 2.6 million school aged children (4-14 years) within 204 Priority-1 woredas. The cluster will further tailor its support between those woredas affected by both drought and conflict, located in the south and southeastern parts of the country. The response focuses on Somali, Oromia regions and in Gedeo zone of SNNPR. In addition, those woredas affected by chronic poverty in Amhara, Tigray, Afar and SNNP regions will be considered for school feeding support to reduce absenteeism and drop-outs due to food shortages.

Providing emergency education services for school age children affected by both drought and conflict is a critical priority within the humanitarian response (Pillar 2). This will be undertaken through the establishment of temporary learning spaces (TLCs) within temporary settlements as well as the provision of extended learning spaces in schools which are hosting displaced children. The provision

of TLCs will allow for better monitoring of displaced children's situation and serve as a platform for delivery of other essential services such as health, nutrition, social welfare.

With the highest proportion of children unable to continue their education because of drought, coupled with the impact of conflict in SNNP, Somali and Oromia regions, the provision of emergency school feeding alongside the provision of student stationary materials will continue among education partners. There are several recommended investments that can be made within the education sector, as well as in other sectors, to mitigate the impact of the current humanitarian situation on children's' education. The implementation of the national 'home-grown school feeding program' will directly support the retention of students under Pillar 1. In line with the commitments of the national Education Sector Development Plan V (2015/16-2019/20), there will be an effort to strengthen decentralized education management information and capacity building systems for improved targeting of humanitarian investments and recovery under Pillar 3.

According to DTM Round 11 data, excluding SNNP, the cluster estimates more than 460,000 school-aged children between the ages of 4-14 years are displaced. The DTM data further reveals that more than 40 per cent of the displaced school-aged population are not attending school and are without any access to education. About 56,000 school-aged children have no any form of education, of which 40,249 children benefit through EHF support (Plan Ethiopia, NRC and WVE). The remaining 16,292 children will benefit from the revised HDRP. In addition, nearly 250,000 schoolaged children were displaced recently due to the Gedeo-West Guji conflict. The Education Cluster has further received reports that 13 schools in Gedeo and 14 schools in West Guji were destroyed as a direct result of the conflict and that at least 28 schools across the two zones are currently sheltering IDPs. If the situation does not improve before the beginning of the new school year, nearly 300,000 children between the ages of 4-14 years will have their schooling disrupted due to displacement. Nearly 700,000 school-aged children are displaced throughout the country, a 57 per cent increment to Round 8 DTM data which

identified 444,839 displaced children.

Zones within Oromia and Somali regions, as well as Gedeo zone of SNNP, with the highest concentration of children with no access to educational facilities will be the cluster's first priority for Education in Emergency (EiE) responses. With the assumption that the majority of IDPs across these regions will

remain in their current location until the end of the year, the cluster will maintain its response strategy for conflict and work to establish temporary learning centers, provide training in psychosocial support to teachers and deliver accelerated educational programmes for displaced children. In total, the Education Cluster requires \$24M to provide an EiE to children affected by conflict and drought.

Pillar	Activity	Beneficiaries	Revised Beneficiaries	Required budget (USD)	Remarks
1: Prevention and	Education risk analysis to inform ESDP VI				
Mitigation	Integrate peace education/EiE in curriculum reform				
	Realize homegrown school feeding for 1,168,101 children in drought affected schools in Amhara, Tigray, Afar and SNNP (Cost: \$15.9M with no funding obtained from partners)	1,017,882	1,168,101	14.6	Targets Tigray, Afar, Amhara and SNNP, excluding Gedeo
	Subtotal Pillar 1			14.6M	
2: Preparedness and response	Establish Temporary Learning Centers (TLC) for IDP children in areas with no schools	12,504	16,292	651,680	School children identified as having no access to any education from R11 DTM data and Gedeo-West Guji conflict with reductions in the Plan Ethiopia, NRC and WVE responses.
	Maintenance of fully and partially damaged schools		50	500,000	
	Capacity building on psychosocial support for teachers teaching in IDP sites	370	2,000	200,000	Teachers expected to receive psychosocial support training to support 121, 207 IDP school-aged children
	Support summer make up classes/accelerated learning for IDP children	43,880	20,716	26,000	For school children who did not take final exams. Data received from Gedeo-West Guji (Ashenafi SIP)
	Provide emergency school feeding for 1,150,781 children affected by both drought and conflict in Ethiopia Somali and Oromia (including IDP children) (total cost: \$24,304,495, out of which \$6,232,164 has been funded by the development sector)	1,150,781	1.4M	18M	Data estimated from Oromia and Somali region as well as Gedeo-West Guji conflict
	Provide learning stationary for 1.4M drought and conflict affected children in Somali and Oromia regions, including IDP children. (Cost: \$ 5.8M)	1,150,781	1.1M	6.8M	Data estimated from Oromia and Somali region as well as Gedeo conflict
	Subtotal Pillar 2			26.3M	
3: National Systems Strengthening and	Develop capacity development system of EiE				
recovery	Strengthen Education Cluster coordination, data gathering and information sharing through capacity building			25,000	
	Subtotal Pillar 3			25,000	
Grand Total				40.9M	



EMERGENCY SHELTER AND NON-FOOD ITEMS

PEOPLE TARGETED



2.8м

Original 1.50м

REQUIREMENTS (US\$)



132.3м

Original 94.9м

GAP (US\$)



106.4м

EMERGENCY SHELTER AND NON FOOD ITEMS OBJECTIVE 1:

Provide immediate life-saving assistance to displaced and affected households though different modalities

EMERGENCY SHELTER AND NON FOOD ITEMS OBJECTIVE 2:

Reinforce disaster risk mitigation, safe building practices and rehabilitation and recovery efforts for disaster affected households

The escalation of the West Guji-Gedeo conflict has been the most notable change in the national context, with numbers of IDPs in need of ES/NFI support reaching the 500,000 mark (including all pillars). At time of drafting the Mid-Year Review (MYR), the situation remains dynamic, with significant numbers of people having returned either to their home communities, or to sites close to these, from which they can assess the safety of permanent return; or preparing to do so. It is likely that returnee numbers will substantially increase over coming weeks. At the same time, it has been assessed that a significant number of IDPs are reported to still be somewhat hesitant to return, not feeling that conditions in their communities of origin are, as yet, sufficiently secure. It is therefore expected that for the remainder of 2018, the cluster will need both to support returnees in their home communities, and provide continued support to continuing IDPs. In the case of the latter, local authorities are keen to move IDPs who initially sheltered in public buildings, particularly schools, so that these can be used for their normal functions, so further assistance will be needed in these sites; support will be provided to IDPs where they are dispersed in host communities, on an assessed needs basis.

As no long-term solution to the Somali/Oromia border conflict has yet been reached, and there has also been the aggravating factor of the change of political leadership in Somali region, the affected population is not expected to significantly diminish during the remainder of this year; though no major increase is currently anticipated.

According to documented assessments and anecdotal reports, the *belg/gu* rains were adequate in most regions of the country, resulting in no any major increases in the number of drought-displaced people. At the same time, the rains have not been sufficient to fully reverse the effects of several prior years of below-average rainfall, and it is thus anticipated that similar numbers of drought-affected people will require support for the remainder of 2018.

Recovery from the Gambella floods earlier in this year proceeded well, though with a remaining affected population of around 10,000 people still requiring assistance. Based on current meteorological predictions, flooding is anticipated to affect most regions of the country

in the coming *kirmet* season, and a national contingency plan was developed, to which the ES/NFI Cluster contributed. It is expected that the largest numbers of people affected will be in Oromia, SNNP, Amhara and Somali regions, but some degree of flood displacement is expected across nearly all regions of the country.

Strategy

The upsurge in numbers of IDPs in Gedeo-West Guji and the continuing large numbers on the Oromia – Somali border have meant that the ES/NFI Cluster's strategy has, to date, a significantly greater emphasis on Pillar 2, to meet immediate crisis needs, than was anticipated at the beginning of the year. There has been a relatively lower focus on Pillar 1, as energies have been consumed in meeting the new challenges, and for conflict-affected populations especially, returns have to date, been too uncertain and low in volume to allow much focus on Pillar 3.

The major strategic initiative under Pillar 1 is the development of a full ES/NFI Flood Contingency Plan within the framework of the national contingency plan, breaking down likely affected numbers per region according to severity, in which 12 cluster partners participated in. Of the total of households at risk of being displaced by flood, the cluster's plan is to target 17,750 under Pillar 2, with provision of immediate relief, and 7,000 with transitional shelter, housing repair and recovery under Pillar 3, under resources currently allocated. A further 10,000 households with outstanding unmet needs from previous floods in different parts of the country will also receive distributions under Pillar 2 in this period.

