

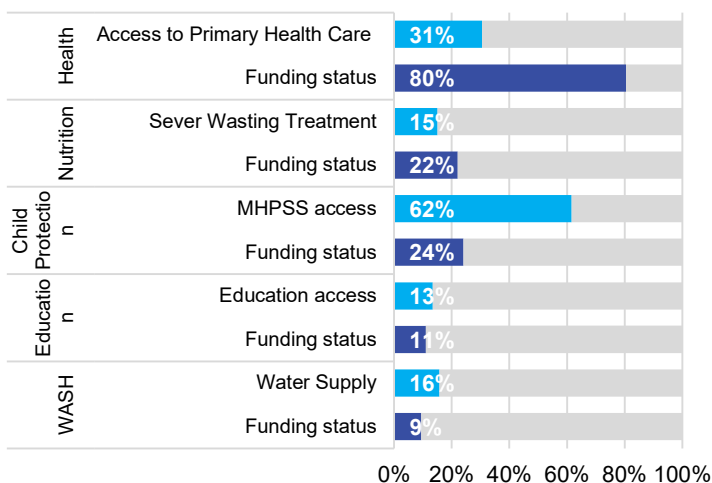


April 2023

Highlights

- Despite a deteriorating security environment in Amhara, UNICEF continued to provide assistance to hundreds of thousands of IDPs in the region, as well more than 11,000 refugees and migrants fleeing conflict in neighboring Sudan.
- UNICEF supported efforts to prepare for the reopening of schools in Tigray during the month, dispatching learning materials for the return to school of approximately 140,000 children.
- Flooding throughout Oromia, Somali, and Southern Nations Nationalities and People's Region (SNNPR) continued to drive displacement, damage schools, and limit access to critical health and nutrition services during the reporting period.
- Cholera continued to spread with more than 5,300 cases recorded across Oromia, SNNPR, and Somali regions since August 2022.

UNICEF Response and Funding Status



*The percentage of children (52.4 per cent) is based on the Central Statistics Agency of Ethiopia 2022 projected population statistics.

** UNICEF estimates that there are approximately 4.51 IDPs across Ethiopia based on the DTM Ethiopia National Displacement Report 14: Site Assessment Round 31 and Village Assessment Survey Round 14 (August - September 2022), which identifies 2.73 million IDPs across all regions of the country except Tigray and is coupled with DTM Emergency Site Assessment - Northern Ethiopia Crisis - Round 8 (October 2021), which indicated there were 1.8 million IDPs in Tigray. Based on recent regional reports from Tigray, 1.8 million IDPs remains an accurate estimate of displaced persons at this time.

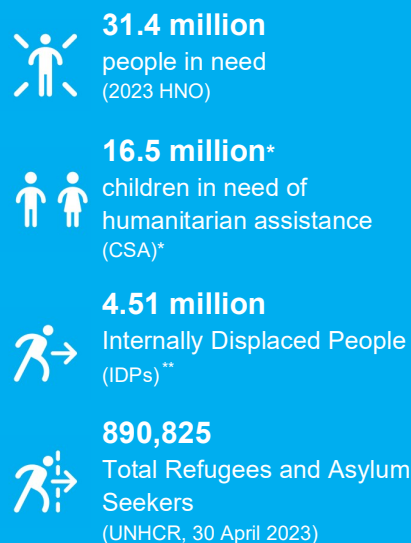
Ethiopia

Humanitarian Situation Report No. 4

including Northern Conflict and Drought responses

unicef
for every child

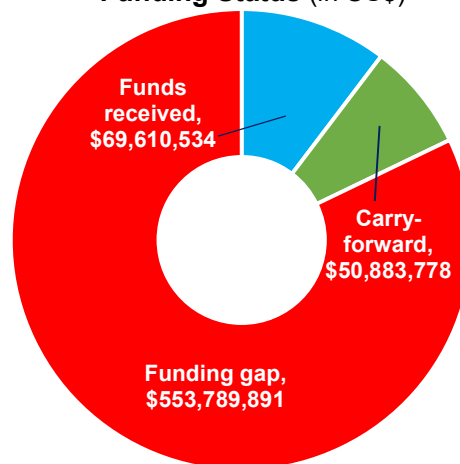
Situation in Numbers



UNICEF Appeal 2023

US\$ 674 million

Funding Status (in US\$)



Funding Overview and Partnerships

UNICEF's Humanitarian Action for Children (HAC) 2023 Appeal requires US\$ 674.3 million to meet the critical humanitarian needs of children, adolescents, women, and men in Ethiopia. Including US\$ 50.9 million in funds carried over from 2022, only US\$ 120.4 million has been received towards the appeal to date, representing only 18 per cent of the required needs to reach children and their families with critical lifesaving and life-sustaining support. Within the appeal, funding dedicated to the response in northern Ethiopia has been budgeted at US\$ 255.7 million and fully incorporated into the HAC. Furthermore, another US\$ 345.4 million within the HAC has been dedicated to responding to the severe drought that has impacted more than 24 million people across four regions. UNICEF continues to appeal for support to close the remaining gaps and to ensure that children and their caregivers receive lifesaving support in 2023 and beyond. Since the beginning of 2023, UNICEF has been able to mobilize US\$ 37.7 million for the Northern Ethiopia Response Plan and US\$ 33.6 million for the drought response.

