

Ethiopia

June 2018

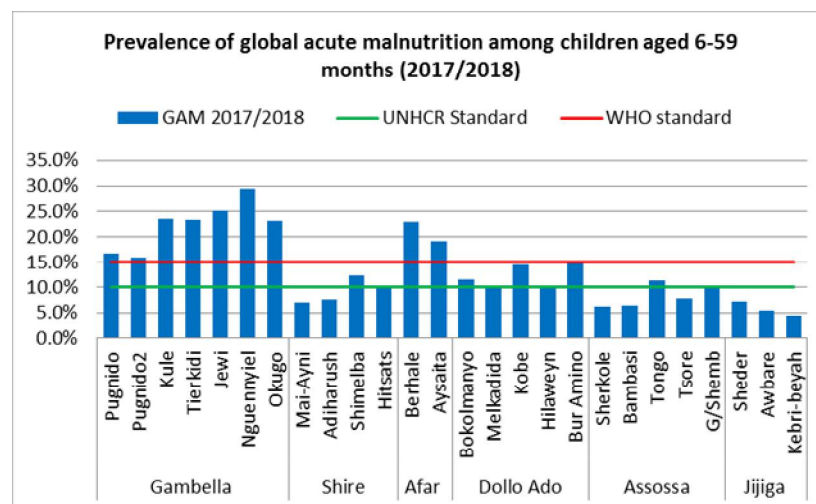
12,134 children under the age of five were admitted and treated for acute malnutrition with a recovery rate of **88.7%** and **92.3%** for severe and moderate cases.

The average weight gain for severely malnourished children is **7.0 g/kg/d**

Prevalence of global acute malnutrition in **15 out of 26** camps (**57.7%**) is below the WHO emergency threshold of **15%**

HIGHLIGHTS

- Annual nutrition surveys have been completed in the Melkadida camps and currently ongoing in Gambella and Shire camps.



- The prevalence of global acute malnutrition (GAM) is below the emergency threshold of 15% in 57.7% (15/26) of the camps. Prevalence of stunting is within the acceptable standards (<20%) in 38.5% (10/26) of the camps. Challenges in addressing malnutrition remain with a need to strengthen preventive programmes through a multi-sectoral approach to support childcare. Improvements in Melkadida camps in 2018 are partially attributed to the elevated cut off for further weight-for-height screening. UNHCR started to roll-out of the UNHCR infant and young child feeding framework to enhance engagement of other nutrition-sensitive sectors.
- A recovery rate of 92.3% and 88.7% was achieved (SPHERE standard: >75%) for children with moderate and severe malnutrition respectively. All children aged 6 to 24 months continued to receive super cereal plus under the blanket supplementary feeding programme in all camps in order to complement the general food ration with high energy and nutrient dense foods appropriate for optimal growth and development. In Gambella, Melkadida and Afar, where the GAM prevalence remains mostly above the emergency threshold of 15%, this programme is extended to children up to 59 months.
- Since December 2016, all children aged 3 to 5 years in the Melkadida camps were transferred from the blanket nutrition programme (take home ration) to the pre-primary schools (wet feeding) to improve uptake of the nutritious products.
- Since January 2018, 200 newly arrived children under the age of 5 were screened on arrival in Melkadida. 24 out of 58 pregnant and lactating women had acute malnutrition on arrival. Services for immediate treatment of children with acute malnutrition along with prioritized registration and relocation of these families are in place.
- In May and June, a deeper ration cut was put in place providing 1,278 Kcal (38.2% less than the standard) in all except the Eritrean camps. From July to December with improved funding situation 1,737 Kcal will be provided.

STRATEGIC PRIORITIES

- The Ethiopia Refugee Public Health Sector Strategic Plan 2014-2018, covering health (including HIV and reproductive health), nutrition and food security and WASH, forms the basis of programme planning and implementation in all regions where refugees are hosted.
- Key objectives of the nutrition response are the effective prevention of undernutrition and micronutrient deficiencies; effective and timely identification and treatment of acute malnutrition; provision of up-to-date food security and nutrition information and analysis, and effective food security and nutrition response in emergencies.
- Refugees in the Tigray, Afar, Benishangul-Gumuz regions as well as those in the Jijiga zone of the Somali Region receive cash and food assistance, while the service is yet to be extended to those in Melkadida and Gambella camps.
- A comprehensive Infant and Young Child Feeding (IYCF) strategy which accounts for nutrition sensitive sectors in the Gambella and Melkadida operations will be developed and implemented shortly. The strategy is expected to be rolled-out in other locations as well.
- The use of a new technology-the Last Mile Mobile Solution (LMMS) - is to be expanded to enhance efficiency of registration and reporting within the nutrition programmes.
- The regular annual nutrition surveys, which assess the health and nutrition status of the refugees, have been planned for all camps except in Jijiga.
- UNHCR and WFP continue their joint advocacy for the reinstallation of full food rations to refugees.

CHALLENGES

CONTINUOUS RATION CUTS



GAM PREVALENCE BEYOND THE 15% EMERGENCY THRESHOLD IN 11 OF 26 SURVEYED REFUGEE CAMPS

FUNDING SHORTFALLS AFFECTING COMPLEMENTARY FOOD ACTIVITIES & PRACTICES



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CONTACTS

Dorothy Gazarwa, Nutrition Officer, gazarwa@unhcr.org, +251 116170590

