

Ethiopia

March 2018

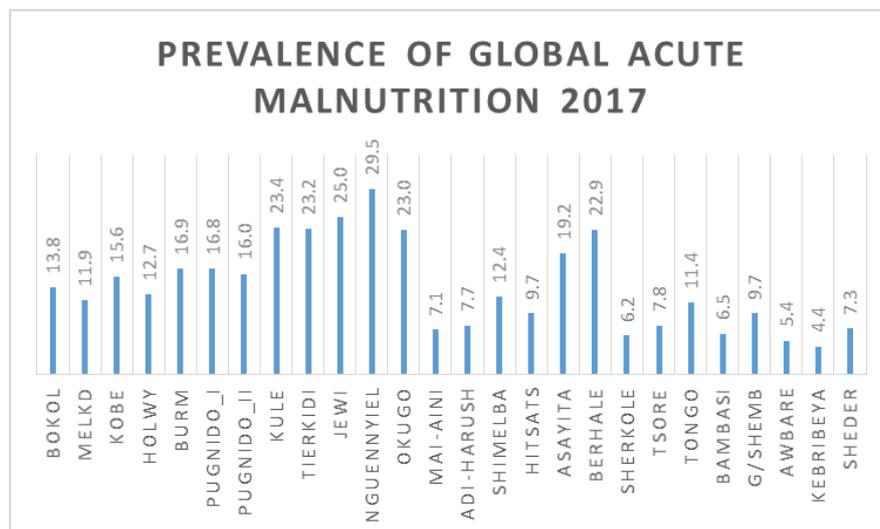
A total of **16,376** children under five years of age were newly admitted and treated for acute malnutrition with a recovery rate of **88.1%** and **93.0%** for severe and moderate cases respectively

The average weight gain for severely malnourished children is **6.1 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 successfully completed all the 26 refugee camps.



- The prevalence of global acute malnutrition (GAM) is below the WHO emergency threshold of 15% in 57.7% (15/26) of the camps. Prevalence of stunting is within the acceptable WHO standards (<20%) in 38.5% (10/26) of the camps. Challenges in addressing malnutrition remain with a need to strengthen the preventive programme through a multi sectoral approach to support childcare. UNHCR started to roll out the UNHCR

infant and young child feeding framework to enhance engagement of other sectors.

- A recovery rate of 93.0% and 88.1% 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 above the emergency threshold of 15%, this programme is extended to children up to 59 months old.
- 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, 172 newly arrived under 5 children were screened on arrival in Dollo Ado. The prevalence of GAM has since increased from 8% in January to 38% in April 2018 while acute malnutrition among Pregnant and Lactating Women (PLW) has reduced from 67% in January to 0% in April 2018. Services for immediate treatment of children with acute malnutrition along with prioritized registration and relocation of these families are in place.
- In the first quarter of the year, food ration provision remained stable at 1737 Kcal out of the standard 2100Kcal; 13.5kg of cereals (previous 10kg, standard: 16kg), 0.5kg of CSB (standard: 1.5kg). Oil, pulses and salt are provided at full ration while sugar remains absent. Camps in Jijiga, Afar, Assosa and Shire continue to receive a mix of cereals and cash. Beneficiary sensitization and consultation was completed in the Assosa camps. From May, due to funding constraints, a deeper ration cut providing 1278 Kcal (38.2% less than the standard) will affect all except the Eritrean refugees.

STRATEGIC PRIORITIES

- The Ethiopia Refugee Programme's Public Health Sector Strategic Plan 2014 – 2018, covering health (including HIV & reproductive health), nutrition & 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 combined food assistance while the service is yet to be extended to those in Dollo Ado/Melkadida and Gambella camps.
- A comprehensive Infant and Young Child Feeding (IYCF) strategy which accounts for nutrition sensitive sectors in the Gambella and Dollo Ado/Melkadida operations will be developed and implemented shortly. The strategy is expected to be rolled out in other locations as well in the long term.
- The use of a new technology-the Last Mile Mobile Solution (LMMS) - is to be expanded to enhance efficiency of beneficiary registration and reporting in 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 Jijiga Camps.
- UNHCR and WFP continue their joint advocacy for the reinstatement of full food rations to refugees.

CHALLENGES

CONTINUOUS RATION CUTS



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

FUNDING SHORTFALLS

AFFECTING COMPLEMENTARY FOOD ACTIVITIES & PRACTICES



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