HEALTH

Without an additional funding of $10 million, limited health services will be available to close to 1 million refugees.

With only 43% of our funding requirement of **$23 million** received, we can only provide minimal healthcare services.

Refugees in new emergency locations access primary healthcare services through government facilities. Refugees access referral services at government hospitals located outside the camps. There is an ongoing transition from RRS to NGO partners as an interim measure prior to gradual transition to regional health bureaus as part of inclusion of refugees into national services.

Close to **1 million refugees** who had **free** access to **24 health facilities** located within **20 refugee sites** will be affected.

With limited resources for health, more refugees will die from preventable illnesses.

Because the funding gap will **affect**:

- provision of essential medicines
- medical **supplies** (gloves, syringes, catheters...)
- **access of refugees** to government hospitals
- salaries of **doctors, nurses, refugees community health workers**.
- prevention and response to disease outbreaks
- **operational costs** of running a health facility (patient meals, fuel, electricity...)
- medical **equipment** (blood pressure machines, blood sugar diagnostics equipment, minor surgical instruments...)
- ability to respond to new public health emergencies
- mental health and psychosocial support

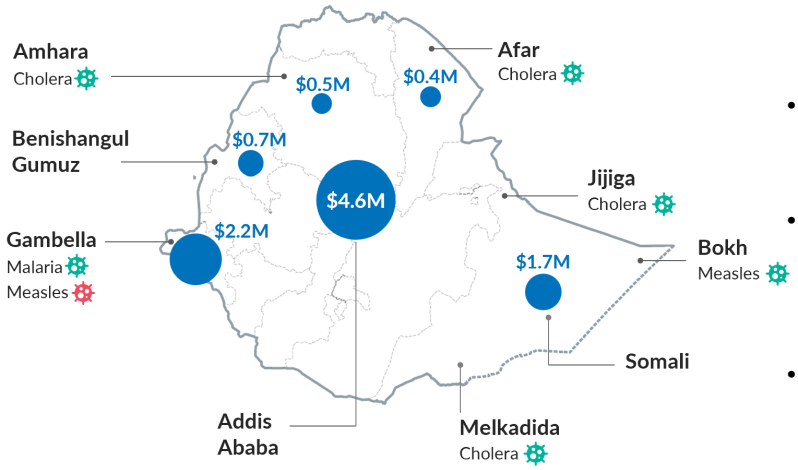
- **increase in chronic illnesses and disabilities**
- **inability to manage diseases like diabetes, hypertension, asthma**
- **refugees will only access medical referrals for life threatening diseases**
- **more disease outbreaks**
- **more pressure on government health facilities leading to more tensions with local communities**
- **more chronic mental health conditions especially in children**
- **more deaths from preventable diseases**

We need $10 Million to:

$10.1 M Total funding gaps 2024 (USD)

6 Outbreak contained

1 Ongoing outbreak



- Purchase essential **medicines**, **medical supplies** and **equipment** in 5 refugee hosting regions (Gambella, Benishangul-Gumuz, Amhara, Afar, Somali)
- Support **national health systems** in 5 refugee hosting regions (Gambella, Benishangul-Gumuz, Amhara, Afar, Somali)
- Pay for the treatment costs of **medical referrals** in government hospitals in 5 refugee hosting regions (Gambella, Benishangul-Gumuz, Amhara, Afar, Somali)
- Prevent **malaria** mainly in Gambella region

WHAT WE DID IN 2023

- **90%** of women delivered with skilled health assistance,
- **93%** of children between 9 months and 5 years of age were vaccinated against measles,
- Over **889,000 refugees** were able to access **primary healthcare services** – of which 92% were refugees (8% nationals).
- **21 health centers and 3 health posts** served close to 1 million refugees across Ethiopia.

Because of chronic underfunding in 2023:

- **Twice as many refugees died in 2023 (0.67 per 1000 per month), more than in 2022.**
- **Deaths of children aged under five increased to 2.5 per 1000 per month in 2023, exceeding UNHCR's standard of less than 1.5 per 1000 per month.**
- **Over half of refugee women (54%) did not attend at least 4 pre-birth clinic visits by the time of delivery.**

PARTNERS: