



United Nations Office for the Coordination of Humanitarian Affairs

# **Situation Report: Drought/Food Crisis in Ethiopia**

## **18<sup>th</sup> August 2008**

### **Highlights:**

- **From the 1<sup>st</sup> to the 3<sup>rd</sup> of September 2008, the U.N. Emergency Relief Coordinator will visit Ethiopia to assess the humanitarian situation**
- **Needs of people affected by the crisis continue to outstrip available resources and supplies**
- **NGOs report reduced admission rates to nutrition treatment centres established at the onset of the crisis however admission rates continue to rise in newly-established programmes**
- **Low coverage of Targeted Supplementary Feeding Programmes (TSFP) continues to pose a threat to the recovery of children who have received treatment for Severe Acute Malnutrition (SAM)**
- **Considerable resource shortages for the food relief operation persist.**

## **Humanitarian Overview**

### **Current Context**

The humanitarian crisis prevails in Ethiopia four months after the initial mobilization of resources and response to the needs of vulnerable people hit hardest by the drought and food insecurity. People living in drought-affected regions of the country urgently need food, water, emergency treatment for malnutrition and support to recover and rebuild livelihoods devastated by the drought.

Since the onset of the crisis government and partners have responded to the needs of the affected population through a range of emergency interventions. Partners continue to provide emergency nutrition care to children suffering from SAM in CTC (OTP/SC) sites across Oromiya and SNNP Regions. A handful of new interventions have been established in Afar and Amhara following reports of a rapid deterioration of the food security situation with consequent impact upon nutritional status. Efforts are also underway to expand emergency interventions in Somali Region. The government and donors continue to assist people through cash and food transfers under the PSNP programme. In addition the government, with the support of WFP, provides food relief to 4.6 million beneficiaries identified in the revised Humanitarian Requirements

## United Nations Office for the Coordination of Humanitarian Affairs

document (June 2008). Health and WASH partners are joining forces to prevent further outbreaks of Acute Watery Diarrhea (AWD) among communities whose health status has been compromised by food insecurity and water shortages. In the midst of a plethora of emergency response interventions, a range of partners are also supporting people to recover their livelihoods through animal health and seed distribution programmes.

**Resource constraints:** Despite the best efforts of the government and humanitarian community to respond to the crisis the needs of people continue to far outstrip the resources available to hand. Government, donors and humanitarian partners are struggling to mobilise the resources required to mount a comprehensive response to the crisis against the backdrop of a food crisis of global proportions. The scarcity of essential humanitarian relief supplies, such as Ready-to-Use-Therapeutic Food, has reduced the ability of partners to fully stem the tide of the crisis.

**Mission of the Emergency Relief Coordinator:** The Emergency Relief Coordinator (ERC), Sir John Holmes, will travel to Ethiopia on the 1<sup>st</sup> September to assess the humanitarian situation and response to date and to highlight the impact of the global food security crisis on the country. The ERC will meet with government, UN Agencies, NGOs and people affected by the crisis.

## Sectoral Updates

### Health and Nutrition

#### Key Issues

The number of children accessing treatment at CTC (OTP/SC) programmes established in Oromiya and SNNPR at the beginning of the crisis is reducing, however, admission rates to newly-established CTC (OTP/SC) continue to rise as does the need for increased coverage of CTC in hotspot woredas. In addition to the prevalence of SAM among children under the age of five, NGO partners are admitting growing numbers of older children and adolescents into treatment programmes pointing to the severity of the food insecurity situation. The low coverage of Targeted Supplementary Feeding Programmes (TSFP) poses a significant risk to the recovery potential of children who have received treatment for SAM. In addition, the limited cover of TSFP in drought-hit and food insecure woredas is expected to contribute to driving up rates of moderate malnutrition and, in the worst case scenario, increased prevalence of SAM.

- **Afar:** 9 woredas have been identified by regional authorities as being critically food insecure due to extreme drought, low food availability and high loss of livestock. The hotspot woredas are as follows: Kori and Eli Dar (Zone 1), Afdera, Berhale, Bidu and

## United Nations Office for the Coordination of Humanitarian Affairs

Erebti (Zone 2), Teru and Yalo (Zone 4) and Dalifagie (Zone 5). MSF-G and MSF-H are providing mobile OTP services to reach kebeles around Teru town and continue to conduct rapid assessments based on MUAC. To date, 166 children have been admitted to OTP programme and 10 require treatment in SC.