Under Pillar 2, continued substantial focus and investment is required for the Somali-Oromia border conflict, first, because some households are still in need of initial distributions, and secondly, the extended duration of displacement has meant that plastic sheeting initially distributed has suffered sun damage, and now requires replacement.

For the Gedeo-West Guji conflict, full kits are planned to be distributed to a further 28,281 households who have not yet received any level of ES/NFI assistance. Demand may

in fact be higher given initial reports that many returnee families have arrived at home destinations without the shelter and NFI goods previously distributed to them. Based on data so far available, the ESNFI Cluster is projecting distributions to 50% of affected families (in process of return or continuing displaced) therefore a total of 80,182 households under Pillar 2 for the initial stages of the return/ recovery phase; and for transitional or longerterm shelter to 10% of affected households, thus 29,000 under Pillar 3. The relatively low numbers in the latter reflect assessments of this point regarding proportions of those previously displaced who will achieve rapid enough resettlement in their community of origin to engage in longer-term solutions.

It needs to be noted that, given the particular nature of displacement in Gedeo-West Guji, the strategy of building collective shelters was implemented, with the same allocation of materials per family (plastic sheeting with eucalyptus poles) used to construct shelters for up to 20 families, and it is expected that this may continue during the return phase, particularly as some returnees initially locate within their home *kebeles*, but do not have sufficient certainty of security in their home villages to make permanent secure return, and thus initially remain in collective shelter.

The cluster is also supporting investment in Pillar 3 capacity, bringing on board technical expertise to research and develop appropriate long-term transitional shelter and recovery solutions. Work in this area will mainly be focused on research and consulting during the remainder of 2018, with the anticipation that better models will be ready to support

returns and long-term recovery as these gather momentum in the coming months.

Response Plan

A full breakdown of activities is provided in the table below, covering the different regions, crises and nature of response. As some key tasks under Pillars 1 and 3 are of research and preparatory in nature, and lack direct target locations and populations, or major budgets, they have not been included here.

The table does bear out the points given under cluster strategy, that the current situation has resulted in a stronger focus on Pillar 2 in nearly all locations. Shelter provision under nearly all Pillar 2 activities will continue to take the form of provision of plastic sheeting, and assistance to families and groups in constructing collective or family shelters. Direct support under Pillar 3 during the coming months will be largely similar, as returning families are provided with plastic sheeting either for initial repair to damaged homes in conflict-affected areas, or for construction of temporary shelter where original homes have been destroyed, or where families are initially settling in an interim location pending final return to their community of origin.

Final totals reflect the slightly unusual method of having initially split Shelter and NFI kits between households, to ensure some minimum coverage to the greatest possible number of beneficiaries; with the top-up stage then ensuring that as many as possible have received the equivalent of one full kit.

Crisis	Pillar	Activity	Beneficiaries	Requirements US \$
Flood	Pillar 1 Preparedness and mitigation	Conduct risk reduction activities in disaster prone areas including support for house repair and strengthening as well as awareness raising to promote safe-building practices	22,000 HH	8,250,000
		Support to organize reconciliation and peace dialogue/conference, capacity building, and community-based conflict early warning (C-warn) and community peace dividend initiatives, systems and structures that prevent and timely address conflict and subsequent displacements and loss of shelter	N/A	200,000
		Inform policy making on prevention and resolution of internal displacement at macro level through strategic dialogue and proper documentation of lessons learned, good practices and challenges	N/A	200,000

	Subtotal Pillar 1		22,000 HH	8,650,000
West Guji/Gedeo Conflict	Pillar 2 Preparedness and response	Distribution of emergency shelter/non-food items and cash grants to affected and displaced households respectfully of humanitarian principles	108,463 HH	(18,981,025)
Somali/Oromia Border Conflict		Distribution of emergency shelter/non-food items and cash grants	128,535 HH	(22,488,900)
Other Conflicts		Distribution of emergency shelter/non-food items and cash grants	17,000 HH	(2,975,000)
Drought		Distribution of emergency shelter/non-food items and cash grants	56,000 HH	(9,800,000)
Flood affected areas + projection (flood contingency plan)		Distribution of emergency shelter/non-food items and cash grants	28,029 HH	(4,905,075)
	Subtotal Pillar 2	Distribution of emergency shelter/non-food items and cash grants	338,000 HH	59,150,000
	Pillar 2 Preparedness and response	Increase preparedness efforts through prepositioning of ES/NFI stocks to support newly displaced households	20,000 HH	2,800,000
	Subtotal Pillar 2		358,000 HH	61,950,000
West Guji/Gedeo Conflict	Pillar 3 National systems	Strengthen overall response capacity through capacity building activities and	29,000	(14,862,500)
	strengthening and recovery	the reinforcement of regional coordination structures		
Somali/Oromia Border Conflict		Support return and re-integration shelter activities	81,000	(41,512,500)
Flood Contingency Plan		Support return and re-integration shelter activities	7,000	(3,587,500)
		n and re-integration shelter activities	117,000 HH	60,000,000
National systems	Pillar 3	Strengthen overall response capacity	N/A	1,000,000
strengthening and recovery		Strengthen overall response capacity through capacity building activities and the reinforcement of regional coordination structures	IV/A	1,000,000
		Increase monitoring and data collection of returnee households to be integrated into DTM tracking to support recovery initiatives	N/A	250,000
		Assist IDP's access personal and vital documents to restore their housing, land and property (HLP) rights, and to participate in public affairs and social organizations, which are closely linked with residency particularly in urban settings	N/A	100,000
		Collect, document and timely share information regarding durable solution choices and preferences of IDP's through community mobilization, intention surveys, household registration and informed consent to inform evidence-based planning of durable solutions	N/A	300,000
	Subtotal Pillar 3		117,000 HH	61,650,000



FOOD

PEOPLE TARGETED



7.95м

Original 7.88м

REQUIREMENTS (US\$)



750.8M Original 1.036B

GAP (US\$)



51.4_M

FOOD OBJECTIVE 1

To save lives and protect livelihoods of food insecure households through the provision of food assistance

FOOD OBJECTIVE 2

To prepare for and effectively respond to humanitarian shock related food needs

FOOD OBJECTIVE 3

To ensure that adequate food needs for the most affected people are met to improve food consumption, dietary diversity and reduce the number of people adopting negative coping mechanisms needs

The seasonal belg rains are expected to improve food security situation in the country, when compared to previous drought years. However, regional variations are expected in crop and livestock production, access to food, income and other livelihood sources. Natural hazards, including flooding, outbreaks of both crop and livestock pests and diseases will contribute to reduced incomes and food for poor and very poor households. This will be compounded by the residual negative impact of previous drought years, particularly on livestock herd sizes in agropastoralist and pastoralist areas. Conflict in Somali region, areas along the Somali-Oromia border and in SNNP is also the main driver of food insecurity in the country, severely affecting livelihoods of both pastoralist and agro-pastoralist households.

The favorable belg season, characterized with above normal to normal rains received in the south-eastern parts of the country, are expected to contribute towards slight improvements of the food security situation as consecutive years of drought have eroded the capacity of households for full livelihood recovery. Though pastures are expected to improve compared to previous drought years, leading to increased access to diversified food items including milk for pastoralist households, the destructing of infrastructure and crops due to flooding in low-lying areas will result in reduced crop harvest and loss of household livelihood sources. A decrease in livestock herd sizes due to previous drought years will limit household's access to food and incomes in pastoralist areas. Crop harvest is also expected to be below normal in southern Tigray due to pest outbreaks, erratic and poorly distributed rains.

In the north-central regions, including Afar and Amhara, there are indications of low crop production in the *belg* producing areas due to outbreak of pests, late onset and poorly distributed rains, and high variation in temporal and spatial distribution. This will negatively impact both crop and livestock production in some areas, resulting in a decrease in incomes from crop, livestock and livestock products sales. Increase is crop production is reported southeastern parts of the country, when compared to the previous years.

Belg assessment findings also reveal that staple food is relatively available in some regional

markets, including imported food items in the south and southeastern regions and locally produced cereals in central and northern regions. The decrease in trade between the southern and northern regions will result in price increases, affecting locally produced commodities including food items. High levels of unemployment and limited access to income will restrict access to food from market purchases, particularly for poor and very poor households.

The conflict along the Somali-Oromia border, SNNPR and insecurity in Somali region has contributed to population displacements in the three regions, increasing household's food insecurity due to loss of food, income and livelihood sources. As of July 2018, approximately 1.7million internally displaced people were being assisted through emergency food assistance activities in the three regions.

An analysis of the hot-spot classification indicates a slight decrease in the high priority *woredas*.