UNICEF expresses its sincere gratitude to the many donors who have already provided critical support towards UNICEF's HAC, including the Central Emergency Response Fund (CERF), European Civil Protection and Humanitarian Aid Operations (ECHO), Germany, Japan / Japan International Cooperation Agency (JICA), Ireland, the Swedish International Development Cooperation Agency (SIDA), UK Aid / Foreign Commonwealth Development Office (FCDO), U.S. Agency for International Development (USAID) / Bureau for Humanitarian Assistance (BHA), and private sector donor contributions through UNICEF National Committees.

Situation Overview and Humanitarian Needs

Tension between unidentified armed groups (UAGs) throughout Amhara Region in April led to a deteriorating security environment in which armed clashes prompted further displacement, while movement restrictions across the region limited civilian access to basic social services and constrained the ability of humanitarian organizations to operate. Despite increasing insecurity, UNICEF and non-governmental organization (NGO) partners continued to provide critical health, WASH, nutrition, and protection assistance to hundreds of thousands of internally displaced people (IDPs)—both protracted from conflict in northern Ethiopia and recently arrived due to ongoing inter-communal conflict in Oromia Region—throughout the region during the month. Separately, conflict that began in mid-April in neighbouring Sudan has driven more than 11,000 people into Amhara's West Gondar Zone's Metema *woreda* as of 30 April, of whom approximately 4,500 are Ethiopian returnees and nearly 3,000 are Sudanese and Eritrean refugees. In collaboration with the government and other UN agencies, UNICEF scaled up its response in the areas receiving refugees and migrants, providing health and nutrition assistance by supporting the establishment of a mobile health and nutrition team (MHNT), as well as dispatching emergency drug kits (EDKs) and ready-to-use-therapeutic food (RUTF)¹.

Meanwhile, in preparation for the formal reopening of schools in Tigray Region in early May, UNICEF and the Regional Education Bureau (REB) supported the registration of students in more than 1,200 schools across the region, prepositioned school supplies—including exercise books, stationery, recreational kits, and schools bags—that will benefit approximately 140,000 children, and finalized the development of an accelerated school calendar, enabling children to complete three grades in one academic year to compensate for learning lost during the northern Ethiopia conflict. Despite progress in reducing the number of out-of-school children in the region, persistent obstacles to full school reopening remain in conflict-affected areas. As of the end of April, the Tigray REB reported that approximately 50 per cent of schools in the region remain closed, primarily due to damage sustained during periods of fighting, as well as the continued occupation of schools by IDPs or military forces. Additionally, nearly 80 per cent of schools assessed for mine clearance operations were found to contain unexploded ordinances (UXO) or explosive remnants of war (ERW), impacting UNICEF's school catch-up strategy in the region.

Ongoing heavy rainfall throughout much of southern and south-eastern Ethiopia during the reporting period exacerbated flooding in the affected regions and continues to drive displacement, impact livelihoods, and worsen the spread of cholera. Since early April, flooding has displaced more than 15,000 people across Silte, South Omo, and Wolayita zones within SNNPR, which has limited access to health and nutrition services in drought-affected areas, destroyed approximately 750 hectares of land—impacting the livelihoods of nearly 8,000 individuals—and damaged water schemes that were serving more than 25,000 people. Additionally, SNNPR has recorded 504 cholera cases—resulting in six deaths, an average case fatality rate (CFR) of 1.2 per cent—across 13 *woredas* since mid-April, when the outbreak was first detected in the region. As the rains continue, and potentially worsen as Ethiopia enters its primary rainy season, nearly 900,000 people across SNNPR will remain at risk of contracting cholera due to lack of access to a safe water supply, poor community-level hygiene and sanitation practices, and significant population movements among drought and conflict-affected households. As of the end of April, Ethiopia's three cholera-affected regions—Oromia, Somali, and SNNPR—had recorded 5,336 cumulative cases across 36 affected *woredas*, with a CFR of 1.6 per cent, remaining well-above the WHO severity threshold of one per cent²³.

