COVID-19 AND OPERATIONAL UPDATE

Ethiopia

24 February 2021

801,790
Refugees and asylum seekers as of 31 January 2021

37,361
Handwashing facilities in camps

2,509
Health and community workers trained

COVID-19 Operational Context

As of 23 February 2021, the Ethiopian Ministry of Health (MoH) reported 154,257 coronavirus (COVID-19) cases and 2,305 deaths in the country. Ethiopia is currently registering one of the highest numbers of COVID-19 cases in Africa, and there is a recent rise in the number of cases as well as deaths.

COVID-19 Prevention and Response

The Government’s Agency for Refugee and Returnee Affairs (ARRA) and UNHCR, together with the Regional Health Bureaus and other health partners, continue to reinforce their response to the coronavirus in both refugee camps and other locations sheltering refugees and asylum seekers throughout the country. Organizations have enhanced communication on hygiene and are continuously working to reduce overcrowding, to curb the spread of the virus. Supplies of water and soap continue to be provided, together with the installation of handwashing stations, as well as strengthening of health services and the provision of personal protective equipment for health care workers, first responders and others, depending on availability. With Ethiopia expecting to receive COVID-19 vaccines in March 2021, health workers have started taking the WHO online vaccination training.

However, the delivery of services including for the prevention of COVID-19 and the response in the four refugee camps in the Tigray Region have been greatly affected due to the ongoing insecurity. For almost four months now, UNHCR has no access to Hitsats and Shimelba camps for which no update has been included.

- There have been 37,361 handwashing stations installed in communal centres and households in 22 of the 26 refugee camps to promote regular handwashing with soap. We are unable to update the data for two of the four camps in the north east. There were 36,298 handwashing stations installed in refugee households while 1,036 were set up in communal facilities to provide services to refugees and asylum seekers. More capacity is needed, however, to ensure that every refugee household is equipped with a handwashing facility.
Over 2,500 trained **health and community outreach workers** are actively engaged in awareness raising, case investigations and management, as well as mitigation, prevention and control of the virus. They include 446 healthcare workers, 22 laboratory technicians and 1,719 community outreach workers who are serving both the refugees and the communities hosting them. In addition, refugee representatives, Refugee Outreach Volunteers (ROVs), women, youth and child committees and other community representatives were trained and are actively engaged to ensure that basic preventive measures are observed in the communities.

The daily average per capita **water distribution** in the refugee camps stands at **18.6 litres**. While some of the camps have access to 20 liters per person, per day, per the UNHCR standards, others are receiving less than the emergency threshold of 15 liters per person per day. UNHCR, ARRA and partners are working to ensure that all refugees have access to adequate potable water, in keeping with the minimum international standards. The current emergency in the Tigray Region had disrupted the provision of water in Mai Aini and Adi Harush camps where UNHCR currently has access to and is working with partners to normalize the provision of services.

Isolation facilities, known as Temporary Assessment Units, have been set up in all refugee camps to temporarily quarantine possible suspected COVID-19 cases, pending their transfer to Government isolation and treatment facilities, as needed. UNHCR has provided hospital beds, mattresses, coverall gowns and other supplies to equip the facilities and the health staff and extended support to the Government-run treatment centers, which are also accessible to refugees. The construction of five additional isolation facilities in the five Melkadida camps has been completed. Recently, UNHCR donated medical equipment, including five ICU beds, 50 oxygen cylinders and PPEs, to the Gambella Regional Health Bureau to help it better respond to the COVID-19 pandemic.

In the capital, Addis Ababa, where over 35,000 urban refugees reside, UNHCR is **communicating with refugees via telephone helplines, WhatsApp and Telegram groups**. Refugee Outreach Volunteers (ROVs) and refugee leaders are also helping raise awareness. In addition, telephone helplines and a **Digital Request and Complaints System** (DRCS) are fully functional. Concerned UNHCR staff are processing and responding to requests that are received on daily basis.

In order to meet additional expenses for soap and other sanitary materials, UNHCR provides an allowance of 300 Ethiopian Birr ($7.55) per person per month, to urban-based refugees entitled to monthly living allowances. The intervention is monitored through post-distribution phone interviews by Protection staff.

The Registration services resumed (they were temporarily interrupted due to the pandemic) at the UNHCR’s office in Addis Ababa, to issue refugees with registration documents and update their data. Limited numbers are received per day due to the health measures in place, to ensure the safety of refugees.