Strategy

The cluster strategy addresses different categories of crisis including; 1) drought, flood, and AWD, 2) Gedeo-West Guji conflict and; 3) Oromia-Somali conflict. Food Cluster partners will aim to distribute a standard food basket on a regular basis, targeting the most food insecure households including drought and conflict affected households. In drought affected communities, emergency food rations will be distributed when households face food gaps particularly during the lean season. This will involve the implementation of community level targeting to ensure that the most vulnerable people are selected for food assistance. In conflict affected regions, food sector partners will work with the existing governmentled coordination structures to ensure that the displaced and conflict affected people receive food assistance.

Food commodities will be dispatched from warehouses that are strategically located in the main cities and regional towns. In flood prone areas, partners will preposition food commodities to minimize delays in delivery and distribution of food assistance. Bi-weekly coordination meetings will continue to be held at national level to discuss implementation of planned activities and availability of resources to respond to food needs

^{*} Requirements based on the regular relief food basket (cereals, pulses and vegetable oil) in WFP and JEOP operational areas. NDRMC is planning to provide CSB to 35% of targeted beneficiaries.

in the country. At regional level, coordination meetings will be held to discuss any emerging needs that require intervention of partners.

The three food operators, NDRMC, WFP and JEOP, will provide food assistance to acutely food insecure people during the October to December period including conflict IDPs. Targeting will be undertaken to identify the most food insecure households requiring emergency food assistance. Through existing coordination mechanisms, the three operators will ensure prioritization of available resources to the most affected areas and population groups.

The integrated national-cash food plan will guide the transfer modalities to be provided to beneficiaries in targeted woredas. This will enable operators to identify the number of beneficiaries to be assisted through cash-based transfers and in-kind assistance. Response for cash-based interventions will follow the Government Channel One system.

Response Plan

The overall food requirements for the food sector in the 2018 HDRP is revised to US\$750.75 million mainly due to reduced number of rounds from initial 9 rounds to 6 rounds. This includes the additional requirements for IDP responses in Oromia, SNNPR and Somali regions. In the remaining two rounds, approximately US\$260.84million will be required to provide food assistance to food insecure people from October to December. Targeted beneficiaries will include 944,000 conflict IDPs, 7.01 million people who will face food consumption gaps due to poor crop harvest and lack of income to purchase food from the markets. 3.3 million people from the PSNP Public Work (PW) clients in hot-spot priority one woredas will receive food assistance during the hunger period, when they do not receive PSNP core -support. Operators have secured resources to cover some of the food requirements for the remaining rounds. The overall gap is estimated to be US\$51.4 million, mainly in locations that will be assisted through cash transfers by the Government and in East/ West Hararge for WFP response to conflict IDPs.

	Beneficiaries	Requirements	Rounds
	PSNP transitor	у	
Afar	381,286	\$10,088,408	2
Amhara	343,039	\$6,485,764	2
B/Gumuz	-		2
Diredawa	-		2
Gambela	-		2
Harari	-		2
Oromiya	1,146,217	\$19,934,758	2
SNNPR	-		2
Somali	1,193,391	\$30,382,422	2
Tigray	202,959	\$3,611,534	2
Total	3,266,892	\$70,502,887	

^{*} The updated figure of 7.9m relief food beneficiaries is a composite figure of all those assessed as being acutely food insecure – comprising 'resident' Ethiopians, IDPs and returnees – with immediate needs to be addressed for the remainder of the year through the provision of two rounds of assistance. Following the release of this Mid-Year Review local level authorities will be instructed to complete retargeting exercises, to ensure that those with the greatest needs are assisted.

^{*} To be confirmed by the Ministry of Agriculture

	Beneficiaries	Requirements	Rounds			
HDRP+IDPs +Returnees						
Afar	444,941	\$34,182,140	6			
Amhara	996,632	\$60,285,174	6			
B/Gumuz	13,812	\$1,186,976	6			
Diredawa	39,397	\$3,009,013	6			
Gambela	44,450	\$3,402,973	6			
Harari	15,703	\$1,109,473	6			
Oromiya	3,240,385	\$297,195,464	6			
SNNPR	684,201	\$82,061,159	6			
Somali	1,799,679	\$153,941,327	6			
Tigray	674,693	\$43,875,775	6			
Total	7,953,893	\$680,249,473	6			

Pillar	Activity	Beneficiaries	Estimated Requirements US \$	Estimated Shortfalls
Prevention and mitigation	Implementation of early warning systems and use the analysis for action (LEAP, LIAS)	N/A	N/A	N/A
Preparedness and response	Providing emergency food assistance to relief beneficiaries	7.95million	US\$680.2million	US\$49.9million
	Emergency food assistance for PSNP ex-public work clients during the transitory/ extended support period	3.3 million	US\$70.5million	US\$1.5million
			US\$750.7 million	US\$51.4million



HEALTH

PEOPLE TARGETED



7.5м

Original 6.47м

REQUIREMENTS (US\$)



114.8м

Original 74м

GAP (US\$)



99.2_M

HEALTH OBJECTIVE 1

Ensure access to integrated Primary Health Care (PHC including reproductive health) for 2.6 million drought and conflict affected population (including IDPs), promoting complementarity relationship with the nutrition, WASH, food and protection sectors to save lives and reduce morbidity.

HEALTH OBJECTIVE 2

Protect around 6 million people at risk from communicable diseases outbreaks (focus on AWD) through effective early warning, flexible rapid response mechanisms, and timely access to appropriate case management to support FMOH and RHBs.

HEALTH OBJECTIVE 3

Strengthen the coordination and incident command mechanisms at all levels (Federal to woredas) including preparedness and surge delivery capacity for natural and manmade disasters.

Since early June 2018, renewed intercommunal violence along the borders of Gedeo zone of SNNPR region, and West Guji zone of Oromia region, led to a surge in internal displacement of an estimated 818,250 people who settled within woredas, in different zones of both regions. The massive displacement resulted in a near-doubling of woreda populations in already densely populated parts of the country. Consequently, water and health services, already inadequate prior to displacement, are stretched beyond capacity. The host communities, which are already facing high levels of food insecurity and acute malnutrition coupled with ongoing disease outbreaks, have a limited capacity to absorb the new arrivals.

Conflict on 4 August in areas of Somali region caused displacement of about 52,000 individuals to collective centers in Jijiga alone; and potentially several thousand others displaced from different zones and woredas across the region. Hospitals and health facilities were left abandoned as health workers/ professionals fled to different locations due to insecurity. The situation is still unclear as it has been impossible to conduct detailed assessments in zones and woredas. Basic essential health services, WASH facilities/ services and day-to-day livelihood services are impacted due to widespread tensions and conflict, which has led to increased needs of basic health services and risks of outbreaks including Acute Watery Diarrhea (AWD), measles and other communicable diseases. This creates conditions requiring additional resources and capacities to respond to the emergency health needs of IDPs and host communities across the region.

The major burden of disease among the host population include, but are not limited to, febrile illnesses including malaria, respiratory tract infections, diarrheal diseases, scabies and measles. At present, most reported diseases amongst IDPs are diarrhoea, pneumonia, and untreated wounds. Access to health services is suboptimal due to limited healthcare facilities, limited staff, and inadequate medical supplies available public facilities. Disruption of health services such as routine immunization predisposes the population to outbreaks of

vaccine-preventable diseases like measles, yellow fever, meningitis, diarrheal diseases and hepatitis A and E. With the ongoing rainy season (mid-June to mid-September) the situation is anticipated to worsen. Heavy rains will likely increase the risk of vector and waterborne diseases. The congested and unhygienic living conditions of IDP sites also increase the risk of communicable disease outbreaks. Poor WaSH conditions in collective sites and other IDP shelters has heightened the risk of waterrelated diseases including AWD.

The Afar region suffered an AWD outbreak from May to August 2018, with 1,008 reported cases. Currently, Tigray region and Dire Dawa municipality are responding to ongoing AWD outbreaks. An outbreak in any region can spread to other regions through regular population movements, requiring investments in preparedness measures including prepositioning of medical and WaSH supplies.

Health and nutrition surveillance remain a challenge across all regions with low reporting rates from health facilities at the woreda and zonal levels. Delays in Moderate Acute Malnutrition (MAM) management risks deteriorating conditions of affected children into Severe Acute Malnutrition (SAM) cases, increasing the SAM caseloads in Outpatient Therapeutic Programs (OTPs) and Stabilization Centres (SCs). In addition, the capacity gaps among healthcare workers on SAM management affect the quality of care provided and highlights the need for continued training and on-site mentorship at SCs.

Strategy

Health partners will work with the *woreda*, zonal and federal ministry of health to provide quick impact services and supplies to people affected by disease outbreaks, natural disasters or medium to large-scale population movements (both IDPs and returnees) in areas where partners are not present or where the needs exceed existing capacities.