¹ Approximately \$9 million in UNICEF funding needed for the response to the Sudan crisis in Ethiopia is on top of ECO's original HAC requirements

² Bacterial Disease Surveillance and Response Weekly SitRep, Ethiopian Public Health Institute (EPHI), 27 April 2023

³ As of late May, there were 8,044 cholera cases, with a CFR of 1.52 per cent, across the three affected regions

Summary Analysis of Programme Response

Health

In northern Ethiopia, UNICEF aimed to improve the overall quality of healthcare services across Afar, Amhara, and Tigray, supporting the provision of routine vaccinations, medical consultations, and essential health services via MHNTs. UNICEF provided medical consultations and primary healthcare services to nearly 90,000 people across the three regions in April. In Tigray, UNICEF, the Regional Health Bureau (RHB), and WHO conducted an integrated measles campaign for children, during which nearly 691,000 children under five were vaccinated against measles. Other activities under the campaign included catch-up routine vaccines for unvaccinated children, nutrition screening and treatment for acute malnutrition, Vitamin A supplementation, and deworming. In Amhara, UNICEF provided more than 29,000 conflict-affected people from IDP and host community populations with mental health consultations, while 27,000 mothers and caregivers were reached with information promoting routine vaccination. In Gambella, UNICEF reached more than 3,000 people with primary healthcare services through UNICEF EDKs, vaccinated 300 children under five against measles, and provided information on routine vaccination and maternal, newborn, and child health (MNCH) to nearly 5,000 mothers and caregivers. Additionally, in the drought-affected areas of Afar, Oromia, Somali and SNNPR, UNICEF-supported MHNTs provided medical consultations to nearly 40,000 individuals over the month.

Separately, to mitigate the ongoing and worsening cholera outbreak in Oromia and Somali, as well as a new – and expanding – outbreak in April in SNNPR, UNICEF scaled up its health response activities, providing operational support to RHBs for 22 cholera treatment centre (CTC) kits provided to Oromia's East Borena, East Guji, and West Guji zones, six CTC kits provided for Somali's Dawa and Liban zones, and 10 CTC kits to SNNPR's Gamo and Gofa zones. Across all cholera-affected areas, UNICEF is strengthening multisectoral cholera response activities through the deployment of health and social workers to strengthen case management, risk communication and community engagement (RCCE).

Nutrition⁴

Despite an improvement to the humanitarian operating environment in Afar, Amhara, and Tigray, in the months since the Cessation of Hostilities Agreement (CoHA) was signed, malnutrition rates across the three regions remained persistently high. In Tigray, an integrated measles and 'Find and Treat' campaign that UNICEF conducted during the month found a global acute malnutrition (GAM) rate of 24 per cent, including five per cent of children under five who are suffering from severe acute malnutrition (SAM) and 61 per cent of pregnant and lactating women (PLW) who are suffering from moderate acute malnutrition (MAM). In Amhara's Abergele *woreda*, where thousands of IDPs remain due to a volatile security environment in Tigray-Amhara border areas, the GAM rate and MAM rate among PLW were 34 per cent and 91 per cent, respectively. However, while food security remains a challenge, UNICEF and partners continued efforts to meet the ongoing needs of conflict-affected IDP and host-community populations, screening more than 30,000 children under five and approximately 8,000 PLW for malnutrition through UNICEF-supported MHNTs across the two regions, while delivering nearly 9,500 cartons of RUTF and 75 cartons of F-75 therapeutic milk—sufficient to treat 9,400 children with life-threatening SAM for up to three months—to partners in Afar.

UNICEF also continued comprehensive 'Find and Treat' campaigns in drought-affected areas, including Oromia and SNNPR, where approximately 440,000 children across the two regions were screened for malnutrition and nearly 5,500 children suffering from SAM were linked to therapeutic treatment services during the month. As part of efforts to meet nutrition needs and strengthen the quality of ongoing services, UNICEF continued to provide on-the-job technical support for health and nutrition workers, including training on the family approach to Mid-Upper Arm Circumference (MUAC) measurements, which strengthens the mother's and caretaker's ability to detect malnutrition in its early stages, for nearly 400 health workers in SNNPR⁵. In Somali's Afder Zone, in partnership with the RHB and NGO partners, UNICEF established 41 mother-to-mother support groups—comprising 410 mothers and caregivers—that conducted information sessions with community and religious leaders on best practices for Infant and Young Child Feeding in Emergencies (IYCF-E) and mechanisms to identify malnutrition. Through the mother-to-mother groups, more than 2,100 community influencers were reached with critical nutrition messaging during the reporting period. Overall, despite improvements in the security environment in northern Ethiopia and a slight easing of drought conditions due to recent rainfall in southern and eastern Ethiopia, malnutrition rates across the country remain high with SAM admissions for children under five approximately 18 per cent higher year-on-year.

