On April 15, we marked 1 year of the conflict in Sudan. One year on, 8.6 million people have been forced to flee their homes facing countless tragedies on their journey. With no end to the conflict in sight, we call for an immediate end to the conflict to cease the unimaginable human suffering.

This month, we had the privilege to host donors from 14 countries. The delegation travelled to the Sudan border in Benishangul Gumuz region, to witness how UNHCR works with RRS and partners towards solutions from the onset of emergencies; in Addis Ababa, they witnessed how Ethiopia’s inclusive digital ID is providing refugees with work opportunities and other services; in Melkadida (Somali region), they learnt how development projects have been instrumental to refugees and host communities in this remote region to advance innovative solutions for improved services and livelihood opportunities.

We also received the Priority Situations Core Group (PSCG) visiting Ethiopia to engage with the Government of Ethiopia (GoE), UNHCR, IOM and refugees. The GoE showcased its progress on issuing exit permits. This was appreciated by represented resettlement countries. UNHCR continues to work with resettlement countries, to advocate for increased resettlement opportunities and complementary pathways (labor mobility, scholarships) for refugees in Ethiopia who are in urgent need of protection.

UNHCR has only received 13% of its total funding requirement of USD 426 million for its operations in 2024. As we prioritize our efforts to maintain essential services, we need donors’ continued support to ensure the protection, assistance and well-being of those forced to flee.

UNHCR works with 45 implementing partners as well as the Ethiopian Government, Refugees and Returnees Service (RRS), UN Agencies, International and national NGOs, universities, and other legal entities.
So far in 2024, more than 63,000 new refugees and asylum seekers have arrived in Ethiopia. This includes over 11,000 refugees and asylum seekers from Sudan, bringing the number of people in need of protection arriving from Sudan to 53,572 since April 2023. Along with partners, UNHCR is providing protection counselling, healthcare, and lifesaving humanitarian assistance to new arrivals in need of international protection. UNHCR continues to support and advocate with the GoE for full resumption of registration across the country.

In April, 37 survivors of gender-based violence (GBV) were provided with psycho-social support, counselling, medical referral, legal services, and material support.

To prevent GBV across our locations, UNHCR and partners conducted trainings. In the Somali region, we trained 48 people on how to safely respond to GBV disclosures, where to refer people and how to manage cases. Government officials, UNHCR and partners, law enforcement, refugee committees, teachers, and community social workers participated.

To raise awareness on GBV, UNHCR and partners distributed 150 brochures containing GBV prevention messages as well as information on available services to 75 families in Metema, Amhara region. However, our GBV prevention and response activities had to cease in four camps in the Gambella region, due to budget cuts.

In April, 1,260 children were able to access Child Friendly Spaces in refugee camps across Ethiopia. These spaces allow refugee children to gather in a safe environment and get back to being kids. However, the shortage of funds means there are not enough recreational kits.

To help meet their mental health and wellbeing needs, 1,177 children were provided with Psychosocial Support Services. Alternative care arrangements were also set up for 4,527 unaccompanied and separated children.

To ensure quality services to refugee children, 327 people involved in child protection were trained. Additionally, in collaboration with UNICEF, 20 child protection staff from various organizations received a Best Interest Determination (BID) training.

UNHCR Ethiopia presented its new Policy on Child Protection for 2024 to its partners at the CP-GBV working group. The policy lays out how UNHCR & partners work to keep forcibly displaced and stateless children safe and protected from harm.
Health (cont’d)

Countrywide, 61,250 refugees consulted doctors in April. The top three causes of death/illness were Upper Respiratory Tract Infections (URTI), Lower Respiratory Tract Infections (LRTI) and Malaria.

In addition, 1,212 births were recorded, with 90% of these being attended by skilled assistance and 3,780 refugees were able to access contraceptive services.

To respond to the medical needs of refugees, UNHCR received donations of medical kits from WHO that have been dispatched to Jijiga, Afar, Assosa and Gambella regions.

As of April 2024, UNHCR completed the onboarding of new health partners. Partners have started to provide health services in all refugee sites except in Gambella region.

UNHCR estimates that $4.2 million USD is required to cover the essential medication and medical supplies needs of over 1 million refugees for one year.

⚠️ UNDERFUNDING in Health causes refugees to stop seeking medical care. Lack of access to essential medicines combined with poor-quality health services discourages refugees from going to health facilities, eventually increasing mortality rates. Referral services are halted to focus on emergency cases only. Patients are unable to reach hospitals on time because of a lack of ambulances. Read more here.

Shelter & CRIs

Along with Action for the Needy Ethiopia, we are providing vital shelter support to those fleeing conflict in Sudan. In Benishangul Gumuz region, we have completed 28% of the planned 1,800 emergency shelters in Ura. Additionally, 200 emergency shelters were upgraded to durable ones, in Tdire camp (Benishangul Gumuz region). In the Somali region, 245 shelters in three camps in Mekele were maintained.

⚠️ UNDERFUNDING in Shelter causes thousands of refugees to be housed in inadequate shelters, living in congested conditions unprotected from rain and flooding. This poses safety concerns to both refugees and host communities living around the settlements or refugee sites. Read more here.