Acute Watery Diarrhea

Since the beginning of AWD outbreaks in 2015,

around 500 woredas and towns have reported AWD cases. At risk woredas are those which have been affected by AWD at least twice since 2015, woredas/towns with relatively higher number of AWD cases during the previous outbreak, and areas with a potential risk factors such as areas with expected pilgrim gatherings, holy water sites, IDPs/refugee sites, and investment corridors.

In July 2018, the Ethiopian Public Health Institute's (EPHI) Public Health Emergency Management (PHEM) Center Emergency Operation Center (EOC), 135 woredas as high risk based on the aforementioned conditions. Out of 22,684,904 at high risk population (0.002 attack rate) in those woredas, 45,370 AWD cases are expected. Out of the expected caseload, 20 per cent (9,074 cases) are expected to experience severe dehydration. These numbers do not include the recent risks faced by the Gedeo-West Guji IDP crisis, where there is a high risk of a further 20,089 AWD cases, 4,018 severe dehydration cases.

To effective prepare for and respond to potential outbreaks, the Health Cluster with the Ministry of Health, will at all levels, focus on the following interventions:

- Strengthen coordination and response structures: ensure multisector coordination and community participation in affected and at-risk areas;
- Build the capacity of the healthcare providers at all levels and provide technical support in planning and implementation (including strengthening of preparedness plans at the woreda level);
- Training of health workers: health workers will be trained on surveillance, case management and infection prevention;
- Prepositioning of supplies: essential supplies will be distributed to regions and zones with high risk;
- Community mobilization: prevention and care seeking messages will be disseminated using available structures (local media, ERCS volunteer network, community structures);
- Surveillance and reporting: strengthening surveillance systems, routine alert reports, outbreak investigation, training for health care providers at all levels.

Gedeo-West Guji

In Gedeo-West Guji, health sector partners will concentrate on providing continuity of services for IDP populations and re-establishing health services in areas to which IDPs are returning. This entails funding for Mobile Health and Nutrition Teams (MHNTs), refurbishment of damaged health facilities and provision of medical supplies. Training of health workers on AWD control and basic PHEM will also be prioritized. The focus includes supporting the Ministry of Health with 5 core activities:

- Preparedness and Response to potential outbreaks of Diseases of Public Health Importance
- Establishing temporary health facilities (static and mobile), and support of existing health facilities for the provision of primary healthcare services.
- Rebuilding damaged health facilities and relocating health facilities for returning populations.
- 4. Enhancing surveillance/early warning and rapid response mechanisms for outbreak prone diseases and coordination at all IDP sites.
- Improving access to proper hygiene, sanitation and safe water supply at IDP sites and for returning communities.

Somali region

The Health Response Plan is currently being developed in collaboration with the Somali Regional Health Bureau based on the impact of the events that were triggered on 4 August, and the findings of the six monthly *belg* and *gu* assessments. The focus of the response is on ensuring continuity of services and response capacity, including:

- Strengthened surveillance and response to outbreak capacity;
- Provision of essential health services to IDPs and host populations;
- Identification, referral and integrated multi-sectoral services available to protect vulnerable and at-risk groups from violence, GBV, exploitation and abuse, including refugees, IDPs, women, the elderly and people with disabilities;
- Procurement, storage and distribution of

- essential medicines and medical supplies;
- Effective coordination and sharing of information and resources among health sector partners in support of the response.

Oromia - Somali crisis

- Provision of PHC and referral services for IDPs and drought affected communities;
- Procurement, storage and distribution of essential medicines and medical supplies;
- Provision of incentives to health workers who are expected to provide health services with additional workload and extended work hours to emergency situations;
- Further strengthening of early warning, outbreak investigations and reporting trough effective surveillance of reportable/ notifiable diseases;
- Preparedness and response to outbreaks mainly AWD, measles and other notifiable diseases;
- Effective coordination and sharing of information and resources among health sector partners in support of the response.

Response Plan

The Health Cluster's response strategy and plan will continue to be implemented in collaboration with zonal, and regional health bureaus and the Federal Ministry of Health, with a focus on providing humanitarian lifesaving and life-sustaining health services to the most vulnerable people, while also supporting the strengthening of the capacity of the health sector, to increase access to, and equity of, health services across and within crisis-affected populations; enhance the capacity of the health sector to prepare for and support responses to the needs of population faced with outbreaks, drought and conflict for a more effective health response. In particular, the Health Cluster will continue to:

Under Pillar 1, the cluster will ensure access to integrated primary health care (PHC), including maternal and reproductive health services for drought and conflict affected populations (including IDPs), promoting complimentary relationships with nutrition, WASH, food and protection sectors to save lives and reduce morbidly. Under Pillars 2 and 3, the cluster will aim to protect around 6 million people from communicable disease outbreaks (focus on AWD and measles) through early warning, flexible rapid response mechanisms, and timely access to appropriate case management to support FMOH and RHBs. Under all pillars, the cluster will strengthen the coordination and incident command mechanisms at all levels (federal to woredas) including preparedness and surge capacity delivery for natural and man-made disasters. The following table describes the needs until the end of the year.

Crisis	Pillar	Activity	Beneficiaries (individuals)	Requirements US \$
Flood-induced IDPs	Pillar 1	Resilience interventions		
	Prevention and mitigation	• Procure and avail medical supplies to prevent and manage potential measles outbreaks	402,667	369,420
		• Procure and avail medical supplies to prevent and manage potential, yellow fever, rabies, meningitis outbreaks	545,204	456,930
		• Distribution of LLINs for prevention of vector-borne illnesses for IDPs due to flooding	195,279	1,220,494
	Pillar 1 Subtotal		1,143,150	2,046,844
	Pillar 2 Preparedness and response	Procure and avail medical supplies and equipment to manage relapsing fever and Pneumonia outbreaks as well as snake bites in flood affected areas	70,500	422,630
		Procure and avail medical supplies and equipment to manage potential AWD outbreaks in flood affected areas		28,936

		Procure and avail IDP kits for the management of basic acute and chronic illnesses	195,279	1,271,710
		Impact assessment by rapid response teams (RRTs)		75,400
		Deployment of mobile health and nutrition teams (MHNTs)		260,601
		Access to essential PHC and nutrition services through MHNTs and Static temporary clinics	103,218	
	Pillar 2 Subtotal		2,069,277	
	Total		4,116,277	
Conflict-induced IPDs from Gedeo- West Guji	Pillar 2 Preparedness and response	Preparedness and Response to diseases and incidents of Public Health Importance	1,010,934	2,716,676
		Provision of PHC services to IDPs		10,143,331
	Pillar 2	Provision of PHC services to returnees		965,638
		Enhancing surveillance and coordination		344,443
		Improving WASH		34,400
	Pillar 2 Subtotal			17,389,956
Conflict induced IPDs from Oromia- Somali	Pillar 2 Preparedness and response	Access to essential PHC and nutrition services through MHNTs and Static temporary clinics	1,492,777	1,970,000
Drought-induced IDPs in Afar and Somali	Response and Preparedness	Access to essential PHC and nutrition services through MHNTs and Static temporary clinics to drought IDPS and affected communities	1,565,857	1,400,000
(Continuation of 49 RHB MHNTs)	Pillar 1 Prevention and Mitigation	Sustaining flexible and scalable Rapid Response Mechanisms to health threats		1,360,000
General Response for all IDPs and population at risk	Pillar 2 Preparedness and response	Medicines and medical supplies for free of charge treatment for all categories IDPs and host communities	750,700	5,800,000
		Preparedness and Response to AWD	77,370	5,220,999
		Maternal and reproductive health services for all categories of IDPs	184,680	1,600,000
		Supporting RHBs to respond to the health and nutrition needs of all categories of IDPs through mobile banking payment of per diems to health workers and provision of fleet management services.	1,004,278	1,900,000
	Subtotal			1,9250,999
TOTAL			7,598,743	40,757,076



LOGISTICS

PEOPLE TARGETED



1.9_M

REQUIREMENTS (US\$)



0.4_M

GAP (US\$)



0.4м

LOGISTICS OBJECTIVE 1

To provide warehousing facility under service provision to humanitarian organizations responding to the crisis. Logistics Cluster supports humanitarian actors responding to the crisis by providing suitable warehousing facility under service provision in strategic location, avoiding duplication of efforts and ensuring the optimal use of locally available resources.

LOGISTICS OBJECTIVE 2

inter-agency To maintain logistics coordination **⊿** information management in order to support humanitarian actors. The Logistics Cluster provides coordination and information management to support operational decision-making and improve the predictability, timeliness and efficiency of the humanitarian emergency response.

LOGISTICS OBJECTIVE 3

To enhance capacity of humanitarian actors via dedicated logistics trainings. The Logistics Cluster provides trainings on humanitarian supply chain and logistics management to enhance the logistics capacity of humanitarian actors including government.