Nutrition Cluster

The Emergency Nutrition Coordination Unit (ENCU) and Nutrition Cluster continue to support regions throughout Ethiopia by strengthening technical capacity on response coordination and information management. In collaboration with donors and the Ministry of Health (MoH), the cluster has developed IYCF-E materials in recent months that guide humanitarian actors in their efforts to treat acute malnutrition, while strengthening cross-cutting elements of a comprehensive nutrition response, including highlighting the linkages between the malnutrition and protection concerns such as gender-based violence (GBV). Other coordination efforts undertaken by the cluster during the first quarter of

⁴ Data on nutrition programme response is two months delayed due to lengthy data collection and verification process from the *kebele* to the federal level. UNICEF has secured enough RUTF to treat children with severe wasting up to October 2023.

⁵ Family MUAC screening provides a more complete picture of the food security situation at the household level in a given area when compared to isolated, individual screenings

2023 include implementation of the SMART+ survey conducted in drought-affected areas of Oromia and Somali regions, which revealed high malnutrition rates, and support to the government to continue treating children with SAM throughout conflict and drought-affected areas of the country—particularly Afar, Tigray, and Oromia. During the first quarter of 2023, UNICEF and cluster and government partners treated 176,000 children with SAM, an 18 per cent increase in treatment of SAM cases compared to the same period in 2022.

WASH

During the reporting period, UNICEF provided access to safe drinking water for nearly 187,500 people in Afar, Amhara, Oromia, SNNPR, Tigray, and Benishangul Gumuz through rehabilitation of existing non-functional water schemes, water trucking, and installation of water storage tanks. In addition, nearly 25,000 people nationwide received access to safe and appropriate sanitation facilities through emergency latrine construction, repair of existing nonfunctional latrines and desludging of filled latrines; approximately 137,000 people were reached through hygiene promotion interventions; and nearly 79,000 people were reached through provision of basic WASH non-food items (NFIs) such as soaps, household water containers and water treatment chemicals. In response to the expansion of the cholera outbreak in SNNPR during April, UNICEF reached 34,000 people across nine *woredas* with household water treatment chemicals, while efforts to respond to the worsening cholera outbreak in Oromia and Somali remain ongoing. Across the three cholera and drought-affected regions, UNICEF provided 61,000 people with safe drinking water through either water trucking or the rehabilitation of non-functional water schemes and reached more than 64,000 people with WASH NFIs, including household water storage containers, water treatment chemicals and soaps.

As part of ongoing recovery efforts in northern Ethiopia following the declaration of the CoHA in late 2022, UNICEF is contributing to WASH system strengthening and resilience in Tigray while still meeting the emergency WASH needs of more than 95,000 conflict-affected people from the IDP and host community populations. For example, UNICEF trained 182 local WASH committees on the operation and maintenance of water schemes, aiming to help communities manage their own water infrastructure over the long term. Additionally, UNICEF provided a refresher training for 122 health extension workers during the month, providing them with the knowledge and skills to effectively implement best practices on sanitation, hygiene, and clean water management within their communities.

Child Protection

UNICEF reached more than 63,000 people affected by conflict, drought, cholera, flooding, and other emergencies across the country with protection services during the month, providing child protection, GBV prevention, and other social service interventions, including mental health and psychosocial support (MHPSS), family tracing and reunification (FTR), and alternative care services for unaccompanied and separated children (UASC). However, the combined effects of Ethiopia's multiple, evolving emergencies continue to strain the overall protection environment for children. Throughout conflict-affected areas of northern Ethiopia, UNICEF and its partners have continued to scale up programming to reach previously inaccessible populations with critical protection assistance, reaching nearly 41,500 people in Afar, Amhara, and Tigray in April with child protection and GBV response services, including information sessions on GBV risk mitigation, support to survivors of GBV, protection from sexual exploitation and abuse (PSEA) assistance, case management for UASC, and explosive ordnance risk education (EORE) to ensure that children and adults are aware of mine risks and how to avoid UXO and ERW, which are among the most persistent protection challenges in areas that are transitioning out of conflict. In Afar, local UNICEF partner, RADO, conducted 10 EORE sessions during the month, reaching nearly 1,300 conflict-affected IDPs with information on the danger of UXO and ERW. Additionally, across the three regions, UNICEF and partners provided MHPSS services, including access to safe spaces and individual support from social workers and psychologists to more than 7,000 displaced and conflict-affected individuals. UNICEF and partners also reached nearly 2,000 children in Amhara and Tigray who lack adequate care arrangements—including UASC or children whose families are socio-economically vulnerable—with child protection case management services.