- **Amhara:** Food insecurity and the reduced size of rations<sup>1</sup> are contributing to increased prevalence of moderate malnutrition in Amhara Region. The DPPB/FSC and Regional ENCU have jointly classified woredas according to critical, serious and typical status on the basis of food insecurity and, where available, nutrition status. ENCU reports that 21 woredas are listed as critical: 6 in North Wollo, 6 in South Wollo, 2 in North Gonder and 2 in North Shewa. According to ENCU, the situation in 26 woredas is serious and requires close monitoring in the coming weeks. MSF Belgium will carry out rapid nutritional assessments in Dawunt and Lasta (North Wollo zones), Mekedela, (South Wollo zone) and Gishe Rable (North Shewa zone) this week.
- **Oromiya:** At the end of the month of July, 12,603 children were receiving treatment for SAM in OTP and SC on the basis of information provided by NGOs to the ENCU.
- **SNNPR:** In some woredas the SAM levels are reducing however new cases continue to require admission leaving the overall OTP caseload at around 21,000 children. NGOs managing Out-patient Therapeutic (OTP) programmes established in April are beginning to record a decrease in the number of new admissions and total number of beneficiaries in OTP and SC however newly established TFPs in recently identified hotspot woredas are recording high admission rates. Reports of the sale of RUTF supplies in some areas are being investigated and discussions as to how to crack down on this practice are taking place in the Child Survival task force.
- **Somali:** Little confirmed data on the nutrition situation in Somali Region. One NGO partner working in the region observed malnutrition among a migrant population from Arsi, Bale Zone who are living in makeshift camps around the banks of the Kanale River in Filtu woreda, Liben Zone.

### Response

**Overview:** Government, UN Agencies and NGO partners are working together to respond to the needs of people, particularly children, suffering from malnutrition. The Emergency Nutrition Coordination Unit, under the government's DPPA, is playing an essential role in the

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<sup>1</sup> From 15 kg of cereals to 10 kg of cereals per person per month.

## **United Nations Office for the Coordination of Humanitarian Affairs**

coordination of assessments and response interventions in affected regions of the country. UNICEF is procuring supplies of Plumpy'nut, therapeutic feeding milk and medical supplies for distribution by regional health authorities and use of NGOs in CTC sites. WHO continues to provide support to the Ministry of Health and Regional Health Bureaus (RHB) in the form of technical advice, training and provision of medical supplies. WFP is working closely with UNICEF and the ENCU to identify food insecure and nutrition hotspot woredas requiring priority food relief and TSF coverage. NGOs are providing nutritional support and treatment to children in CTC (OTP/SC) sites across SNNP, Oromiya and a number of hotspot woredas in Afar region. In Amhara Region, the Ministry of Health has set up 28 feeding centres, 5 of whom receive support from CONCERN WORLDWIDE, to respond to the deteriorating nutrition situation.

**Training:** UNICEF, WHO and NGOs continue to provide support to the Federal Ministry of Health to roll -out the Health Extension Programme. The objective of the Health Extension Programme is to increase access to nutrition treatment at the kebele level by training additional Health Extension Workers (HEWs). The WHO team travelled to Dire Dawa to support the training of 45 health workers in management of severe malnutrition cases organised by the Regional Health Bureau (RHB). In Afar Region, WHO provided US\$25,000 to the RHB to support the training of HEWs and UNICEF staff trained 21 health workers on the management of SAM cases and additional training of trainers for 54 people in Assayta. The Regional Health Bureau in the Somali Region, with support from WHO and UNICEF, conducted a training on rapid response for emergency health to 67 health workers from across the region.

**Supplies:** Hotspot woredas affected by the nutrition crisis received Plumpy'nut supplies from UNICEF. Oromiya Region received 82 mt of Plumpy'nut and 64 mt of Plumpy'nut was sent directly to SNNPR. UNICEF dispatched mattresses, circumferential measuring tapes and infant weighing scales to SNNPR and Oromiya to support operations in CTC (OTP/SC). Dilchora hospital in Dire Dawa received 30 cartons of F75, 20 cartons of Plumpy'nut and 10 cartons of F100 to increase capacity to manage cases of SAM.

### **Gaps and Requirements**

The low coverage of Targeted Supplementary Feeding Programmes (TSFP) remains the critical gap in the chain of responses to enable the recovery of children suffering from SAM and to prevent a further escalation of the nutrition crisis. The long-term success of the CTC approach to the treatment of SAM depends, in part, upon whether recovering children have access to food via TSFP during a period of extreme food insecurity. In addition, TSFP is an essential intervention

## United Nations Office for the Coordination of Humanitarian Affairs

to prevent people suffering from moderate malnutrition from deteriorating to the point where they require treatment for SAM.

Livestock and WASH interventions are required in Afar Region to improve the food security situation and guard against the further deterioration of nutrition status in drought-affected woredas. Nutrition surveys and rapid assessments are urgently required in Afar Region however the shortage of trained nutritionists remains a major obstacle to gauge the scale and severity of the nutrition crisis in the region.