Oromia is the most populous region in Ethiopia, contributing approximately a third of the population in the country. Since 2016, conflict along the Oromo-Somali regional boundary resulted in displacement of about1. 1million people in both regions - 58 per cent in Oromia region. The main causes of conflict are disputes over the regional boundary and natural resources, including wells and grazing land between the Somalis, who are mostly pastoralists, and Oromos who tend to be farmers as well as pastoralists. The conflict also resulted in increased food insecurity in areas that were previously already affected by consecutive years of drought. The Government, through the NDRMC, has been providing food assistance to nearly 700,000 conflict affected people in seven zones. However, monitoring conducted by humanitarian actors and findings from the DTM, indicate that there are food gaps among IDP households and irregular deliveries of rations.

The DTM rapid response assessment conducted in July reported some 822,187-displaced people in Gedeo zone alone. The IDPs were spread across 183 sites in Bule, Dilla Zuria, Kocehere, Gedebe, Wanago, Yirgachefe towns. In West Guji zone, zonal authorities confirmed at least 188,747 displaced people across 28 sites in Abaya, Birbirsa Kojowa, Bule Hora, Gelana, Hambela Wamena and Kercha woredas. Some 30 per cent of the population are female-headed households. In both zones, the vast majority of the IDPs are residing with already food insecure host communities, while a relatively smaller number are residing in make-shift collective centers such as public buildings and churches without adequate food and water and substandard sanitation and hygiene facilities. The level of acute malnutrition among IDP children is also a grave concern. Nutrition screenings conducted by the zonal health office this month found an average of 27 percent GAM and 3 per cent SAM among children under five years of age in IDP sites in West Guji zone. Screening results also revealed that 51 per cent of the pregnant and breastfeeding mothers were malnourished in these sites. In 13 of the IDP sites, SAM and/or GAM rates were higher than the emergency thresholds. The Government and partners have taken several measures to enhance response coordination and to boost response capacity at site level. NDRMC is facilitating the expedited customs clearance within Government for incoming relief supplies. The key priorities are emergency shelter and non-food items, food and health outbreak prevention, including through site decongestion and expansion of WaSH interventions. Following the Government's official announcement of the start of returnee process, a total of 421,907 returnees are back to original residences place, as of 11 September, still requiring humanitarian assistance both at displacement and returnee sites.

Strategy

As part of the returns process, WFP is conducting a logistics assessment in areas of returns in West Guji and Gedeo zones. The main objectives of the assessment are to look at local storage capacities, identify the logistics gaps of partners operations and the establishment of a logistics hub, in order to ensure efficient response in the regions. In addition, the assessment will also assist UNHAS with identification of a possible landing space for helicopter, if necessary. Similar logistics assessments will be carried out in Somali region to equip other clusters in order to provide timely assistances.

Response Plan

WFP will provide logistics coordination and IM support by providing logistics expertise to improve the efficiency of the response, coleading with the NDRMC the EOC logistics coordination meetings, and developing a Logistics Overview Map of the affected zones in the EOC. The Logistics Cluster will also continue to provide storage spaces in Dilla for MSF-H, UNHRC/IRC, UNICEF, WHO and Government, and facilitate office spaces with internet connections and other facilities at WFP Logistics Hub in Dilla. Finally, the cluster will provide training of trainers on logistics management to humanitarian partners and Government employees for improved logistics in emergency settings.

Crisis	Pillar	Activity	Beneficiaries	Requirements US \$
Gedeo-West Guji Conflict	Pillar 2 Preparedness and response	Logistics coordination, GIS mapping and information management for the logistics response	818,000	
		Logistics augmentation including: temporary inter-agency storage and cargo reception facilities and a dedicated truck fleet for surface transport of humanitarian cargo both under service provision (cost recovery basis).		
		Logistics Capacity Assessment of the affected zones to make informed decisions based on a clear picture of the situation, the context and the operational constraints.		
		Trainings on logistics managements to government and all humanitarian partners for a proper handling of emergency relief items at all locations.		
	Subtotal Pillar 2		818,000	
Oromia-Somali Conflict	Pillar 2 Preparedness and response	Logistics coordination, GIS mapping and information management for the logistics response	1.1 M	
		Logistics augmentation including: temporary inter-agency storage and cargo reception facilities and a dedicated truck fleet for surface transport of humanitarian cargo both under service provision (cost recovery basis).		
		Logistics Capacity Assessment of the affected zones to make informed decisions based on a clear picture of the situation, the context and the operational constraints.		
		Trainings on logistics managements to government and all humanitarian partners for a proper handling of emergency relief items at all locations.		
	Subtotal Pillar 2		1.1M	
Total			1.9 M*	\$410,480**

^{*}No direct beneficiaries - the intervention will provide logistics support to all operations in the region. The number of beneficiaries reflects the overall target for the humanitarian intervention.

^{**}WFP will mobilize its available in country logistics assets such as mobile storage units and other logistics handling equipment's to support the response. The funding requirement is for the deployment of 2 dedicated logistics staff and a driver to conduct the assessments, information management and overall coordination of logistics response for both operations.



NUTRITION

PEOPLE TARGETED



4.5_M

Original 3.84_M

REQUIREMENTS (US\$)



218.3м

Original 198.3м

GAP (US\$)



71.3м

NUTRITION OBJECTIVE 1

370,000 SAM cases (children under five years) and 4.16 million MAM cases (children under five years and pregnant and lactating women) identified and treated for severe and moderate acute malnutrition, ensuring the beneficiaries have access to IYCF-E support and expanded access to a continuum of care for SAM-MAM case management.

NUTRITION OBJECTIVE 1

Integrated response with WASH, Health, WASH and food or cash is promoted to mitigate against nutrition vulnerability.

NUTRITION OBJECTIVE 3

Approximately 20,000* acutely malnourished children from internally displaced population timely identified and treated with MAM and SAM management services to prevent further impact of the experienced shocks. (* 13.5% population of U5 in 1 million IDP X 20% GAM estimated).

Despite productive *belg* and *kiremt* rains in much of the country, the *belg*/gun assessment findings suggest that the scale and locations affected by high food insecurity remain unchanged with 215 priority one, 134 priority two and 96 priority three *woredas* identified. This is almost half the country.

The three main priorities for the Nutrition Cluster in support of the Government response are: a) extended high response for communities in areas of protracted drought, mainly across the southern belt and extensively across Somali Region, parts of the central highlands of Oromia, two thirds of Afar, and parts of northern Amhara and south eastern Tigray. In Somali Region in particular where significant loss of assets and livestock were experienced due to severe back to back drought in 2016/2017/18 affected communities have not been able to recover their assets or their health and nutrition status. In addition, the political instability that has grasped the region since August has disrupted all basic services including health and nutrition, causing significant turnover of trained government staff and the temporary withdrawal of IPs. While systems are now resuming, the response has suffered a considerable set back amid a period when high rates of acute malnutrition prevail. The Somali Emergency Nutrition Response remains a top priority. b) The second priority is the continued emergency nutrition response in zones highly affected by the large influx of conflict affected internally displaced people (IDP) due to the Oromia-Somali border conflict. With displacement estimate of up to 1 million individuals during the peak, increased strain on health system and elevated need for emergency nutrition response due to the associated high vulnerability of IDP which continues to require enhanced outreach health and nutrition services beyond the reach of the static services. c) The third priority is the response in Gedeo and West Guji Zones affected since conflict erupted in April 2018 between ethnic Gedeos and West Gujis resulting in the displacement of 1 million people. The elevated needs for health and nutrition services by IDPs and additional surge support for the overwhelmed health system continues to be a Cluster priority for nutrition.

In addition, the productive *kiremt* in 2018 has started to cause severe flooding in pocket areas of Somali Region, Oromia and parts of Amhara. The National Food contingency plan predicts 713,304 people will be affected by floods this year. The Flood response plan revised in August projects up to 179,229 individuals likely to be displaced as a result.

Between January and July, over 100 per cent of the monthly projected caseload for SAM was reached, with a cumulative total of 198,649 children treated for severe acute malnutrition (SAM), with performance indicators for treatment quality remaining well above international standards. In addition, 1,256,620 individuals were treated for MAM (617,006 children aged 6 to 59 months and 639,615 pregnant and nursing mothers treated for acute malnutrition). This is surpassed the projected caseload of 1.1 million planned during the sixmonth period January to June 2018.