To combat a deteriorating protection environment across drought-affected *woredas* of Oromia, Somali, and SNNPR, UNICEF continued efforts in April to bolster local systems by providing technical and financial assistance to government bureaus and local NGO partners. UNICEF supported the strengthening of the national case management framework, placed and trained additional social service workers at the regional offices of the Bureau of Women, Children and Social Affairs (BoWCSA), and worked with partners to strengthen the community-based child protection structures at the *woreda* level, including through referral services for children at risk, as well as greater information sharing and open dialogue among community members about the specific protection risks that children face in displacement contexts. UNICEF also provided community-based MHPSS interventions, such as psychological first aid and parenting-skills education to nearly 5,600 people in Oromia, Somali, and SNNPR during the month, while approximately 400 children who experienced violence in these drought-affected areas were referred to receive MHPSS, health, social, or justice and law enforcement services. Additionally, UNICEF and partners identified 449 UASC and provided them with FTR services, as well as alternative care support through foster families and kinship care. As part of UNICEF's effort to prevent and respond to GBV, nearly 9,000 people were reached with interventions that highlighted GBV prevention mechanisms, including community dialogue on ending harmful practices such as child marriage and female genital mutilation (FGM). Separately, UNICEF and NGO partner Hope for Justice assigned four social workers at Bole International Airport in Addis Ababa to provide on-arrival assistance for women and children returning from the Kingdom of Saudi Arabia, Yemen, Djibouti, and Somalia. On-arrival assistance was provided to 112 accompanied children—64

boys and 48 girls—with their parents, as well as 20 UASC, and with support from UN partner IOM, the returnees were provided with MHPSS and FTR services.

Child Protection Area of Responsibility (AoR)

National and sub-national coordination of the child protection AoR continued during the reporting month. In Oromia, the effects of prolonged drought and conflict across the region has generated significant child protection concerns, including in child labour, trafficking, GBV, and sexual exploitation and abuse (SEA). On a field visit to Horo Guduru Wollega and West Wollega zones during the month, Child Protection cluster partners identified nearly 2,700 UASC and more than 1,600 cases of GBV, adolescent pregnancy, and forced marriage, all resulting from recent intercommunal conflict. Cluster partners reached nearly 79,000 people in 105 drought and conflict-affected *woredas* with Child Protection activities, including case management, identification and development of alternative care solutions for UASC, and MHPSS services for children.

Education

In April, UNICEF continued to provide education assistance to IDPs and emergency-affected out-of-school children in collaboration with the Ministry of Education (MoE), REBs, and NGO partners across Ethiopia. UNICEF and partners provided access to formal or non-formal education opportunities to nearly 150,000 children across conflict and drought-affected regions of Ethiopia during the month. In Tigray during the month, UNICEF and its partners, with support from the Education Cluster, supported approximately 104,000 IDP and host community children with access to non-formal learning opportunities. Additionally, in preparation for the formal reopening of schools in the region in early May, UNICEF dispatched learning materials—including 50,000 exercise books, 660 early childhood development (ECD) kits, 130 recreational kits, 456 school kits, 18,500 backpacks with stationery items, and 8,000 school bags—to education partners, which will benefit approximately 140,000 children across the region. As part of the school reopening initiatives, UNICEF also provided training on the MoE-developed *MHPSS in Education* training materials to 35 representatives from the Abi Adi and Adwa teacher training colleges. In Afar, UNICEF, with the support of NGO partners and the REB, finalized the construction of six semi-permanent schools enabling Accelerated Learning Programme (ALP) classes to begin for 240 out-of-school children, while in Amhara UNICEF finalized the construction of a primary school in North Gondar Zone's Adi Arkay *woreda*, allowing more than 700 children—including approximately 350 girls—to return to a safe and conducive learning environment.

As part of its ongoing drought response in SNNPR, UNICEF and NGO partners continued ALP classes, benefiting approximately 400 children, in Konso Zone's Karat Zuria *woreda* and distributed accelerated education curriculum materials for more than 3,100 children in Konso and South Omo Zone's Dasenech *woreda*. Additionally, UNICEF and the REB distributed 10,000 school bags containing learning materials to 10,000 children throughout the region in April, ensuring continuity of learning despite drought-induced displacement. In Somali's Adadle and Gode *woredas*, UNICEF and partners reached approximately 1,000 children across five IDP sites with backpacks and stationery items and strengthened integrated child protection and education 'Bete' ('My Home') programming by conducting training sessions for nearly 700 parents and school facilitators and supervisors, providing them with information on the mechanisms and reporting procedures for community-based child production systems.

