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Ethiopia Refugee Response Plan

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Situational Overview

Ethiopia remains one of the largest refugee asylum countries world-wide, reflecting the ongoing fragility and conflict in the region. The country provides protection to refugees from some 26 countries. Among the principal factors leading to this situation are predominantly the conflict in South Sudan, the prevailing political environment in Eritrea, together with conflict and drought in Somalia. As at 30 June 2020, the country hosted 766,563 refugees who were forced to flee their homes as a result of insecurity, political instability, military conscription, conflict, conflict-induced famine and other problems in their countries of origin.

UNHCR's main government counterpart in the refugee response in Ethiopia is the Agency for Refugees and Returnees Affairs (ARRA). UNHCR also works closely with 57 humanitarian and development partners and is part of the Humanitarian Country Team where refugee programmes are discussed strategically to ensure the needs of refugees are adequately presented and addressed across the UN System. UNHCR builds on a well-established coordination forum, including the inter-sector Refugee Coordination Group, together with national and regional sector working groups. As part of the Global Compact on Refugees (GCR) and Comprehensive Refugee Response Framework (CRRF), UNHCR is furthering partnerships with government line ministries, regional and local authorities, as well as development partners and the private sector.

ARRA formally adopted three Directives to implement key provisions of the Refugee Proclamation, demonstrating progress on the right to work, freedom of residence and movement outside of camps, and grievance and appeals mechanisms: (i) the Directive to Determine Conditions for Movement and Residence of Refugees Outside of Camps, Directive No. 01/2019; and (ii) the Directive to Determine the Procedure for Refuges Right to Work, Directive No. 02/2019; and (iii) the Refugees and Returnees Grievances and Appeals Handling Directive, Directive No. 03/2019. UNHCR supported ARRA with English translation and printing of the Directives for distribution to refugees, partners and donors, however, the scope of implementation thereof remained limited.

In the first half of 2020, ARRA made significant progress with regards to the implementation of the Economic Opportunity Program (EOP) and Refugee Right to Work Directive. Linked to this, 2,600 residence permits for registered refugees were processed, and are at the final stage for signature. The implementation of the Ethiopian Government's (GoE's) pledge to expand its OCP to benefit 10% of the current refugee population requires continues engagement and proper consideration. As of mid-year, around 27,000 Eritrean refugees were residing in Addis Ababa with Out-of-Camp Policy (OCP) status.

Ethiopia confirmed its first case of COVID-19 on 13 March 2020. Since then, the pandemic has spread across regions including those hosting refugees and internally displaced persons.

On 26 January, the Government of Ethiopia made the decision to cease prima facie recognition of refugee status for Eritreans, with plans to initiate individual Refugee Status Determination (RSD), bringing an end to the over 10-year recognition of Eritreans on a prima facie basis. UNHCR and partners continue to advocate for close consultations with the refugees, host community, donors and key stakeholders around the planned closure of Hitsats refugee camp in Tigray.

South Sudanese are the largest refugee population in Ethiopia, totaling 344,874 as of 30 June 2020. Most new arrivals into the Gambella region are expected to be relocated to the Benishangul-Gumuz Region following a Government policy issued in January 2019 requiring such transfers. Between 31 August 2019 and 30 March 2020, a total of 7,000 individuals were in the Pamdong Transit Center, 718 of whom were relocated to Assosa. On March 30, the Government directed the closure of Pamdong Transit Centre, and 2,190 individuals were relocated to the Nguenyyiel refugee camp. In response to the COVID-19 pandemic, Pagak Reception Centre was re-opened in May 2020. There is limited accommodation, and services are overstretched for the number of new asylum seekers (8,000 at mid-year), raising public health concerns. Substantial re-investments have been made to ensure the delivery of assistance in Pagak including rehabilitation of shelters (and other infrastructure), provision of water, sanitation, health, nutrition and protection services.

