

Context and methodology

Following the outbreak of armed conflict in Sudan on 15 April 2023, Ethiopia is receiving thousands of forcibly displaced people at three main points of entry along the land border between Sudan and Ethiopia. The Government's Refugees and Returnees Service (RRS) and UNHCR are coordinating the response to the new refugee inflows, including daily border monitoring, screening for asylum-seekers and refugees, and coordinating the provision of basic services, such as food, water, temporary shelter as well as emergency healthcare, together with partners.

RRS and UNHCR screen Sudanese and Non-Sudanese new arrivals who are seeking international protection in Ethiopia and Ethiopian refugees returning to Ethiopia. Data is collected at household level, while individual registration procedures will be conducted with biometrics. Category of persons screened and recorded by RRS/UNHCR include:

- **Ethiopian refugee returnees:** previously registered as refugee in Sudan. UNHCR collects evidence like refugee ID number, camp names, etc
- **Sudanese refugees/asylum seekers:** UNHCR identifies both Sudanese previously registered as refugees in Ethiopia and Sudanese newly arrived in need of international protection
- **Non-Sudanese refugees/asylum seekers** in need of international protection include mainly Eritreans and South Sudanese.

The methodology and tools developed by UNHCR and RRS help among other to: i) profile new arrivals (intention of return, persons with specific needs...), ii) record refugee ID numbers of all forcibly displaced previously registered as refugees in Sudan with the purpose of reconciling data to ultimately help in maintaining its integrity across the 2 countries and iii) identify Ethiopian refugee returnees from Sudan in order to provide the necessary return assistance.

Key figures

33,808

Total new arrivals in need of international protection

33,417

Sudanese and Non-Sudanese refugees/asylum seekers

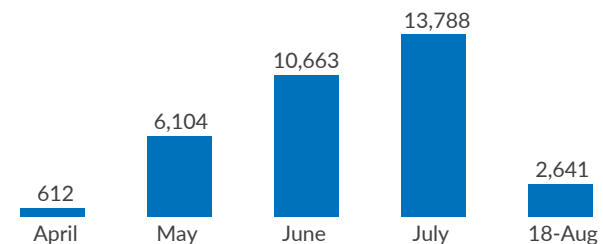
391

Ethiopian refugee returnees

Gender breakdown

Children (0 - 17 years)		Adult (18 years+)	
Boys	Girls	Male	Female
22%	18%	39%	21%

Monthly arrival trends | April - August 2023



Relocation

9,094

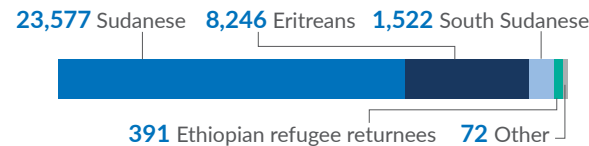
Individuals relocated from Metema TC to Kumer site

1,319

Individuals relocated from Kurmuk TC to Sherkole camp

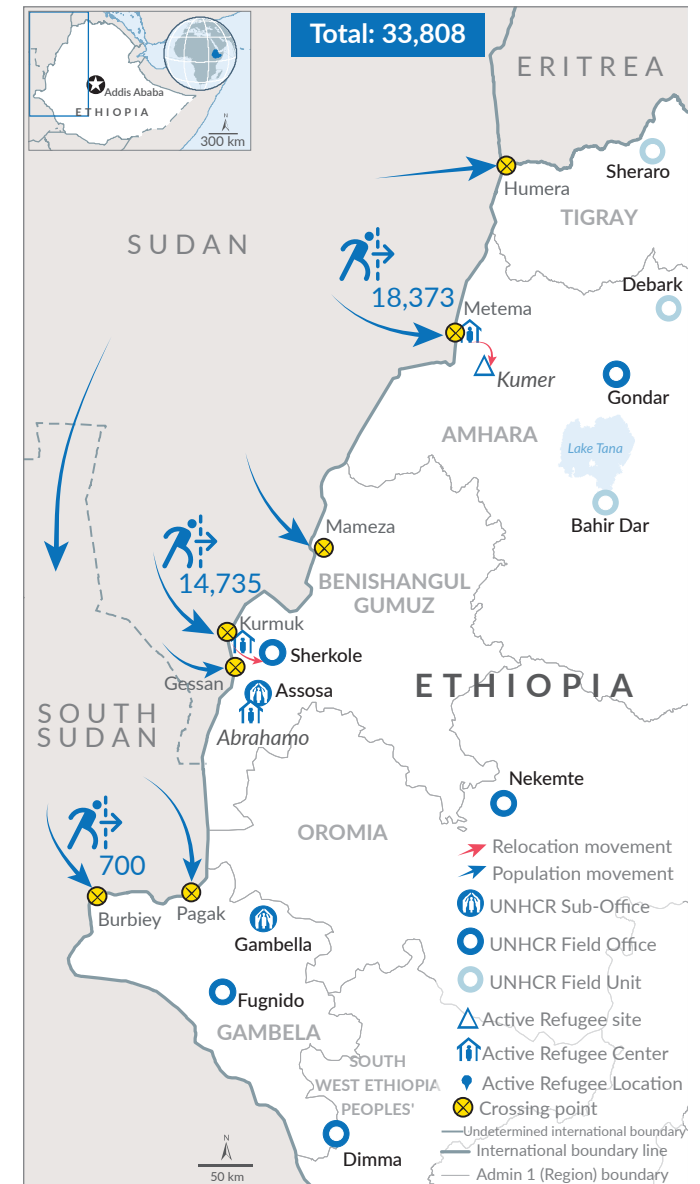
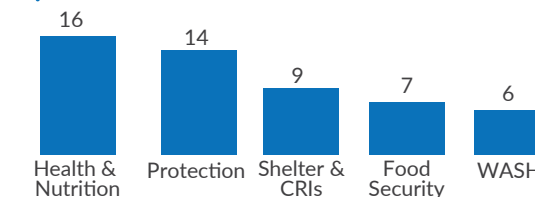