Social Protection

In April, with support from the Ministry of Women and Social Affairs, the Bureau of Women, Children, and Social Affairs (BoWCSA), and the Bureau of Labor and Social Affairs (BoLSA), UNICEF provided drought and conflict-affected populations with Shock Responsive Cash Transfers (SRCTs), reaching 944 IDP households—benefitting approximately 5,700 people—in Dubluk *woreda* of Oromia's drought-affected Borena Zone. UNICEF also provided cash and voucher assistance training to 62 regional government staff in Oromia to strengthen cash-transfer programming. Response interventions that aim to strengthen Ethiopia's social systems are also critical to UNICEF and partner efforts to mainstream lifesaving PSEA, GBV, and social service programming. For example, in April, UNICEF-trained community service workers linked more than 2,700 people to MHPSS, health, nutrition, and education services, and facilitated access for these individuals to food and clothing. Additionally, more than 9,000 drought and conflict-affected individuals—including more than 3,500 women and nearly 4,000 children—had access to safe channels through which to report SEA. UNICEF social protection programming also provided an additional 5,300 women and children with access to GBV risk mitigation and prevention information through face-to-face interactions with community-level social workers during regular household visits and cash transfer days. In Amhara, UNICEF conducted post-distribution monitoring (PDM) for more than 5,300 conflict-affected households—approximately 21,000 people—in Gondar Zone's Adi Arkay *woreda* and West Gojjam Zone's Degadamot *woreda* during the month. The PDM assessment also provided the opportunity for cash-transfer recipients to provide feedback on UNICEF programming and receive direct support from social workers.

Social and Behavioural Change (SBC) and Accountability to Affected Populations (AAP)

In April, UNICEF reached approximately four million people with information on available services, and locations at which to access them, through community engagement sessions, house-to-house visits by community volunteers, focus group discussions, and peer-to-peer dialogue. People were reached with messages on prevention of and vaccination against COVID-19 and measles, promotion of best practices on hygiene and sanitation, how to access essential health services, IYCF-E, and GBV. During the month, UNICEF also continued to scale up community engagement efforts in

cholera-affected *woredas* in Oromia and Somali regions. To date, UNICEF reached more than 788,000 people across the two regions through audio-mounted vehicles, sermons at religious gatherings, and mass media, and of those who have been reached, UNICEF directly engaged nearly 295,000 people with support from community social workers and volunteers. Effective community engagement and communication about the symptoms and causes of cholera helps mitigate the ongoing spread of the disease, and, during the month, UNICEF aimed to strengthen messaging around mechanisms and behaviours that people can adopt to prevent the spread of cholera, including best practices on hygiene and sanitation, toilet utilization, and water treatment and purification. Separately, in partnership with the Ethiopian Red Cross Society and with support from community volunteers, UNICEF engaged nearly 11,000 people in drought-affected areas of SNNPR to discuss issues such as maternal and child health, IYCF-E, latrine construction and usage, environmental sanitation, and child protection issues such as early marriage and GBV. Additionally, as part of UNICEF's ongoing efforts to strengthen accountability to affected populations (AAP), nearly 31,000 people provided feedback on UNICEF services during the reporting month. Across the country, IDP and host community populations expressed concerns over the lack of access to sufficient shelter, food, and nutrition and medical supplies.

Protection from Sexual Exploitation and (PSEA)

During the reporting period, 9,068 people were reached with information on safe and accessible SEA reporting channels, including focus group discussions, community awareness-raising sessions, and information campaigns in Amhara and Oromia. Additionally, in Somali Region, UNICEF ECO conducted comprehensive PSEA prevention, response, and reporting training to Jijiga University management teams to help tailor and embed PSEA and gender policies and procedures within the university's code-of-conduct. In addition, the UNICEF Tigray FO continues to co-chair and support the PSEA coordination network in Mekelle and Shire.

Human Interest Stories and External Media

In mid-April, UNICEF Ethiopia published its 2022 [annual report](#), highlighting its responses and key achievements countrywide throughout last year. During the reporting period, UNICEF supported the visit of UK parliamentarians to Oromia Region's drought-affected Borena Zone, which was documented through [photos](#) and [video](#), as well as UNICEF HR Director Bandjoungou Magassa's visits to [Tigray](#) and [Gambella](#) regions to observe education, health, and child protection programming. UNICEF documented through videos, [here](#) and [here](#), the integrated immunization campaign in Tigray and published a [video](#) of the reunification programme for families separated during the conflict in northern Ethiopia. In addition, UNICEF published a [Human Interest Story](#) highlighting the support of partners in scaling up the malnutrition response in Borena zone. UNICEF also published a [photo](#) essay to raise awareness on the ongoing cholera outbreak in southern Ethiopia and a [video](#) highlighting UNICEF-supported neonatal care for premature babies. During the month, UNICEF Ethiopia highlighted [World Immunization Week](#) to raise awareness on the importance of immunization for every child. UNICEF also published photos to celebrate [World Earth Day](#) and [World Malaria Day](#).

Donor contributions to our humanitarian appeal on social media were also highlighted including [Education Cannot Wait](#), [Saudi Esports](#), and the [Gates Foundation](#).