UNHCR and partner resources were re-prioritised to cover critical preparedness activities, including the provision of COVID-19 related training for health care workers, awareness raising campaigns, and distribution of medical equipment and Personal Protective Equipment (PPE) for frontline workers. Nevertheless, COVID-19 has adversely impacted the humanitarian response to refugees in Ethiopia. UNHCR and its partners have sought alternative implementation modalities in various sectors to sustain humanitarian assistance. In an endeavour to curb the spread of COVID-19, response assistance in critical areas such as protection, health promotion, Core Relief Items (CRI), WASH and shelter were scaled up. Increased gaps are foreseen in the second half of the year, and continuous initiatives are being explored to secure additional funding and resources in order to sustain delivery of life-saving assistance and to support the implementation of activities that were suspended





Sector Responses



KEY INDICATORS

- 766,563 persons of concern individually registered at the end of reporting period
- 35,102 registered unaccompanied and separated children
- 16,913 best interest assessments conducted
- 100% of known SGBV survivors receiving support

Since the first case of COVID-19 was reported in Ethiopia on March 13, UNHCR and partners amplified measures to curtail the impact of the pandemic on persons of concern. Exceptional focus was given to key life-saving protection services while respecting COVID-19 prevention measures, with service delivery well coordinated through the inter-agency COVID-19 committees. In Tigray, operational priority was given to strengthening asylum and registration capacity in collaboration with ARRA.

In line with the Minimum Standards for Child Protection in Humanitarian Action and based on the Refugee National Child Protection Strategy, UNHCR and partners continued providing comprehensive child protection services for children. Best-Interest Assessments were completed for 16,913 unaccompanied and other children-at-risk, and regular home visits were conducted to ensure quality care was provided to the children under different care arrangements. Partners provided COVID-19 related trainings for community workers, and tailored awareness raising activities/prevention messages through audio recorded sound systems and home visits when possible.

In Gambella, 18,663 children-at-risk were supported, and child protection partners distributed playing and awareness materials to be used at home, while engaging youth in home visits and outreach activities to support children with their education. Child-friendly communication techniques (drawing, acting, singing and story telling) were widely used in camps targeting children, youth and caregivers, assisting them to express their feelings around the COVID-19 situation, and adopt positive coping mechanisms.

100% of known SGBV survivors across the camps and urban areas received support, and were referred to health, legal and psychosocial support services as per a survivor-centered approach.

In Assosa, UNHCR's SGBV partner IRC developed a mobile application for conducting a Safety Audit to map SGBV risks remotely and regularly. The Kobo App will be used to conduct assessments through mobile phones, tablets or laptops, allowing SGBV teams to collect data on refugee women and girls' protection concerns during the COVID-19 pandemic.

In Melkadida, 62,605 refugees, representing 74% of the registered Somali population received identity cards; 2,156 new-born and 1,000 undocumented children were registered. A total of 823 civil registration documents were issued (544 births, 24 deaths, 228 marriages, and 27 divorces) to refugees in the Somali region. In Jijiga, free legal aid assistance was provided to 96 refugees and other persons of concern in the three refugee camps albeit constraints occasioned by movement restrictions. 502 refugees and members of the host community accessed the mobile court in the Melkadida camps.

Although the security situation in Gambella continues to be unpredictable, initiatives have been undertaken to promote peaceful co-existence between the refugee communities. Construction of a Federal police station and accommodation units in Pugnido commenced with the aim of increasing police deployments to the area and improve security.

Where possible, remote interviewing processes were launched for resettlement activities, prioritizing family reunification of minors, opportunities through humanitarian corridors, private and educational scholarships. 185 South Sudanese refugees from Tsore and Gure Shembola refugee camps were identified in need for resettlement, out of whom

109 were submitted to resettlement countries. 94 Sudanese refugees from Sherkole refugee camp were identified in need for resettlement, while 15 cases for 47 Sudanese were submitted to resettlement countries.

UNHCR Ethiopia, in close collaboration with ARRA and UNHCR Kenya facilitated the return of 79 Ethiopian nationals from Kenya, 17 of them to their respective areas of origin in Oromia region and 62 to the Somali region. UNHCR provided returnees with the standard re-integration package in the form of cash assistance to address their basic needs during the first six months after arrival. No repatriation took place during the reporting period.