Strategy- common to all three crisis

Ensuring support for the Government's national CMAM service provision to effectively treat and manage SAM and MAM in over 18,700 health facilities remains a priority for Cluster partners. In Priority 1 woredas and woredas where high populations of IDP now exist, UNICEF and WFP has scaled up the SAM-MAM treatment response to the Government to support additional outreach emergency health and nutrition services to remote communities through Mobile Health and Nutrition Teams in addition to strengthening the capacity at static health facilities. NGOs have been mobilised to provide the additional technical and logistical support targeting both to static services and through mobile health and nutrition teams deployed in hard to reach areas and where the CMAM service capacity and access is low.

The core components the nutrition response package remains provision of effective SAM and MAM treatment through Government CMAM/ TSFP; support for nutrition screening and early case detection; counselling and promotion of optimal practices on Infant and Young Child Feeding (IYCFE); raised community awareness on optimal childcare, feeding practices and hygiene promotion; improved access in remote areas, as well as support for zonal coordination.

The addition of NGO-managed MHNTs in SNNP and Oromia in 2018 to quickly respond to emergency health and nutrition needs of IDPs is highly valued as a first response.

Priority locations include all Priority 1 woredas of Somali region; six zones of Oromia with high populations of IDPs (East Harerge, West Harerge, Bale, Borena, Guji and West Guji); two zones of SNNPR (Gedeo, Segen); drought affected communities in 23 Priority 1 woredas of Afar; drought affected communities in northern Amhara (Wag Hamra, North Gondar, South Gondar); and pocket areas of Tigray where belg rains were suboptimal with expected significant loss of belg yields. Recent events also raise the critical needs of new IDP surges, the additional support needs of IDP returnees and any sporadic unrest resulting in displacement and significant loss of assets, livelihoods or health system disruption to be prioritised as appropriate.

The emergency nutrition response package is well defined and continues to form a key component of the overall response package providing sufficient relief food (full basket cereal/ pulse/oil or cash as appropriate), health services (effective essential PHC services through static, outreach, MHNTs) and WASH (latrine and clean water access, hygiene promotion and awareness). Protection cross cuts the nutrition response with attention given to minimising risks during the response. Ensuring additional logistic and staff support is availed to static health facilities during periods of crisis, is an essential component of the response. Unless the full general food distribution is provided, along with comprehensive WASH and health services with quality screening to identify wasting early, the nutrition situation will deteriorate among the most vulnerable children and pregnant and lactating women.

UNICEF remains committed to ensure commodities for effective SAM treatment and required technical and coordination support is delivered to the government to manage the national SAM caseloads. So far, UNICEF has a gap of \$3M to procure the specialised treatment commodities (RUTF, therapeutic milk, essential drugs) to secure the SAM treatment through to the end of the year, based on the elevated caseload, and support for the National flood response plan. As provider of the last resort, UNICEF will also seek to replenish the buffer stock of BP5 used as a break through ration in extreme conditions when government CMAM services cannot reach communities

usually in rapid onset crisis. UNICEF faces a gap of \$4.7M in BP5 procurement, which brings the UNICEF supply gap to \$7.7Million. Additional nutritionists providing technical and coordination support were recruited to target areas to support the nutrition response.

WHO has extended support to stabilisation centres in priority areas where admission of serious complications associated with SAM require upgraded medical and treatment skills, materials and higher-level medication provided on a 24-hour basis in a hospitalised environment. Advancing on the support provided in 33 SCs in Somali region (ongoing), WHO will scale up support in 26 additional SCs, in SNNP and Oromia region where needs are highest. The total requirement for this SC support is \$2.6 million, \$300,000 has recently been secured, Hence WHO reports a gap of \$2.3M requiring immediate funding.

The cost of national MAM treatment across all P1,2 and 3 hotspot woredas is \$124.37 million for the year based on 4.16 million individuals in need. WFP currently procures the specialised nutritious foods to effectively treat MAM in children aged 6-59 months and in PLWs with acute malnutrition living in Priority 1 woredas. WFP extends this TSFP support to all IDPs with MAM residing in and beyond Priority 1 woredas. Given the rise in IDP populations, MAM treatment needs have risen, and WFP has also elevated the support needs through to the end of the year to 2 million. WFP expanded the modelling of MAM treatment support to include provision of MAM treatment through government health facilities where feasible and through MHNT managed by NGOs in priority areas with high IDPs caseloads (Gedeo and West Guji zones and zones of Somali and Oromia Regions). WFP has deployed technical and operational staff to target zones and woredas to monitor the TSFP delivery and performance, ensuring linkages with OTP and the response of other sectors. So far, WFP has a shortfall of \$36.9 mill needs to be addressed immediately to cover the cost for procurement of specialised nutritious foods and operational costs until end of the year - preventing a pipeline rupture and disruption of the WFP managed TSFP in target

The work of international and national NGOs to ensure full CMAM/TSFP services reach the most vulnerable host communities and IDPs living in hard to reach areas, and where the static health system is overstretched, is of high value in the overall response. A total of 186

Priority 1 *woredas* currently have ongoing NGO support, and a projected gap of up to 29 *woredas* P1 remain. The majority of the 2018 response will expire by the end of Q3 with additional extension of needs projected. The proposed need is \$3 million where project extensions are likely.

Challenges

Mounting effective emergency response to several large scale crisis in the country in 2018 remains a challenge as basic services and systems are overwhelmed and resources overstretched. Ensuring pipelines are secured and sufficient staff and logistics are mobilised to effectively treat high levels of acute malnutrition, remains a challenge.

The complex nature and needs associated with the IDP responses in several regions requires frequent reprioritisation of needs, and boosted resources to treat high levels of acute malnutrition among host and IDP living in interim sites, among host communities and those in large collectives. The constant is the higher vulnerability of IDP often living with substandard access to shelter, and basic amenities, high risk of communicable disease outbreaks and insufficient nutrition for the most vulnerable.

The political unrest and subsequent instability across Somali Region has significantly hampered the emergency response, with high government turnover, NGO temporary withdrawal impacting on the service provision for communities where acute malnutrition remains very high.

The NMA forecast for pocket flooding and risk of flash floods in target areas remains a highly likely this season. The elevated risk of flooding affecting vulnerable communities and causing displacement will require additional emergency response in pockets areas of 7 zones now receiving heavy rains or at risk of flash flood and overflow from major rivers. Funds are limited for this response.

Implementation Coordination

The Emergency Nutrition Coordination Unit (ENCU) of the Early Warning office of the NDRMC continues to coordinate the nutrition response, share capacity and gap analysis, support fund mobilization, deliver targeted nutrition assessments (SMART NS and Coverage Assessments) and monitor quality of the response delivered by partners. Six regional ENCU teams play a central role in early warning and nutrition trend analysis to inform intervention needs and mapping. Due to the complex nature of this response the role in multisectoral coordination has become a core responsibility of the ENCU teams.

Strategy

Supporting the National CMAM programme to ensure effective SAM and MAM treatment continues as the core strategy for the response across all regions. Emphasis on:

- Ensuring early case detection and referral;
- enhanced access to quality services delivered by trained health workers and health extension workers;
- promotion of continuum of care for SAM and MAM treatment and management
- IYCFE promotion targeting young children under two years and PLW to promote optimal breastfeeding and life-saving child caring and feeding practices

There are over 18,700 health facilities now reporting service provision for SAM management due to continued scale up efforts. Given the scale of the IDP response and need to maintain high coverage in pastoral areas of Somali, the response strategy has scaled up the presence of MHNT managed by NGO to improve the coverage of CMAM response.

Crisis	Pillar	Activity	2018 Beneficiaries	Regions/Zones Affected	2018 Requirements US \$
Conflict IDP Somali-Oromia	2	SAM treatment	115,000	"Somali: Daawa, Erer, Fafan, Liban, Sitti	\$12,276,000.00
				Oromia: Bale, Borena, East and West Hararges, Guji	
				(31% of the caseload)"	
Conflict IDP Somali-Oromia	2	SC WHO		16 SC supported & maintained	\$960,000.00
Conflict IDP Somali-Oromia	2	C4D/SBCC, IYCF-E			\$246,000.00
Conflict IDP Somali-Oromia	2	Micronutrients			\$620,000.00
Conflict IDP Somali-Oromia	2	Nutrition Assessments			\$325,500.00
Conflict IDP Somali-Oromia	2	BP5			\$1,500,000.00
Conflict IDP Somali-Oromia	2	Coordination			\$307,200.00
Conflict IDP Somali-Oromia	2	MAM treatment	20,953 U5, 18,989 PLW	Focus P1 woredas host and IDP East and West Harerge, Borena and Bale, Guji; Somali response is incorporated in full SR drought response	\$5,080,000.00
Conflict IDP Gedeo West Guji	2	SAM	15,000	"Oromia: West Guji SNNP: Gedeo (4%)"	\$1,584,000.00
Conflict IDP Gedeo West Guji	2	SC WHO		10 SC supported & maintained	\$600,000.00
Conflict IDP Gedeo West Guji	2	C4D/SBCC, IYCF-E			\$100,000.00
Conflict IDP Gedeo West Guji	2	Micronutrients			\$80,000.00
Conflict IDP Gedeo West Guji	2	Nutrition Assessments			\$42,000.00
Conflict IDP Gedeo West Guji	2	BP5			\$1,000,000.00
Conflict IDP Gedeo West Guji	2	Coordination			\$400,000.00
Conflict IDP Gedeo West Guji	2	MAM treatment	38,420 U5, 25,492 PLW	Host and IDP 12 P1 woredas and town based IDP sites as needed	\$-
Drought/flood/rest of the country	2	SAM	240,000	"The rest of the country (the remaing zones in Oromia, SNNPR and Somali and other regional states and city administrations) (65%)"	\$25,740,000.00
Drought/flood/rest of the country	2	SC WHO		33 SC supported and maintained	\$740,000.00
Drought/flood/rest of the country	2	C4D/SBCC, IYCF-E			\$154,000.00