Nationality breakdown







Partnership

27 Organizations responding to the emergency



Sector	Response	Priorities / Challenges	Partners
 Protection	<ul style="list-style-type: none"> 1,070 persons screened in Metema are found to be at different stages of a third-country solution processing, mainly under private sponsorship and family reunification schemes. Protection counselling was provided to over 590 refugees at Metema entry point, Transit Center and in Kumer site, around issues such as registration and documentation, family reunification, resettlement and other alternative pathways, as well as food and shelter assistance. The total number of Unaccompanied and Separated Children (UASC) in Metema reached 169. So far, two children have been reunified with their families, with the support from UNHCR's partner Innovative Humanitarian Solutions (IHS). 22 UASCs were referred for registration, health and psychosocial support, receiving dignity kits, material and legal services. 30 Best-Interest Assessments (BIAs) were conducted; foster care arrangements were made for 21 children at the Metema TC; others are dwelling in groups in family tents at Kumer site. More than 2,000 children benefitted from education and sport activities, incl. alphabet learning, indoor and outdoor activities in Child-Friendly Spaces at the Metema TC and Kumer site. In Metema TC and Kumer site, 576 persons with specific needs were identified and referred for appropriate services to: UNHCR for shelter, and RADO for rehabilitation, mobility appliances, and NFIs. Development and Inter-Church Aid Commission (DICAC) distributed dignity kits and provided psychosocial support to 55 women-at-risk in Kumer. A total of 12 GBV cases (10 at Kurmuk and 2 at Metema) were supported by the International Rescue Committee (IRC) and DICAC respectively. Gender-based violence, child protection, Protection from sexual exploitation and abuse (PSEA), and Code of Conduct awareness-raising sessions were organized jointly by UNHCR, RRS, IRC and Plan International Ethiopia (PIE) in Kurmuk TC. In Metema TC, 210 individuals attended GBV and fraud awareness sessions. At the Metema entry point, transit center, and in Kumer site, 550 flyers with GBV and PSEA-related messages in Arabic and Tigrinya were distributed to refugees and asylum-seekers. RRS, UNHCR and Refugee Central Committee (RCC) members in Kumer agreed to establish a Peace Committee including host community, Eritrean and Sudanese communities' members, with delegated roles and responsibilities. In collaboration with the Zonal Office for Women, Children and Social Welfare, and all protection partners, UNHCR held a meeting of the protection working group in Metema. Partners were requested to provide materials including dignity kits, child-friendly tents and recreational kits to the one-stop center at the Metema referral hospital. UNHCR has been ensuring protection presence in Kurmuk transit center. Access to basic needs and health services were provided. Food (hot meal) and shelter among other needs were prioritized. Roving protection desk with capacity to counsel 80-100 individuals per day was established in Kurmuk transit centre under direct implementation of UNHCR with potential involvement of partners and gradual handing over in September 2023 	<ul style="list-style-type: none"> The deteriorating security situation in Amhara region had hindered staff movements between Metema and Gondar. However, within the West Gondar zone, the situation is calmer, allowing UNHCR and partners to access refugee sites. Challenges identified through protection monitoring and protection desks in Metema include: insufficient solar lighting in the camp; lack of medications; risks to public safety, ; shortage of food, clothing, milk and diapers for children; lack of employment and education opportunities; lack of provision of soap for personal hygiene, inaccessibility of WASH facilities for persons with disabilities; Non-food items (NFIs); and need for fumigation in and around the area to address pests. Health/Mental Health and Psychosocial Support (MHPSS) Child Protection (CP), Gender Based Violence (GBV) 	RRS, UNHCR, RaDO, DICAC, PIE, IOM, UNICEF, IHS, DRMO, EMT, ANE, GOAL, Red Cross, Community volunteers