Cash-based Interventions (CBI) remained at the core of the urban assistance programme. Through a strong partnership with the financial provider, 4,000 urban refugees received monthly allowances. The payment processes were improved ensuring that eligible refugees could access their payments in a timely manner.

With the temporary closure of the reception centre in Addis Ababa, a protection helpline service was established, and key messages on SGBV prevention and response translated into seven (7) languages were disseminated via social media platforms. The helpline received 348 calls between April and June when it was rolled out.

Challenges and Remaining Gaps

On 24 March 2020, the Ethiopian authorities closed all border crossings to contain the spread of COVID-19 pandemic, and coupled with the new directive for individual RSD, this led to a 70% decrease in the number of new arrivals from Eritrea by mid-year 2020.

- 1. International and regional instruments acceded to, ratified or strengthened
- 2. Law and policy strengthened to ensure inclusion of refugees in the national protection system
- 3. Access to legal assistance and legal remedies improved
- 4. Access to the territory improved and risk of refoulment reduced
- 5. Public attitude towards persons of concern improved
- 6. Reception conditions improved
- 7. Quality of registration and profiling improved or maintained
- 8. Access to and quality of status determination procedures improved
- 9. Level of individual documentation increased
- 10. Civil registration and civil status documentation strengthened
- 11. Protection from effects or armed conclict strengthened

- 12. Risk of SGBV is reduced and quality of response improved
- 13. Protection of children strengthened
- 14. Services for persons wiTh specific needs strengthened
- 15. Community mobilization strengthened and expanded
- 16. Peaceful co-existence with local comunities promoted
- 17. Potential for voluntary return realized
- 18. Potential for integration realized
- 19. Potential for resettlement realized







KEY INDICATORS JECTIVES

- 107,229 of primary school-aged children enrolled in primary education
- 13,871 of persons of concern enrolled in lower or upper secondary education

UNHCR and its education partners are closely working with the relevant Government departments, including the Regional and Woreda level Education Bureaus to advocate for the inclusion of refugees in the national education system. To increase the enrolment and retention rates at all education levels, UNHCR and its partners carried out awareness raising meetings with beneficiaries, monitoring activities at household level with Parents-Teachers Association (PTA) members, delivery of school feeding programs and provided incentives to female students for their retention in school.

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The Gross Enrolment Rate (GER) stands at 52%, 74% and 19% for pre-primary, primary and secondary education respectively for South Sudanese refugees. Tertiary education recorded a GER of 2.2%. In Melkadida, an overall 8% increase in enrolment was observed, corresponding to 43,978 students, of which 42% were female. Secondary school enrolment increased by 53%. In Jijiga, the digital school enrolment exercises were completed. The secondary enrolment rate increased from 36% to 39% in the all three camps. In Benishangul-Gumuz Region, new schools are being constructed in Tsore and Bambasi to support both the refugees and students from the host community, and classrooms are being expanded in Sherkole and Tongo secondary schools.

The suspension of schools in mid-March 2020 due to COVID-19 pandemic has further limited access to education for refugee students. In response to this, Regional Education Bureaus introduced distance learning programmes; lessons were developed with the support of UNICEF, and broadcasted via available FM radio stations. In addition, home study learning packages were prepared and distributed to upper secondary students to help them prepare for upcoming national examinations. In Gambella, 5,000 solar-powered radio sets were procured by partners for distribution as pilot radio-based learning, targeting refugee students enrolled in primary and accelerated learning programs in Nguenyyiel camp. Lessons were adapted to suit home-based environment, self-learning materials provided through interactive exercises and quizzes, and subjects adjusted to the new process for Grades 1-7, with the intention to continue the preparation of lessons for Grade 8. In Melkadida, 810 parents were trained and supported by Save the Children International (SCI) on Education Learning Materials (ELM) to assist them with engaging children at home.

Despite efforts to introduce measures to ensure learning continuity during the COVID-19 pandemic, only 12,504 refugee students with access to radio sets in the camps were reported to have benefited from the same by mid year.