### **Food Aid**

#### **Key Issues**

People living in drought-affected regions of the country continue to experience acute food insecurity and reduced access to food due to the failure of seasonal crops and rising prices at local markets. The high prices of food and shortage of commodities on the global market and food insecurity across the developing world has translated into reduced availability of food for response in Ethiopia. Factory producers of CSB and Ready-to-Use-Therapeutic-Food (RUTF), essential for the control of moderate malnutrition and treatment of SAM, are unable to meet the demands of humanitarian partners. The capacity of local factories to produce CSB and RUTF at the rate demanded by the crisis continues to be reduced as a consequence of a set of factors including the scarcity of supplies, insufficient capital and electricity shortages.

#### **Response**

**Relief<sup>2</sup>:** In Somali Region, an amount of 43,029 mt has been allocated to 1,025,030 beneficiaries of which 33,986 mt have been dispatched. In SNNPR, 1,332,010 beneficiaries have been allocated 74,261 mt, of which 70,836 mt have been dispatched. In Oromiya Region, 1,088,537 beneficiaries have been allocated 35,034 mt, of which 26,460 mt have been dispatched. Some 1,332,835 beneficiaries in Afar, Amhara, Benshangul Gumuz, Gambella and Tigray region have been allocated 31,639 mt, of which 21,931 mt have been dispatched (all figures from January 2008 to date).

**PSNP:** During January to June 2008, an amount of 95,614 mt has been allocated to 2,309,106 PSNP beneficiaries in Afar, Amhara, Oromiya, SNNPR and Tigray, and some 56,264 mt have been dispatched.

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<sup>2</sup> Allocations/dispatches refer to mixed commodities of cereals, pulses, oil and blended food.

## United Nations Office for the Coordination of Humanitarian Affairs

**Targeted Supplementary Feeding:** Due to resource constraints, the WFP-supported TSF linked to the Emergency Outreach Strategy was reduced from covering 342 woredas to cover only 163 woredas from March 2008 onwards. As resources are becoming available, the EOS/TSF partners have agreed to conduct ad-hoc screening and referral to TSF by re-activating the TSF response in an additional initial 46 woredas in SNNPR, Oromiya and Amhara. These woredas were part of the EOS/TSF before being suspended in March 2008. It is expected that the number of woredas is likely to increase following the official release of figures from the *belg/gu* assessment.

In SNNPR, 92% of the TSF dispatches are already completed and distributions are ongoing and in Oromiya some 56% of the planned TSF despatches have been completed with ongoing distributions. These figures will be updated next week. The delays in dispatches are due to low availability of blended food stocks in WFP warehouses. WFP is facilitating the movement of locally produced FAMIX as soon as the product is produced as well as awaiting further shipments of blended food coming through Djibouti. The late response in resourcing the TSF is therefore the main reason for the delays.

DPPB/WFP in SNNPR has made a provision for supplementary food discharge rations to be made available to children being discharged from therapeutic care upon request of the government or NGOs running those programmes.

**Contributions:** Confirmed contributions during the week include US\$19,762,845 from DfID for relief; US\$2,446,586 from Ireland for TSF and US\$3.9 million from the USA for relief. These are not yet programmed and not considered in the shortfalls.

### Gaps and Requirements

The total 2008 shortfall for relief, PSNP and TSF programmes amounts to 216,600 mt (valued at US\$176.7 million) broken down as follows:

**Relief:** Total annual requirements for the current 4.6 million beneficiaries amount to 591,333 mt of mixed commodities. The funding shortfall amounts to some 136,400 mt of mixed commodities (valued at US\$110.1 million), which includes an advance of US\$40 million from working-capital financing (WCF).

**Productive Safety Net Programme:** WFP shortfalls for the PSNP amount to 68,000 mt of cereals (valued at US\$54 million).

**Targeted Supplementary Feeding** has a shortfall of 12,200 mt (valued at US\$12.6 million). This includes a US\$4.6 million Working Capital Fund loan.

## **United Nations Office for the Coordination of Humanitarian Affairs**

### **Water, Sanitation and Hygiene**

#### **Key Issues**

Acute water shortages persist in drought-affected regions of the country. People living in areas hit hardest by water shortages are largely reliant on water tankering provided by government, UN and NGOs. Water tankering responds to the immediate water needs of vulnerable groups however an emergency intervention of this nature does not prepare communities to withstand future shocks. A number of NGOs are advocating for response to include interventions that promote resilience to drought including construction of new water systems and rehabilitation of existing services.