Humanitarian Leadership, Coordination and Strategy

UNICEF's humanitarian strategy is aligned with the 2023 Humanitarian Response Plan and UNICEF cluster and programme priorities. The humanitarian response in Ethiopia is led by the Ethiopian Disaster Risk Management Commission (EDRMC) through the federal and regional Disaster Risk Management Technical Working Groups (DRMTWGs), in which UNICEF remains an active contributing member. At the national and subnational levels, UNICEF continues to lead the Nutrition and WASH Clusters and Child Protection AoR and co-leads the Education Cluster supporting relevant line ministries and the national and regional level DRMCs. As the lead agency for three clusters and one AoR, UNICEF brings leadership to intersectoral coordination and efficiency and effectiveness when responding to immediate needs. UNICEF is also the lead agency for the Rapid Response Mechanism (RRM), working in partnership with local and international NGOs operating throughout the country. Through the RRM, UNICEF is saving lives by trucking water, rehabilitating water schemes, conducting hygiene and sanitation promotion, and distributing NFIs. UNICEF also participates in OCHA-led regional and sub regional coordination mechanisms that involve the UN, NGOs, and the Government of Ethiopia through the Emergency Coordination Centre (ECC) meetings to advocate for the needs of the affected populations across all regions.

For more content please check: [Facebook](#), [Twitter](#), [YouTube](#), [LinkedIn](#), [Instagram](#), and www.unicef.org/ethiopia

UNICEF 2023 Ethiopia Humanitarian Action for Children (HAC) Appeal: [Ethiopia Appeal | UNICEF](#)

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Annex A

Summary of Programme Results

	Cluster/Sector Response		UNICEF and IPs Response (Including Northern Ethiopia and Drought Response)		UNICEF and IPs Response (Northern Ethiopia Response only)		UNICEF and IPs Response (Drought Response only)	
Sector	2023 target	Total results ⁶	2023 Cumulative target	Total Cumulative results	2023 target	Total results	2023 target	Total results
Nutrition ⁷		Jan-Apr 2023		Jan-Apr 2023		Jan-Apr 2023		Jan-Apr 2023
Number of children aged 6 to 59 months with severe wasting admitted for treatment	1,213,870	183,783	1,213,870	183,783	334,102	66,629	845,458	104,437
Number of children aged 6 to 59 months receiving Vitamin A supplementation (SEMESTER 1)			5,835,146	2,290,438	2,169,383	798,546	3,340,380	1,488,617
Number of primary caregivers of children aged 0 to 23 months receiving IYCF counselling	1,047,650	1,086,315 ⁸	1,047,650	1,086,315	527,530	441,632	450,561	650,367
Number of pregnant women receiving preventative iron supplementation			1,476,477	347,208	529,049	118,865	876,308	210,589
Health								
Number of children and women accessing primary healthcare in UNICEF supported facilities			2,114,138	644,960	762,478	422,881	994,272	149,726
Number of children below 15 years of age vaccinated against measles			900,000	753,740	421,998	706,479	459,310	10,394
WASH								
Number of people accessing a sufficient quantity and quality of water for drinking and domestic needs	8,076,358	3,833,258	8,078,358	1,267,255	2,882,536	483,734	4,326,372	399,612
Number of people accessing appropriate sanitation services	1,462,249	364,411	1,462,249	55,663	819,502	53,419	546,747	1,582
Number of people reached with hand-washing behaviour-change programmes	6,216,236	1,620,198	6,216,236	419,580	2,282,536	116,505	2,516,700	105,324
Number of people reached with critical WASH supplies	3,212,822	480,096	3,212,822	252,022	1,022,000	92,821	1,555,622	159,201
Child Protection								
Number of children, adolescents and caregivers accessing community based MHPSS	347,000	79,885	275,012	169,342	190,910	130,763	80,026	31,889
Number of UASC provided with alternative care and/or reunified	30,000	2,265	16,002	12,556	9,000	7,821	6,496	4,482
Number of children provided with landmine or other explosive weapons prevention and/or survivor assistance interventions			295,000	88,596	295,000	88,596		
Number of girls and boys who have experienced violence reached by health, social work or justice/law enforcement services	70,000	8,901	76,841	45,070	63,033	37,740	11,579	7,168

⁶ The CP AoR is migrating to a new reporting platform, delaying reporting on some of the cluster results

⁷ Data on nutrition programme response is two months delayed due to lengthy data collection and verification process from the kebeles to federal level.