Challenges and Remaining Gaps

Key constraints within the education programme include low enrolment and high dropout rates as most of the youth in camps usually opt for secondary movement to urban areas of Ethiopia or onward to Europe. There is a shortage of distance learning supportive devices. In addition, there are limited pedagogical centres, lack of sports and recreational facilities, limited school supplies and textbooks, overcrowded classrooms, unqualified teachers, and inadequate facilities for children with disabilities. In Melkadida, the Gender Parity Index (GPI) in secondary schools remained very low (0.26), attributed to early marriage and harmful traditional practices amongst the Somali population.



Enery & Environment

KEY INDICATORS

• 13,122 households (representing 9% of total registered households) using alternative and/or renewable energy

Approximately 34% of South Sudanese households have access to electricity and lighting. In Assosa, mixed approach initiatives have been implemented including distribution of charcoal briquettes, the communal kitchen at Tsore and Sherkole camps, and provision of firewood to Gure-Shombola camp.

Interventions were prioritized to ensure sufficient energy provision for the Eritrean refugee population and surrounding host community. This was done by connecting communities to the national grid and enhancing the use of communal kitchens in the camps. Management of five-nursery sites, soil and water conservation activities was carried out. Significant resources were channelled to environmental protection especially given the serious environmental deterioration experienced in Afar and Tigray. In line with the national green legacy initiative, UNHCR in coordination

with ARRA, local government authorities and other partners in the Afar Region participated in tree planting exercises during which over 150 tree seedlings were planted along a 500 meters road stretch, and fenced off.

In Assosa, 270,000 tree seedlings are being raised which will be transplanted to mitigate the impact of deforestation. 1,450 hectares of land became open, out of which 207 hectares of land require attention. Due to COVID-19, mass plantation was not possible, slowing down the progress of project implementation. 78,284 tree seedlings have been planted in the Somali region. In Melkadida, the vegetation cover improved by 5% enhancing land productivity. Challenges and Remaining Gaps

Cooking energy remains a critical gap in the operation with only 9% of refugee households using alternative and/or renewable energy. Refugees continue to access firewood as the primary source of energy causing deforestation in the surrounding areas of the host community.

OBJECTIVES

- 1. Population has sufficient access to energy
- 2. Natural resources and shared environment better protected

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Nutrition and Food Security

KEY INDICATORS

- 97.51% of refugees benefiting from 75% or more ration assistance (in kind/CBI at recommended 2,100 kcal/person/day)
- Only 86% (1,806 kcal/person/day) of the food requirements were met against the recommended dietary allowances of 2,100 kcal/person/day.

As part of COVID-19 prevention measures, hand washing, wearing of masks, physical distancing and temperature screening were put in place at food distribution centres in the camps, while proxy distribution was introduced for highly vulnerable households. Measures imposed to reduce risk of spread of COVID-19 have resulted in a reprograming of the nutrition and food security services to reduce frequency of exposure of beneficiaries to the service providers. Bimonthly food distributions have been established while the frequency for visiting the nutrition centers has been reduced.

In Afar camps, the nutrition situation is still critical with prevalence of global acute malnutrition above the emergency threshold (15%). The gap in the food basket contributed to an alarming level of malnutrition (GAM 16.6%) amongst the Somali population. Nutrition programs are being enhanced to address the acute malnutrition situation. To bridge this gap, health partners are routinely carrying out weight for height, Mid-Upper Arm Circumference (MUAC) screenings, as well as providing Infant and Young Child Feeding (IYCF), continuous Blanket Supplementary Feeding Programmes (BSFP) and conducting hygiene promotion and awareness campaigns to prevent the prevalence of diarrheal diseases.