Acute Watery Diarrhea (AWD) continues to present a threat to human health. Cases of Acute Watery Diarrhea (AWD) continue to be reported from Amhara Region. WHO reports confirmed cases in Jawi and Banja woredas (Awi Zone), Takusa woreda (North Gondar Zone) and Sekela (West Gojjam Zone) in Amhara Region. In addition to the AWD outbreak in Amhara, confirmed cases have been reported in Akaki woreda, Oromiya Region.

Minor floods have been reported around the catchment areas of Lake Tana following the overflow of the Dirma and Megech rivers in North Gondar. Areas affected by the floods include Fogera, Libo Kemkem and Dera in South Gondar, Achefer and Bahir Dar Zuriya in West Gojjam and Dembia woreda in North Gondar Zone.

#### **Response**

The WASH taskforce is coordinating the response of all partners within the sector and is finalising the allocation of CERF funds for emergency delivery of WASH services to CTC (OTP/SC) in Oromiya, SNNPR, Somali and Amhara regions. The Regional Water Bureaus, with support from UNICEF, and NGOs are carrying out water tankering interventions in drought-affected regions.

WHO is due to commence the implementation of a project to support the Federal Ministry of Health and RHBs to respond to AWD and communicable diseases. The project is funded by resources allocated by the CERF Rapid Response. The three-month project will enhance the monitoring of AWD and other epidemic diseases, reinforce the capacity of local health systems to cope with increased demand for services through training and supply of drugs and medical supplies and improve household water points through training, education and water testing at collection points.

## United Nations Office for the Coordination of Humanitarian Affairs

### **Gaps and Requirements**

Government and partners require additional supplies of chemicals for water purification and treatment to prevent the further spread of AWD.

### **Agriculture and Livestock**

#### **Key Issues**

The current crisis, manifest in the rising number of people suffering from malnutrition, can in part be attributed to the failure of the rains and subsequent impact upon agricultural production and livestock. The drought has eroded the livelihoods of pastoralist and agro-pastoralist communities in the *belg* receiving areas of the country. The drought rendered large tracts of agricultural land unproductive and a reduced harvest is expected in the areas of the country where some crops were planted. Pastoralists in drought-affected regions have incurred a significant loss of animals leading to a substantial reduction in purchasing power. The loss of animals has, in some instances, directly contributed to the rising prevalence of malnutrition due to the pivotal role that milk plays in the diet of pastoralists and agro-pastoralists. Interventions that support livelihoods and promote early recovery are required to prevent a further deterioration of the food security situation in the coming months.

#### **Response**

Government, FAO and NGOs are prioritising the distribution of seeds, animal health and commercial de-stocking interventions. FAO and NGO partners including GOAL, CONCERN, World Vision and CARE, are supporting the early recovery of livelihoods in Amhara, Oromiya and SNNP regions by providing seeds to farmers to allow the cultivation of land. A recent FAO mission to SNNPR observed that cultivated food crops were in good condition however the quantity of food harvested will not be sufficient to cover the needs of the entire population.

### **Gaps and Requirements**

Commercial and slaughter destocking interventions are required to preserve core breeding stock. FAO and partners continue to advocate for the incorporation of early recovery interventions into the overall humanitarian response to the crisis.

**United Nations Office for the Coordination of Humanitarian Affairs**

**Humanitarian Meeting Schedule**

<b>Date</b>	<b>Meeting</b>	<b>Location and Time</b>
Monday 18 <sup>th</sup> August 2008	Special Committee on the Somali Region	DPPA, 14.30 (Invitation Only).
Tuesday 19 <sup>th</sup> August 2008	WASH Cluster meeting  WASH Emergency Task Force meeting	Ministry of Water Resources 09.00.  Ministry of Water Resources, 10.00
Wednesday 20 <sup>th</sup> August 2008		
Thursday 21 <sup>st</sup> August 2008	Humanitarian Coordination Meeting	UNDP Conference Hall, E.C.A. 10.00.
Friday 22 <sup>nd</sup> August 2008	Safety and Security Meeting	UNDSS Office, 09.30.

**Contact Information**

Fidele Sarasso Humanitarian Coordinator	<a href="mailto:fidele.sarassoro@undp.org">fidele.sarassoro@undp.org</a> Tel.: 251-11-5444483
Vincent Lelei Head of Office, OCHA	<a href="mailto:lelei@un.org">lelei@un.org</a> Tel.: 251-11-5444248
Gregory Beals Information Officer, OCHA	<a href="mailto:beals@un.org">beals@un.org</a> Tel.: 251-11-5444162

**Editorial Note:** The information in this document is based on reports and field information from a variety of sources including UN agencies, NGOs and government partners as well as the different coordination forums.