UNHCR continues to **support the inter-agency COVID-19 response to the IDP situation** in the country, distributing non-food items, equipping isolation and quarantine centers and providing community communications on health messaging.

**COVID Impact and Challenges**

**Health Impact:** Pivoting of much of UNHCR’s limited health budget to the COVID-19 prevention and response efforts is resulting in a strain on the provision of regular essential health services in the refugee camps. This, in turn, will pose challenges in continuity of maternal and child health services, disease control programmes such as for HIV, TB and Malaria, among others. The reallocation of funds to combat COVID-
19 may negatively impact the efforts already made towards the control of non-communicable diseases including diabetes, hypertension and mental health.

**Economic impact:** Despite the prevailing COVID-19 pandemic, there have been positive advancements with respect to the planned roll out of projects designed by development partners in 2020. The £24m SHARPE Project funded by FCDO will start market systems development activities in February 2021, targeting 200,000 beneficiaries in the Gambella and Somali regions over a period of three years. Similarly, the UN Capital Development Fund (UNCDF) will kick off the Inclusive Digital Economies Action in Ethiopia: (IDEA). The project will ensure financial inclusion to 18,000 beneficiaries in 500 groups in the Somali region. The Poverty Alleviation Coalition consortium, led by World Vision in Ethiopia will be fundraising to design and implement Graduation Programs in all refugee hosting regions, expected to reach 14,000 households over a period of five years. UNHCR is working closely with these partners to ensure that refugee inclusion and protection is realized and that these projects support the COVID-19 economic recovery efforts in refugee hosting areas.

**Operational Response Updates**

**Tigray Emergency:** Thousands of Eritrean refugees, who were stranded in the town of Shire and surrounding areas [after fleeing Hitsats and Shimelba camps] continue to be relocated to Mai Aini and Adi-Harush camps. To date, 5,474 refugees have been relocated to the two camps, but lack of adequate shelter and communal facilities remains a major concern. Additional shelters are being constructed, however, what can be realistically constructed in the coming weeks can only accommodate less than 45% the anticipated 15,000 refugees that would be relocated to the two camps. The assessment of the shelter technical staff is that an additional 67.5 hectares of suitable land is required to put up shelters and communal facilities for a population of 15,000 individuals.

ARRA announced that it is going ahead with plans to close Hitsats and Shimelba camps that were reportedly heavily damaged in the conflict, leaving 15,000 to 20,000 refugees that were sheltered there dispersed in nearby towns and other areas. The Government justified the decision to close the camps by saying Shimelba is too close to the Eritrean border while Hitsats is in an inhabitable location.

The Ethiopian Human Rights Commission (EHRC), following a two-week monitoring and investigation mission in Tigray Region in January, stated that the slow progress of efforts to restore infrastructure and to fully resume social and administrative services was exposing residents and internally displaced persons to further human rights violations. The report said in the past two months alone, 108 cases of rape were reported in Mekelle, Ayder, Adigrat and Wukro hospitals. "While there are many indications and reports of the scale of human rights violations occurring in Tigray Region, the comprehensive overview of the full extent of its impact on civilians is still hindered by the security situation. The Commission will continue its monitoring work and carry out investigations,” Dr. Daniel Bekele, EHRC Commissioner, said. https://www.facebook.com/Ethiopian-Human-Rights-Commission-202584253551816/

Regular Ethiopia country and regional UNHCR updates on the crisis can be found at: https://data2.unhcr.org/en/situations/rbehagl

**Protection**

**Protection monitoring of IDP returnees:** Findings of a recent UNHCR protection monitoring visit to Belo and Lelisa Bereda Kebeles in Sasiga woreda of East Wollega zone show 1,247 IDP returnee families made up of 5,800 individuals were living in dire conditions, without access to their land, livelihoods and key services. Those with access to land do not have farming tools and were forced to depend on humanitarian aid for sustenance. In addition, children below the age of 15 were not attending classes mainly because the school is located very far from where they live and getting to school involves the crossing of a river.
UNHCR will work with the concerned government agency as well as with partners working on child protection and gender-based violence to try to address some of the gaps.

**New arrivals at Dollo Ado Reception Centre:** As of 15 February, 866 new arrivals from Somalia were accommodated at the Reception Centre in Dollo Ado, overwhelming the capacity of the centre to provide services. With screening and registration still suspended, UNHCR is unable to decongest the centre by relocating refugees to the camps. UNHCR is in discussions with ARRA to seek approval to resume screening, registration and relocation. The new arrivals said they were forced to flee Somalia due to insecurity (particularly in Jubaland), food shortages and political uncertainties and heightened tension following the suspension of the 2021 presidential and parliamentary elections.