In Assosa camps, 112 children with severe acute malnutrition were treated with recovery rate of 89%, and 168 new admissions of children identified and diagnosed as having Moderate Acute Malnutrition (MAM) were enrolled for treatment. 4,715 beneficiaries were admitted in the BSFP. BSFS also reached 47,464 (84%) South Sudanese children aged 6-59 months and 9,295 (74%) pregnant and lactating women. 10,202 other cases in Gambella were served to prevent acute malnutrition through continuous community and facility level nutritional screening for early detection and referral to programs. Emergency nutrition response services including regular screenings for SAM were provided at Pagak Reception Centre to an average of 3,800 individuals per day.

Cash based interventions (CBI) delivered through electronic fresh food voucher (e-FFV) targeting households with under two-year children, and small-scale nutrition sensitive backyard gardening was promoted to improve household food security and dietary diversity to reduce anaemia.

Challenges and Remaining Gaps

Across the camps, the monthly food basket comprised an average of 86% of the nutrient requirements. Further, the decline of food supplies per household in the first half of 2020 was exacerbated by lack of support for milling and cooking, limited livelihood opportunities, an increase of the cost for food due to the COVID-19 pandemic, floods and the desert locust invasion.

- 1. Nutritional well-being improved
- 2. Food security improved





KEY INDICATORS

- 97.43% of livebirths attended by skilled personnel
- 30 health centres established/supported for COVID-19 response

UNHCR in collaboration with partners amplified measures to curtail the impact of the COVID-19 pandemic on persons of concern. The joint ARRA-UNHCR-WFP COVID-19 Emergency Preparedness and Response Plan and mapping of camp-specific preparedness activities for worst-case scenario were finalized. Awareness raising campaigns have been conducted in all camps through home-to-home visits, use of mini-media and Information, Education and Communication (IEC) materials. In Tigray, a total of 6,160 IEC materials translated into local languages were dispatched to field. UNHCR in collaboration with ARRA, Regional Health Bureaus and partners conducted COVID-19 related trainings for 1,318 camp-based health staff, refugee community workers and health promoters who have supported the dissemination of WHO recommended messages on COVID-19 prevention across camp locations. In the Somali region, more than 95% of the refugee children aged under one year were fully immunized. 98% of births (n= 3,451) in Jijiga camps were attended by a health professional. Eight (8) health facilities translating to one per camp, have been equipped, constructed or rehabilitated across the refugee camps in the Somali region to respond to the COVID-19 emergency.

As a result of awareness campaigns, a significant improvement was observed for the number of livebirths attended by a skilled professional in the Assosa camps. More than 100% of the births were attended by skilled personnel in the camps. Routine immunization coverage for measles was reported at 100%, attributed to linkages between nutrition center, and improved Expanded Programme on Immunization (EPI) defaulter tracing.

1,794 urban refugees benefitted from primary healthcare, while 691 refugees received referral services at secondary and tertiary levels.

Challenges and Remaining Gaps

In the Somali region, over 16% of children and 28% newly arriving children are acutely malnourished, and 38% of children and 29% of women of reproductive age have anaemia. In addition, one-in-three children under five years of age has stunted growth. In Gambella, the health facility patient ratio in primary health care is 1:27,000 against the UNHCR standard of 1:10,000.

The pandemic has put a strain on the delivery of health services, notably on the treatment of chronic illnesses. Owing to resource constraints, the provision of medical services is characterized by insufficient and sub-standard drug storage facilities, lack of an intra-camp ambulances for referral between the community and camp facilities, especially for obstetric cases. Personal Protective Equipment (PPEs) including full aprons, face shields and N-95 face masks, and oxygen concentrators are in minimal supply.

The high staff turnover and delayed recruitment processes impacted the availability of healthcare services. The absence of medical doctors in Awbare and Sheder Camps affected the provision of healthcare, evidenced by the increase of mortality from 0 to 8 in the first six months of 2020. A major gap pertaining to the provision of timely medical interventions for the Kenya Borena refugees remains the lack of available medical data and monitoring tools.

