NUTRITION

Without an additional funding of $13 million for nutrition, over 200,000 refugee children and 40,000 mothers will be at risk of diseases and morbidity.

With only 31 % of our funding requirement of $19 million received, we can only cover products and medicines for the treatment of severe and moderate acute malnutrition.

This leaves out 3 essential interventions:

Treatment of malnourished refugee children

Prevention of undernutrition to children and pregnant and breastfeeding mothers

Nutrition services for refugees and local community

What does this mean for refugees?

Refugee women and children will be the first ones affected by shortage of essential sevices.

When we stop providing food:

87.4% (207,852) households are using one or more negative coping strategies

86.7% (200,985) of households eat non-nutritious foods (less expensive) and resort to sugar as a filler

let men eat first and women and children last

75.8% (175,7171) of households are borrowing food to meet unmet needs

83,7% (194,030) of households are reducing the number of meals per day

refugees start to take irregular and risky actions, including:

- steal property
- offer their child to marriage for money
- send their children to work in dangerous conditions including mining
- sell sex to meet basic needs.

Halting our nutrition programs will cause illness, deaths and tensions with the local community.

- **Over 86,000 malnourished refugee children under five will get sick more often in their first two years, fall behind in their mental and physical growth and potentially die before living – because our malnutrition treatment programs would cease.**
- **Over 200,000 children and 40,000 mothers who are pregnant and breastfeeding will be undernourished because our prevention programs will be halted. This means they will loose weight, get inhibited in their mental development, fall ill easily and potentially die.**
- **Thousands of members of host communities across 23 settlements will no longer access nutrition services making them feel like refugees are infringing on their scarce resources: food from farms, firewood, water.**

MISSING
$13
MILLION

We need $19 million to prevent and cure malnutrition for refugees living in Ethiopia

So far, only 31% ($6 million) has been received.

$3.1 ***million***

for the complementary feeding of infants from 6 months to 1 year old as their needs for energy and nutrients exceed what is provided by breast milk.

$1.7 ***million***

to prevent iron deficiency anemia in infants and young children through Multiple Micronutrient Powders (MNPs).

$2.3 ***million***

to prevent the worsening of nutritional status of children from 6 months to 5 years through our Blanket supplementary feeding Programs (BSFP).

$462,288

to feed pregnant and breastfeeding mothers through Products for Blanket supplementary feeding Programs (BSFP).

$2 ***million***

to feed infants and young children in the community facilities.

$3.8 ***million***

to support UNHCR's running costs for partners in nutrition program.

WHAT WE DID IN 2023

- Over **56,000** refugee children **6-59 months** were admitted and treated for acute malnutrition with over 40,473 cured (cure rates above 90.0%).
- WFP provided every two weeks over **31,164** children 6-23 months and **27,389** pregnant and lactating women with micronutrient dense nutritious porridge (CSB Super cereal)
- UNHCR and partners responded to nutrition needs of newly arriving refugees treating over 14,00 Somali and 1,200 Sudanese children with acute malnutrition.
- Sadly, due to many shocks many children are undernourished in refugee setting and still need our nutrition support in 2024 and are at the verge of death if not supported.

Half of refugee children under five are starving.

According to our 2023 nutrition survey conducted across 21 sites in the country:
50% of refugee children under five are starving (undernourished).
14% of refugee children are malnourished – above UNHCR standard of 10%.
Children arriving from Sudan in Assosa (23%) as well as those in Afar (25%), and Somali region (Bokh 24%; Melkadida 17%).

Refugees need support for food and nutrition because they live in difficult environments with:

- high inflation
- low access to food markets
- more diseases (cholera, measles)
- no food security and livelihoods initiatives
- more conflict and insecurity.

WHO IS IN THIS WITH US:

UNHCR The UN Refugee Agency · የስደተኞችና ተመላሾች አገልግሎት Refugees and Returnees Service · WFP World Food Programme · unicef · International Medical Corps · Medical Teams International · Action Against Hunger · GOAL · DCA actalliance · Plan International · ASDEPO · OWDA Organization for Welfare & Development in Action

UNHCR / Photo by Lucrezia Vittori