Food security + Nutrition (cont’d)

As of April, 4,142 children under five have been admitted to the outpatient Therapeutic feeding programs for severe acute malnutrition. In line with Nutrition standards, 79% of children under five with severe acute malnutrition and 94% of children with moderate malnutrition have been cured. Additionally, 9,234 children have been admitted to the Targeted Supplementary Feeding Program (TSFP).

To prevent malnutrition, UNHCR and partners provide children and mothers with food supplements through a Blanket Supplementary Feeding Program. As of April 2024, 23,472 children under five and 11,124 pregnant and lactating women have been enrolled. Despite the deteriorating nutrition situation, fewer children were admitted to the program compared to the same period last year.

Across our nutrition programs, we support 98,589 children under five, 45,964 pregnant and lactating women and 8,204 other people with medical cases.

⚠️ Without additional funding in Food and Nutrition, over 90,000 refugee children will suffer from undernutrition, stunting their physical and mental development, exposing them to disease and eventually death. Programs to prevent undernutrition for close to 200,000 children under five and over 40,000 pregnant and lactating women will cease. Read more here.

Water, Sanitation & Hygiene

For new arrivals from Sudan, UNHCR and partners have supplied 11 liters of water per person per day (l/p/d) on average - lower than the emergency threshold of at least 150 l/p/d.

To ensure newly relocated refugees from Kurmuk have access to water in their new settlement in Ura (Benishangul Gumuz region), UNHCR and partners are setting up facilities to purify water from the local river and pump it to the new settlement. So far, we have excavated close to 3km to host a pipe of which 1.2km have been laid and backfilled.

In terms of sanitation - in the Amhara region – we have installed 72 toilets in Kumer, 36 in Awala as well as 96 shower heads in Awala. This has improved the latrine per person ratio from 1:69 to 1:59. However, this is still below the standard of 1 latrine per 50 people.

In other refugee hosting areas, refugees had access to an average of 14 l/p/d in April - lower than the standard of 20 l/p/d. The sanitation coverage in April 2024 in the refugee camps and sites is 25% - below the standard threshold of 85%.

In Gambella region, along with our partner, we built 81 new toilets and 300 bathing shelters from locally available materials in Gambella refugee camps. Additionally, 11,000 jerricans, 300 Dignity kits and 3,300 bars of soap were distributed in Pinyudo I and II camps.

⚠️ UNDERFUNDING in Water and Sanitation causes health hazards, disease outbreaks (cholera) and exposes women and girls to sexual violence as they walk long distances to fetch water and do not have adequate sanitation facilities. Read more here.

Food security + Nutrition

In April, 78% of refugees (715,089) have received their food rations. To maintain food distribution until June, WFP has been providing 60% of a family’s calorie needs in the food rations. However, these gaps have exposed refugees to negative coping strategies. Additionally, the lack of adequate warehouses, insecurity, and flooding in some of the refugee locations has led to missed monthly rations impacting families’ food security.

In terms of nutrition, we continue to provide curative and preventive nutrition programs in all the 41 nutrition centers across the country.

⚠️ UNDERFUNDING in Nutrition causes health hazards, disease outbreaks (cholera) and exposes women and girls to sexual violence as they walk long distances to fetch water and do not have adequate sanitation facilities. Read more here.

“Today I’m feeling very happy because I’m going to America!” - Yahye

Thanks to joint efforts by @StatePRM, @IOMETHIOPIA, @RSSEThioiopia and @UNHCREthiopia, Yahye is one of 350 refugees who are being resettled to the United States. Huge thanks to the US Embassy!
In April, 285 youth refugees, returnees, and host community were provided with psycho-social and soft skills development training. Funded by the Swiss Agency for Development and Cooperation, this initiative - entitled East African Migration Routes (EAMR) and implemented by Save the Children International (SCI) - focuses on youth livelihood improvement interventions. The project targeted persons on the move that are children and youth living in Addis Ababa and Metema (Amhara Region), including out of camp refugee children and youth. The next phase of the project will provide these youth with startup capital and support for the launch of their business.

To improve refugees’ access to financial services, UNHCR, RRS and Rays Microfinance (private microfinance institution) inaugurated a financial service outlet at the Buramino camp in the Somali region. This outlet was built thanks to funding from the IKEA Foundation that allowed UNHCR to build and equip a service station.

As of April, the cases of 1,896 refugees have been submitted for resettlement consideration. In April, 681 refugees have departed from Ethiopia. The majority (523) through a resettlement opportunity, 146 on private sponsorship, 10 through Family reunification and 2 on Labor mobility.

We also facilitated the issuance of convention travel documents (CTDs) to 25 individuals including 10 emergency travel documents (ETD). Additionally, we have counseled 22 refugees on family reunification, education, and labor mobility pathways.

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The oldest refugee camp in Ethiopia, Kebribeyah, has been hosting over 18,000 refugees for the past 30 years. Our Representative, Andrew Mbogori, explains how working closely with the Somali Regional Government, RRS Ethiopia and partners, we will transform Kebribeyah into a settlement with improved integrated services.