- 1. Health status of the population improved
- 2. Population has optimal access to reproductive health and HIV services







KEY INDICATORS

- 43,738 refugee households (representing 30.11% of registered households) have a latrine or toilet
- 17,254 additional handwashing facilities established (COVID-19)

As the COVID-19 pandemic was declared, two of the camps (Nguenyyiel and Tierkidi) located in Itang axis and hosting 47% of the South Sudanese refugee population, received less than 15 l/p/d (average 10 l/p/d) against the standard of 20 l/p/d. Emergency water trucking was supported to enhance water provision to at least 15 l/p/d. The overall household latrines coverage in the camps hosting South Sudanese stands at 27%. There is a need for additional latrines due to the slight increase in population and the high filling rate of simple pit latrines rendering them into a state of disuse. UNHCR continues to advocate for Urine Diversion Dry Toilets (UDDT) given their recyclability nature.

For Sudanese refugees, household latrine coverage in the camps was at 67%, equivalent to the use of one drop hole latrine by seven (7) refugees. On solid waste management, the number of refugees per waste pit was 3,639 refugees. More than 5,000 Kenya Borena refugees and the surrounding host community benefited with water trucking interventions. By the end of June 2020, a total of 30,660,000 liters of potable water had been provided for two refugee settlements. Regular checks on water point hygiene was conducted, and water tankers cleaned every two months. Challenges and Remaining Gaps.

The high-water demand in the Jijiga camps resulted in an increase of pumping hours from 8 to 10 hours a day, and with frequent national grid interruptions, subsequently resulted higher fuel consumption. Poor road infrastructure hampering access to Gambella camps (and worsened during the rainy season) and insecurity in the region negatively affected timely delivery of CRIs to refugees. Latrine coverage remains a significant gap within the Somali Region, with only 24% of households being equipped with a drop-hole latrine or drop-hole toilet.

OBJECTIVES

- 1. Supply of potable water increased or maintained
- 2. Population lives in satisfactory conditions and hygiene

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KEY INDICATORS

10,070 persons of concern who received productive assets, training and/or business support in cash or kind.

In order to prepare and respond to the desert locust infestation which threatened crop cultivation since early 2020, UNHCR and its partners continued advocacy for the inclusion of refugee and host community projects in the national/ regional response plans. During the COVID-19 pandemic, livelihoods projects generally remained active without much disruption (agriculture, livestock, microfinance), however trainings, capacity building and events requiring large gatherings were suspended. Border closures impacted the supply and price of agricultural products, as well as their transportation cost to other markets.

318 hectares of land was cultivated with crops by refugee and host community farming cooperatives across nine (9) irrigation schemes in the Melkadida camps, however the operation's efforts to directly support farmers with pesticides were hampered by limited resources. A 'COVID-19 economic stimulus' package is being developed to support the farmers, livestock owners, and microfinance loan clients in Melkadida with cash grants and agriculture inputs using a CBI disbursement modality. Five microfinance service centers in the camps in the Somali Region provided access to saving and loan services to over 3,500 refugee and host community clients.

6,483 South Sudanese refugees received cash grants and business development services for their microbusinesses to sustain trading and livelihood opportunities. In Assosa, an economic inclusion pilot project was initiated through an agricultural assistance program in two camps which supported 2,663 refugee and 875 households from the host community.

UNHCR and partners supported 2,508 refugee and host community households in Sherkole, Bambasi and Tongo camps, providing agricultural resources and inputs such as seeds and agricultural tools. A total of 147 hectares of land is covered with different seeds across the camps. A variety of 24,314 fruit and tree seedlings at Sherkole refugee camp were availed for planting on the intended 10 hectares of land in Sherkole and Tsore camps including mango, subania, moringa, grevilia, bamboo and acacia. Around 210 host community farmers have also been supported in six (6) kebeles of Tsore and Sherkole refugee camps.

A livelihood project on face mask production was designed and implemented on a pilot basis in Tsore and Gure-Shombola refugee camps with possibility of replicating and upscaling the best practice in other camps as part of the COVID-19 response. The project supported established Income Generating Activity (IGA) groups comprising 20



refugees (2F/18M) with on-the-job training, start-up kits and seed money to maintain future productions. It aims at improving an inclusive health, wellbeing and improved livelihood opportunities for the community through empowering production and preventing the spread of COVID-19.