⁸ The cluster has prioritized targets for IYCF/E interventions in severity level 4 *woredas*. Integrated nutrition services (including IYCF/E) and activities are recommended in all *woredas*

	Cluster/Sector Response		UNICEF and IPs Response (Including Northern Ethiopia and Drought Response)		UNICEF and IPs Response (Northern Ethiopia Response only)		UNICEF and IPs Response (Drought Response only)	
Sector	2023 target	Total results ⁶	2023 Cumulative target	Total Cumulative results	2023 target	Total results	2023 target	Total results
Nutrition ⁷		Jan-Apr 2023		Jan-Apr 2023		Jan-Apr 2023		Jan-Apr 2023
Education								
Number of children accessing formal and non-formal education, including early learning	1,344,475	167,248	1,088,257	146,051	508,393	58,934	465,702	7,380
Number of children receiving learning materials	1,487,654	232,324	1,095,894	78,405	508,393	10,826	476,662	33,120
Social Protection								
Number of households reached with UNICEF-funded humanitarian cash transfers			220,000	16,061	90,000	5,544	127,000	10,517
PSEA								
Number of people with safe and accessible channels to report SEA by personnel who provide assistance to affected populations (Cross-sectoral)			969,403	52,108	345,904	25,111	519,165	26,997
GBVIE								
Number of women, girls and boys accessing GBV risk mitigation, prevention and/or response interventions (Cross-sectoral)			268,222	332,892	115,704	235,943	147,115	88,815
Social Behaviour Change (SBC)								
Number of people reached through messaging on prevention and access to services			35,208,969	15,290,928	4,491,642	3,087,903	17,215,321	3,622,189
Number of people who participate in engagement actions			3,378,969	1,598,805	728,398	785,621	2,018,725	660,721
Number of people sharing their concerns and asking questions through established feedback mechanisms			816,196	117,104	153,874	6,378	504,345	92,268

Annex B
2023 HAC Funding Status *including* Northern Ethiopia and Drought Response

Sector	2023 HAC Funding Requirements (USD)	Funds available			Funding gap	
		Humanitarian resources received in 2023 (USD)	Resources available from 2022 (Carry-over) (USD)	Total Funds Available (USD)	\$	%
Health	35,076,756	17,374,714	10,837,459	28,212,173	6,864,583	20%
Nutrition	140,834,883	15,638,536	15,468,108	31,106,644	109,728,239	78%
WASH	236,545,571	11,673,305	10,594,636	22,267,941	214,277,630	91%
Education	86,258,265	1,985,313	7,529,518	9,514,831	76,743,434	89%
Child Protection	59,857,414	9,414,923	5,011,141	14,426,065	45,431,349	76%
Social Policy	73,998,886	233,977	1,442,916	1,676,893	72,321,993	98%
SBC and AAP	18,377,381	-	-	-	18,377,381	100%
GBVIE	14,483,988	2,797,554	-	2,797,554	11,686,434	81%
PSEA	3,422,078	-	-	-	3,422,078	100%
Cluster Coordination	5,428,981	10,492,212	-	10,492,212	-5,063,231	0%
Total	674,284,203	69,610,534	50,883,778	120,494,312	553,789,891	82%

Annex C
2023 Northern Ethiopia Response Funding Status (part of the HAC)

Sector	2023 Northern Ethiopia Funding Requirements (USD)	Funds available			Funding gap	
		Humanitarian resources received in 2023 (USD)	Resources available from 2022 (Carry-over) (USD)	Total Funds Available (USD)	\$	%
Health	11,597,764	7,350,488	4,511,294	11,861,782	-264,018	0%
Nutrition	40,102,284	5,137,659	8,115,004	13,252,663	26,849,621	67%
WASH	75,552,708	6,013,390	1,326,851	7,340,241	68,212,467	90%
Education	39,565,551	-	568,128	568,128	38,997,424	99%
Child Protection	43,414,446	3,506,854	239,036	3,745,890	39,668,556	91%
Social Policy	30,270,894	-	-	-	30,270,894	100%
SBC and AAP	2,812,694	-	-	-	2,812,694	100%
GBVIE	10,156,079	986,854	-	986,854	9,169,225	90%
PSEA	2,232,105	-	-	-	2,232,105	100%
Total	255,704,525	22,995,245	14,760,312	37,755,557	217,948,968	85%

Annex D
2023 Drought Response Funding Status (part of the HAC)

Sector	2023 Drought Funding Requirements (USD)	Funds available			Funding gap	
		Humanitarian resources received in 2023 (USD)	Resources available from 2022 (Carry-over) (USD)	Total Funds Available (USD)	\$	%
Health	14,567,340	4,500,000	-	4,500,000	10,067,340	69%
Nutrition	96,516,407	4,598,069	2,943,612	7,541,681	88,974,726	92%
WASH	125,338,665	6,200,000	139,124	6,339,124	118,999,541	95%
Education	36,048,661	-	-	-	36,048,661	100%
Child Protection	20,500,848	4,648,069	-	4,648,069	15,852,778	77%
Social Policy	42,719,092	-	919,885	919,885	41,799,207	98%
SBC and AAP	9,666,573	-	-	-	9,666,573	100%
Total	345,357,584	29,588,351	4,002,620	33,590,971	321,408,826	93%