Drought/flood/rest of the
country
Drought/flood/rest of the
country
Country

2	Micronutrients		\$1,300,000.00
2	Nutrition Assessments		\$682,500.00
2	BP5		\$2,400,000.00
2	Coordination		\$652,800.00
2	MAM treatment	1,327,680 U5, 1,327,281 PLW	\$31,820,000



PROTECTION

PEOPLE TARGETED



0.9м

Original 0.34м

REQUIREMENTS (US\$)



11.3м

Original 17.3м

GAP (US\$)



0.8м

PROTECTION OBJECTIVE 1

Targeted vulnerable groups, including women, girls and boys, elderlies and persons with disabilities receive lifesaving protection interventions in response to GBV, neglect, abuse, exploitation and other protection risks.

PROTECTION OBJECTIVE 2

The protection needs of IDPs and other vulnerable groups are identified, recognized and addressed by government, humanitarian and development actors.

Following the recent conflict in Gedeo and West Guji zones, the number IDPs has grown exponentially to more than 2.8 million across the country. According to seasonal belg assessment reports, protection risks have increased since the last meher assessment. Some of the concerns include lack of access to basic services, child labour and separation of families, Gender Based Violence (GBV) cases (rape, sexual violence, domestic violence, trading sex for food/favours and abduction), as highlighted in the different reports, mainly Somali and Oromia regional reports. In addition, psychosocial distress and the situation of older persons left behind have been identified in the majority of the assessed regions. In view of growing specific needs of IDPs, resources remain limited. The protection response is, therefore, provided on an ad hoc basis and deemed to be hugely insufficient.

The current emergency in the Gedeo and West Guji zones of the SNNPR and Oromia regions respectively has created increased pressure on the work of Protection Cluster, given that both previous and current protection funding is extremely limited for responding to the Oromia and Somali conflict-inducted displacement situation.

Strategy

For IDPs affected by the Gedeo-West Guji and Oromia-Somali conflict, the Protection Cluster will prioritize those *woredas* hosting IDP sites with more than 3,000 IDPs and collective centres, and conflict-induced IDPs. Special attention will be given, among others, to women and children, persons with specific needs and older persons.

Gedeo-West Guji conflict

Some of the needs identified include training on protection and human rights related to IDPs, identification of unaccompanied and separated children for family tracing and reunification, case management by the Bureau for Women and Children Affairs (BoWCA) for child protection and GBV issues and GBV prevention and risk mitigation activities. In addition, psychosocial first aid/psychosocial support, establishment of child and women friendly spaces, dignity kits, community-based protection mechanisms and human rights monitoring are very much needed

to ensure a holistic protection response.

The Protection Cluster aims to increase its protection presence to scale up community protection mechanisms, including the establishment of child friendly spaces. These structures will ensure that persons with specific needs are identified and provided with emergency protection services. Government and partner staff will be supported to ensure the delivery of psycho-social counseling, GBV identification, referral to service providers and case management, family tracing, interim care arrangements, and reunification of separated children. Girls and women of reproductive age will be supported. The Protection Cluster will engage in consultations with IDPs and the government to ensure that any IDP return process respects the principle of voluntariness to be ascertained at the individual household level and that return will take place in conditions of safety and dignity, including among others restoration of and compensation for lost and damaged property and livelihoods. This will require further training and advocacy. An amount of USD 3,208,613 will be required to implement activities based of the designed strategy.

Oromia-Somali conflict

In the Oromia-Somali conflict, protection needs are similar to those in Gedeo and West Guji. These include training on protection and human rights related to IDPs, identification of unaccompanied and separated children for family tracing and reunification, case management by BoWCA for child protection and GBV issues and GBV prevention and risk mitigation activities. In addition, psychosocial first aid/psychosocial support, establishment of child and women friendly spaces, dignity kits, community-based protection mechanisms and protection and human rights monitoring are very much needed to ensure a holistic protection response.

With respect to prevention, mitigation and response, awareness-raising and protection mainstreaming to contribute to the reduction of protection risks, in collaboration with other clusters, is envisaged. The strategy, however, mainly focuses on preparedness and response given the immediate nature of the required response.

In light of the direct response, protection assessment/monitoring, identification of unaccompanied and separated children for the purpose of family tracing and reunification, undertaking of protection services, such as case identification and referral, advocacy and application of a community-based approach to ensure community participation. An amount of \$8M will be required to implement activities based of the designed strategy.

Drought, floods, and AWD

IDP community participation needs to be strengthened though access to information and community based protection mechanisms in the Somali drought affected IDP context. Implementation of services through existing structures established by Mobile Protection Teams (MPTs) is planned to attain the objective of increasing IDPs' participation. This will require an amount of \$5,000.

Response Plan

Protection mainstreaming is expected to be undertaken by different humanitarian sectors and government bodies during the delivery of services. This will support the identification of IDPs with specific needs for targeting in view of limited/insufficient resources. The protection

mainstreaming envisages advocacy, capacity development, and follow-up activities through protection staff. Training on basic protection principles will enhance the capacity of the different humanitarian actors and government entities to achieve significant protection dividends in humanitarian action. Protection and human rights monitoring will be ongoing activities to identify trends and plan responses accordingly. This will be done in coordination with government and UN entities that have specific mandates for the respect of human rights. Protection monitoring will require deployment of protection monitoring teams.

Overall, it should be noted that the financial requirements indicated in the current document reflect the capacity of Protection Cluster partners to implement additional protection activities in the last quarter of 2018. In addition, while USD 10.5 million has been received in the past months by Protection Cluster partners, part of this funding has yet to be implemented by Protection Cluster partners by 31 December 2108. The requirements, therefore, do not reflect the current actual protection funding needs on the ground. Significant additional protection funding will urgently be required in 2019.

Crisis	Pillar	Activity	Beneficiaries	Requirements US \$
Gedeo and West Guji	Pillar 2: Preparedness and response	IDPs with specific needs to be targeted for services (protection mainstreaming)	139,170	n/a
		Training on protection and human rights		
			Govt and humanitarian actors 210	180,000
Gedeo and West Guji	Preparedness and response	Case management by BoWCA for child protection and GBV issues	4,000 children	225,000
Gedeo and West Guji	Preparedness and response	GBV prevention and risk mitigation	1, 400	136,000
Gedeo and West Guji	Preparedness and response	Identification of unaccompanied and separated children for family tracing and reunification	UASCs 1175 individuals	240,000
Gedeo and West Guji	Preparedness and response	Psychological First Aid/Psycho-social support	49,000	144,000
Gedeo and West Guji	Preparedness and response	community-based protection mechanisms (establishment and support to community based structures such as CCCs)	139,170	180,000
Gedeo and West Guji	Preparedness and response	Child Friendly Spaces and Women Friendly Spaces	20,000	420,000

Gedeo and West Guji	Preparedness and response	Distribution of dignity kits	Women and girls of reproductive age, as well as and men and boys - 38,000	1.3M
Gedeo and West Guji	Preparedness and response	Deployment of protection experts		23,000
Gedeo and West Guji		Conduct protection and human rights monitoring	IDPs 139,170	360,000
	Sub Total		530,870	3.2M
Oromia and Somali	Preparedness and response	IDPs with specific needs targeted for services (protection mainstreaming)	48,235	N/A
		Training on basic protection and human rights principles	Government and humanitarian actors 200	765,000
Oromia and Somali	Preparedness and response	Identification of unaccompanied and separated children (UASC), followed by family tracing and reunification (FTR) where appropriate	UASCs 5,000	1,020,000
Oromia and Somali	Preparedness and response	Case management by BoWCA for child protection and GBV issues	6,000	300,000
Oromia and Somali	Preparedness and response	GBV prevention and risk mitigation	1,500	146,000
Oromia and Somali	Preparedness and response	Psychological First Aid/Psycho-social support	13,000	612,000
Oromia and Somali	Preparedness and response	IDP community participation, access to information and empowerment community-based protection mechanisms	48,235	765,000
Somali	Preparedness and response	IDP community participation, access to information and empowerment community-based protection mechanisms	Drought affected IDPs in Somali region 170,000	5,000
Oromia and Somali	Preparedness and response	Child Friendly Spaces and Women Friendly Spaces	10,000	1.8M
Oromia and Somali	Preparedness and response	Distribution of dignity kits	Women and girls of reproductive age, as well as men and boys 40,000	1.2M
Oromia and Somali	Preparedness and response	Deployment of protection experts		23,000
Oromia and Somali	Preparedness and response	Conduct protection and human rights monitoring	48,235	1,530,000
	Sub Total		390,405	8.1M



WATER, SANITATION AND HYGIENE

PEOPLE TARGETED



8.2м

Original 6.86м

REQUIREMENTS (US\$)



142.3M Original 99.0M

GAP (US\$)



87.1м

CLUSTER OBJECTIVE 1:

Save lives by responding to emergencies through improved coordination at all levels, to deliver water, sanitation and hygiene promotion assistance to affected populations.