Challenges and Remaining Gaps

There remains few income generating opportunities for refugees, limited access to market, business training skills, start-up capital, and challenges around uninterrupted power supply for running businesses efficiently.

OBJECTIVES

1. Self-reliance and livelihoods improved



Shelter & Non-Food Items

KEY INDICATORS

- Average of 45.4% of refugee households living in adequate shelters
- 103,663 households receiving additional CRIs as a result of COVID-19

Adequate shelter coverage of shelters remains a challenge particularly in camps in the Afar Region where only 17% of the refugees are living in transitional shelters, with the rest accommodated in emergency shelters. In Melkadida camps, only 39.05% of the total number of households are currently living in adequate shelters. Most refugees still live in transitional bamboo shelters and emergency tents, and families share shelters or reside in inadequate shelters. With the continued registration of new arrivals from South Sudan, shelter coverage remains a challenge with 42.5% of South Sudanese households in need of adequate shelter. 485 transitional shelters have been provided to the South Sudanese, and 6.5% of households in need of shelter upgrades or repairs were assisted.

In Jijiga, 17% of the total population lives in improved transitional shelters. Preparations have been finalized to launch a pilot mobile cash program aimed at constructing 100 shelters in Awbarre and Sheder camps in the second half of 2020. Despite the resource limitations, the operation is focusing on increasing improved shelter coverage that will enable refugees to access electric power from the national grid network development.

Refugees were provided with 250 grams of soap during the monthly general food distribution, which was increased to 500 grams following the onset of the COVID-19 pandemic as a measure to enhance handwashing practices across

the camps. Across the camps, a total of 213,619 women and girls of reproductive age received dignity kits including underwear, sanitary napkins and soap. 630 households that were relocated from Pamdong Transit Centre to Nguenyyiel camp were issued with CRI kits comprising sleeping mats, blankets, jerry cans, soap, kitchen sets, mosquito nets and solar lanterns.

As part of the assistance programme and in response to the outbreak of COVID-19, urban refugees received an additional 300 Ethiopian Birr (USD 8 equivalent) to purchase soap and other sanitary materials. As a COVID-19 prevention measure, cash payments were provided on a two-month basis in efforts to reduce contact and movement of refugees when withdrawing money.

Challenges and Remaining Gaps

While there was a general distribution of some Core Relief Items (CRIs) to all refugees in camps in Afar, there is still a need to conduct a blanket distribution to the entire camp population especially in Tigray as the last distribution was conducted in 2015. The overall adequate shelter gap remains high across the operation.

- 1. Shelter and infrastructure established, improved and maintained
- 2. Population has sufficient basic and domestic items



Innovative Aproaches

The COVID-19 pandemic has compelled ARRA, UNHCR and partners to identify alternative modalities to deliver appropriate and timely humanitarian assistance to refugees. In efforts to strengthen SGBV case management amidst the COVID-19 pandemic, a remote case management mechanism has been established and SGBV survivors can seek help and assistance through the telephone helpline. On the education front, initatives are underway to support students through specially developed radio-based distance learning programs pending school reopening. In the context of livelihoods, refugees have been engaged in producing face masks in Assosa in response to the COVID-19 pandemic.

The energy cooperatives managing the solar power-grids played a key role in COVID-19 preparedness actions in the Melkadida refugee camps, providing energy to the new isolation center under construction. Following the assessments concluded by UNHCR and its partners, the cooperatives are currently installing solar streetlights in identified isolation sites and connecting the facilities to the mini grids. Young members of the refugee and host communities in Helaweyn who graduated from the Youth Education Pack (YEP) program put their skills together to design and produce an innovative handwashing pedal-operated facility. As part of support to refugee and host community self-reliance, UNHCR and partners in Melkadida installed 88 of these units at the health centers and entry checkpoints at the camps and other locations.

UNHCR and partners in Jijiga also facilitated UN-HABITAT to profile Kebribeyah using a tool that provides a useful input for integrated physical and socio-economic planning of the refugee hosting city.