Sector	Response	Priorities / Challenges	Partners
 Shelter/ Core Relief Items (CRI)	<ul style="list-style-type: none"> • 1,078 refugees were relocated from Kurmuk TC to Sherkole refugee camp. • The Kurmuk TC has been expanded from its original capacity of 2,000 to accommodate 9,000 individuals. Relocation of asylum-seekers to the new hangars in the expanded transit center in Kurmuk town is ongoing. • So far at Kumer site, 1,412 family tents and 18 communal hangars have been erected, providing shelter to 6,263 families (8,679 individuals). 750 tents were delivered, and construction of additional hangars is ongoing. Seven family tents and 32 communal hangars were built in Metema TC. Replacement of plastic roofing with corrugated iron (on shared hangars, partner workspaces and registration areas) is ongoing. • Road construction, site leveling and grading works are ongoing. • Sandbags and fill materials are being distributed in Kumer site to accommodate families, and to protect their tents from rainwater damage <p>Kurmuk TC</p> <ul style="list-style-type: none"> • 20 hangars have been constructed. • 1 registration service shade and two waiting shades constructed. • One generator shade construction completed: with electrical connection works pending materials procurement. • 80 family tents pitched, shelter committee comprising two members from each hangar in place. • Expansion site for hangar construction has been identified and taken over from the Woreda. • 3,700 households (11,986 Individuals) received CRI materials within 8-20 August in Kurmuk transit center <p>Sherkole camp</p> <ul style="list-style-type: none"> • 4 semi-permanent and 1 permanent hangar renovated. Fencing work for the hangars compound has been constructed. • 1 hangar was partitioned for health and nutrition sector use. • 1 temporary communal kitchen was constructed and later used to shelter refugees. • 60 Transitional shelters are constructed so far in Sherkole. 	<ul style="list-style-type: none"> • Ongoing heavy rains are hampering efforts to level sites and build roads. • Continue provision of CRI. • Continue construction of transitional shelters. • Relocation of 2,000 people to the Sherkole camp 	UNHCR, RRS, ANE, UNFPA, IHS, IOM, NRC, PIE, IRC
 Food Security	<ul style="list-style-type: none"> • New arrivals were directed to the NGO “Samaritan Purse” for hot meals. 	<ul style="list-style-type: none"> • Insufficient quantity and lack of nutritious feeding for lactating mothers and babies during wet feeding. 	UNHCR, IHS, ANE, RRS, GOAL, Samaritan Purse, PIE

Sector	Response	Priorities / Challenges	Partners
 Health & Nutrition	<ul style="list-style-type: none"> • Medical Teams International (MTI) conducted Outpatient Department (OPD) consultations for 1,131 patients, including 215 under-five refugee children in Kumer site. • Out of 210 children screened for malnutrition, 17 moderate and severe acute malnutrition cases were identified and referred for support. Among 31 pregnant and lactating mothers screened, 11 were referred for nutrition treatment. • UNICEF's Mobile-Health and Nutrition team (MHNT) provided emergency clinical services at the Metema TC. So far, UNICEF and IMC have performed 3,254 consultations at the site. • RRS arranged ambulance transportation from the Alemwach site to Gendawuha and Gondar hospitals. • Partners in the Health Cluster met at Gendawuha Zonal health office department: Zonal health office, Woreda health office, and partners including UN agencies discussed the Cholera preparedness plan, activity report and gaps observed on the emergency response, and action points were developed. Similar meeting took place with partners on Cholera outbreak preparedness and response plan at the Kumer site. • Weekly MHPSS session conducted under UNHCR's direct implementation with involvement of PIE is ensured in transit center 	<ul style="list-style-type: none"> • Absence of ambulances; • lack of medicines and of adequate supplemental feeding for kids, the community, people with medical conditions, pregnant and lactating mothers in Kumer and Metema TC. • Establishment of a nutrition center in Kurmuk 	GOAL, Emergency Medical Team (MoH), WHO, RRS, MSF-H, CUAMM, IMC, CVT, DICAC, RaDO, PIE, MTI, IRC, IOM, EMT, Kurmuk Woreda health office.
 WASH	<ul style="list-style-type: none"> • WASH partner IHS, is ensuring the water supply of 9.3L per person per day for 8,679 beneficiaries at Kumer site, and 20L/p/d of water for 2,500 people at Metema TC. Currently, four water tanks with a total capacity of 10,000L, and one with a capacity of 5,000L (with 30 water taps) are available in Kumer. In Metema TC, two water tanks with a total capacity of 10,000L and one with a capacity of 5,000L (with 18 water taps) are utilized for water supply. • At Kumer, 10 latrines and 10 shower blocks have been completed, while five latrines and five shower blocks are being set up. There are four solid waste disposal sites in Kumer. 16 community hygiene promoters are in the settlement disseminating key WASH messages. • At Metema, five latrines and six shower blocks are completed; two solid waste disposal sites are available at the site, where four community members are promoting the importance of hygiene • Water supply was maintained and established from the nearest water reservation. 27,7L of consumption per individual is ensured in transit center 	<ul style="list-style-type: none"> • Community resistance to building latrines along the sanitation corridor. • Delays in delivery of construction materials for latrines and showers, as well as of accessories for water points. • Arrangement of drinking water • Improvement of latrines and wash facilities 	IHS, Oxfam, UNICEF, ANE, IRC, PIE