CLUSTER OBJECTIVE 2

repare for humanitarian shocks – flooding, drought and displacement and be well-positioned to provide WASH services during the response phase of an emergency.

CLUSTER OBJECTIVE 3

Assist the recovery process of affected population by rehabilitating nonfunctional WASH infrastructure.

A significant change observed during the first half 2018 is number of IDPs in the country due to conflict especially in Gedeo-West Guji. This has impacted WASH response needs and resource requirements, with the total number of affected people increasing to almost 2 million. Most IDP sites are potential risk areas for AWD outbreaks as there are no proper sanitation facilities and access to safe drinking water. Therefore, the WASH Cluster requires stronger preparedness measures to prevent AWD and waterborne diseases.

Though originally \$99M was the estimated as resource requirement, due to increase in conflict IDPs and AWD preparedness, resource requirements are now \$144M. Targeted activities under Pillars 1, 2 and 3 are water supply (water trucking and durable solutions), installation of sanitation facilities, procurement of essential WASH NFIs, and hygiene promotion.

Strategy

Drought, flood and AWD preparedness

Due to above average rainfall in many parts of Ethiopia flash floods and stagnant water are expected. Therefore, AWD preparedness needs to be strengthened especially in areas with previous AWD outbreaks, cultural and holy water sites and areas with no adequate safe water supply and sanitation facilities.

AWD preparedness is a key response in most IDP sites where both safe drinking water and reliable sanitation facilities are available. Necessary preparedness actions include; 1) WASH/C4D assessment, 2) preventive quick impact interventions, 3) setting up coordination structure, 4) development of decentralized preparedness plan, 5) prepositions and stockpiles and 6) partnership building, that needs to be well discussed among WASH Cluster partners in at risk areas. This will require the WASH Cluster securing adequate funds and materials well in advance to strengthen preparedness based on the result of assessment.

Gedeo - West Guji conflict

IDPs are displaced in areas where access to safe water is already low, therefore water supply especially for those IDPs in collective sites is high priority. Due to large number of IDPs staying in collective sites lacking proper sanitation facilities, construction of emergency latrines is critical. In order to prevent water borne diseases in congested IDP/returnee sites, there is also significant demand for distribution of water treatment chemicals and hygiene promotion activities. Recognizing that there are many returnees in their original places, extending WASH response for returnees is also incorporated under the revised WASH response plan. While funds requirement was \$20.5M there is A still \$10M funding gap.

Oromia-Somali conflict

According to DTM 11, the number of Oromia-Somali conflict-induced IDPs is 1.1 million. 871,000 IDPs, about 77 per cent of Oromia-Somali conflict-induced caseload, has neither access to safe drinking water nor latrines. Response needs such as water supply, sanitation and hygiene promotion, including distribution of WASH NFIs remain high. Most critically, many IDP sites have no alternative water sources except for costly water trucking. The WASH Cluster will continue to advocate for durable solutions for water supplies, which extend existing water supply pipe networks to IDP sites, while reducing costs and providing more sustainable solutions for IDP sites.

Response Plan

In response to Gedeo-West Guji crisis, quick impact responses under Pillar 1 are prioritized mainly for those IDPs in collective sites and returnees who remain vulnerable out of the one million IDPs in both zones. Provision of safe drinking water by water trucking as well as rehabilitation/expansion of existing water schemes is followed by construction of sanitation facilities in IDP/returnee collective sites. Due to the poor hygiene environment, distribution of WASH NFIs and water treatment chemicals also immediately

required for the WASH response.

The AWD preparedness plan will be updated for further preparedness actions at different regions to strengthen preparedness measures especially in potential risk areas. This needs to be accompanied with proper assessment and having adequate prepositions and stockpiles of water treatment chemicals and WASH NFIs. UNICEF has committed to take a lead on assessment and provide WASH NFIs to at risk areas.

Priorities remains the same, including:

- 1. Rehabilitation of non-functioning water points (i.e. boreholes) including infrastructure damaged by conflict and flooding, preventative maintenance of critical water supply systems, community trainings for improvement of water point operations, management capacity and drilling of new boreholes near IDP sites without alternative water sources.
- 2. Extension of existing water schemes to increase access to IDP sites, vulnerable communities and/or institutions including health facilities and schools dependent on water trucking and installation of water points (tap stands), storage tanks and pipe networks.

- 3. Construction of latrines in IDP sites and other key areas (i.e. holy sites) with a large concentration of people and promotion of self-construction of latrines in rural/urban areas affected by drought or water-related disease outbreaks.
- 4. Procurement and distribution of essential WASH NFIs to affected populations, with special emphasis on displaced and atrisk populations of water-related disease outbreaks; procurement and distribution of water treatment chemicals to households and water committees/ utilities; post distribution monitoring and sanitation/hygiene promotion services.
- 5. Continue water trucking to key institutions without access to sustainable water supplies, including SCs, AWD treatment centers, health posts and schools, communities severely affected by drought at risk or with active AWD cases that do not have alternative safe water supply systems.
- 6. Water quality monitoring, rapid testing and capacity building activities will be given emphasis.

Crisis	Pillar	Activity	Beneficiaries	Requirements US \$
Drought, flood and AWD	Pillar 1: Prevention and mitigation	Development of resilient water sources (i.e. deep boreholes in the lowland areas) in complementarity to other development interventions (i.e. Climate Resilient WASH program, OWNP).	450,000	22.5M
		Installation of sanitation facilities in densely populated areas (i.e. holy sites and in commercial agricultural sites)	300,000	3M
		Hygiene promotion (social mobilization)	2,000,000	2.4M
		Procurement of essential WASH NFIs and water treatment chemicals	2,000,000	5M
		Water quality monitoring (equipment, reagents, training)	-	1M
	Pillar 2: Preparedness and response	Rehabilitation and Operation & Maintenance	232,285	3.3M
		Installation of sanitation facilities specifically at IDPs sites	200,000	2M
		Hygiene promotion (social mobilization)	1,200,000	1.4M
		Procurement of essential WASH NFIs and water treatment chemicals	1,700,000	4.3M
		Water trucking	750,000	10.1M

Gedeo-West Guji Conflict	Pillar 2: Preparedness and response	Provision of safe drinking water to IDPs/ returnees and other vulnerable groups/ institutions by extending pipe systems from existing water points (exit strategy from water trucking)	250,000	5.3M
		Rehabilitation and Operation & Maintenance	258,858	3.6M
		Installation of sanitation facilities specifically at IDPs/returnee sites	1,000,000	10M
		Hygiene promotion (social mobilization)	1,500,000	1.8M
		Procurement of essential WASH NFIs and water treatment chemicals	1,500,000	3.8M
		Water trucking	950,000	12.8M
	Pillar 3: National Systems Strengthening and recovery	Rehabilitation and Operation & Maintenance	500,000	7M
Oromia-Somali Conflict	Pillar 2: Preparedness and response	Provision of safe drinking water to IDPs and other vulnerable groups/ institutions by extending pipe systems from existing water points (exit strategy from water trucking)	450,000	9.5M
		Rehabilitation and Operation & Maintenance	258,857	3.6M
		Installation of sanitation facilities specifically at IDPs sites	1,000,000	10M
		Hygiene promotion (social mobilization)	1,500,000	1.8M
		Procurement of essential WASH NFIs and water treatment chemicals	1,500,000	3.8M
		Water trucking	800,000	10.8M
	Pillar 3: National Systems Strengthening and recovery	Rehabilitation and Operation & Maintenance	250,000	3.5M