**Re-congestion of Pagak Reception Centre:** An estimated 16,000 individuals are currently sheltered at the Pagak Reception Centre in Gambella and UNHCR and ARRA have agreed to screen the occupants to better understand their profiles and register genuine refugees. This followed the emptying of the Reception Centre after the successful relocation of the over 8,000 refugees to Nguenyyiel camp. The priority now is to strengthen water and sanitation facilities and decongest the reception centre. In the meantime, ACF continued providing emergency nutrition services, screening 200 children under five years of age for malnutrition. 22 acutely malnourished and 13 severely acutely malnourished children are being treated. Overall, 79 refugees have been enrolled in outpatient therapeutic feeding programmes.

**Peace Conference:** The second peace conference which was conducted in Pugnido culminated in the establishment of a Peace Committee with members from both refugees and host communities. The Peace Committee is tasked with ensuring that peace between the two communities is maintained and nurtured.

**Education**

**Over 500 refugee teachers graduated:** A total of 550 refugee teachers graduated with diplomas and certificates from the Gambella Health and Teachers College after successfully completing in-service training programmes. The programme trained the candidates, 24 of them females, in teaching mathematics, basic science, English, and Nuer languages.

**Digital Education Platform:** A growing number of schools in the refugee camps are enrolling students in the Digital Education Platform (DEP), an ICT-based system enabling to collect accurate data on school enrolment. This will ensure education data quality and facilitate the integration of services that are used by refugees and the communities hosting them. Already, 1,228 students have been enrolled in two primary schools in Okugo, 2,147 in Tsore, 2,268 in Sherkole and 1,534 in Gure-Shombola refugee camps.

Meanwhile, school feeding services have resumed in four of the five refugee camps in the Benishangul-Gumuz Region. ARRA, Plan International, WFP and UNHCR are looking into expanding the service to the remaining Gure Shombola camp, although funding is a key challenge.

UNHCR donated 700 washable face masks to the host community secondary school Womba Kebele, near Bambasi camp in the Benishangul-Gumuz Region. The masks are meant for distribution to the most vulnerable students to help them prevent themselves from coronavirus.
Distribution of Core Relief Items (CRIs): UNHCR in collaboration with the Disaster Risk Management Office (DRMO) distributed 771 soaps, 257 blankets, 257 sleeping mats, 106 kitchen sets, 106 plastic sheets, 123 bucket, 106 jerry cans and 106 solar lamps to 1,233 IDPs in West Wollega zone, Guliso Woreda, Dila Gogola kebele. In collaboration with West the Wollega branch of DRMO, UNHCR transported essential aid items to Kiltu Kara woreda of West Wollega zone for subsequent distribution to vulnerable IDP returnees. The items included 1005 bars of soap, 99 solar lamps, 511 blankets, 511 sleeping mats, 148 kitchen sets, 99 jerry cans, 99 buckets, and 99 plastic sheets.

Similarly, UNHCR in coordination with the Bureau of Labour and Social Affairs (BOISA) conducted a five-day joint-field mission to Dollo Zone of Somali Region where 1,483 individuals that were formerly IDPs in Qoloji had returned to. The team also made a distribution of aid items including plastic sheeting, kitchen sets, sleeping mats, jerry cans, buckets and solar lanterns. Similar assistance was delivered to a total of 98 IDPs from Lehel-Yucub affected by the ongoing drought.

Community-based approach for health service delivery: In the Melkadida camps, UNHCR is scaling up a pilot project on a community-based approach for neonatal care. This will allow trained nutrition officers and assistants to visit the beneficiaries weekly and provide counselling, assist in feeding, track the growth of the neonate, screen them and, if needed, provide breastfeeding substitutes. During the pilot phase in Bokolmanyo camp, 34 infants – mother pairs, were supported in six months. Over 70% of them were found in good condition after two months of follow up, with only a few requiring hospitalisations. The project is meant to overcome the challenges presented by the lack of well-equipped neonatal care units in the camps or referral facilities close by.

New restaurant in Melkadida camp: The biogas cooperative has launched its restaurant and started selling different food types, such as sunbusa and bonbolino, in the common kitchen of the Melkadida refugee camp. The cooperative uses biogas from the biogas plant as a source of energy.