

**COUNTRY OFFICE MONTHLY REPORT  
EMERGENCY AND HUMANITARIAN ACTION (EHA) / ETHIOPIA PROGRAMME**

**Month of September 2009**

**HIGH LIGHTS:**

- According to official reports from the Federal Ministry of Health (FMOH), 4,320 new cases and 16 deaths of AWD (CFR of 0.2%) have been reported from Amhara, Somali, Oromiya, Tigray and SNNP Regions and Addis Ababa city in September 2009.
- The problem of malnutrition is still high in East and West Hararge, and parts of South Wello, Arsi Borena, Bale, west Shoa and Gode zones.
- The food security situation in the country remains poor as a projected figure of 6.2 million beneficiaries would require food assistance from July to December 2009.
- Malnutrition continued to be a serious concern in several woredas of Southern Nations, Nationalities and Peoples Region (SNNPR) in the 3<sup>rd</sup> quarter of the year.
- A mid-*meher* rapid seasonal food security impact assessment for the 2009 *meher* (June to October) in the crop-producing pastoral areas, have been deployed on 28 September 2009 to 17 selected woredas in Afar, Amhara, Benishangul Gumuz, Dire Dawa, Gambella, Harari, Oromiya, SNNP, Somali and Tigray.



**I. GENERAL SITUATION**

**A. Political, social and security**

- The overall security situation in the country remained stable during this month. No major security incidents involving humanitarian staff members have been reported.

**B. Food insecurity and malnutrition Situation and response in Ethiopia.**

- The latest WFP/FEWSNET food security update indicates that the performance of the *kiremt* rains to date remains below normal, including in the some western surplus producing areas where the rains had late onset and erratic performance. The situation could disrupt the food security situation in these areas that managed to sustain normal condition despite the various shocks experienced in the past five years. The late onset of the *kiremt* rains has interrupted timely planting of *meher* crops including wheat, barley, peas, beans and flax. Consequently, the report indicates that most short-maturing *meher* crops are considerably behind their normal phonological stages and are unlikely to reach full maturity unless the rains extend beyond their

normal cessation period in September. The prospect for long cycle maize and sorghum crops, which constitute about 50 percent of the total national cereal production, is also not promising in many areas due to poor 2009 *belg/gu* rains (February to May) and the below normal performance of the current *kiremt* rains. Meanwhile, food insecurity continues to affect vulnerable populations in northeastern highlands of Amhara, Southern Tigray, Afar, eastern parts of Oromiya and most parts in SNNPR. The report recommends for timely preparation of a comprehensive contingency plan document given the poor *meher* production prospects in the coming months.

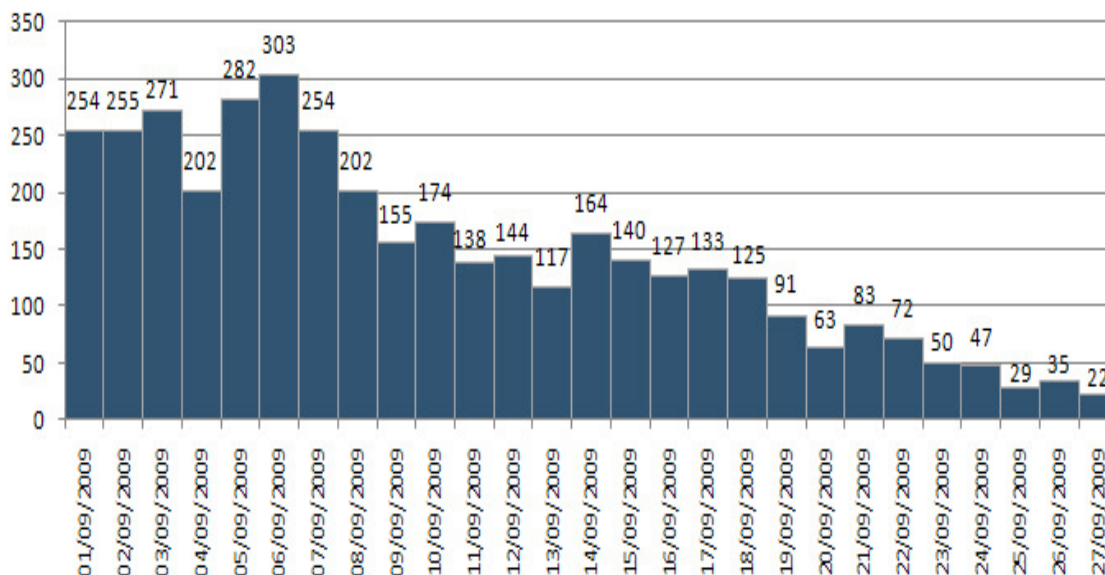
- UNICEF reports that admissions to Therapeutic Feeding Programmes (TFPs) continues to increase partly due to the improved access and service coverage with the implementation of the Out-patient Therapeutic Programmes (OTP) rollout strategy. The admission reporting rate and information on key performance indicators for TFPs, however, remain very poor, indicating the need for a strategy to improve report completion rates nationwide. In Amhara Region, for instance, the report completion rate for the January to June period is as low as 10.9 per cent. Meanwhile, training of health extension workers for the rollout of TFP in Amhara, Oromiya, Tigray and SNNP is ongoing, with more than 80 per cent of the planned activities completed in Amhara, SNNP and Tigray, while it is only 50 per cent accomplished for Oromiya. Monitoring activities of TFP interventions also continue. In SNNPR, the observations made by monitoring teams on supplies, quality of services and modalities of collaboration between AWD response activities and OTP services have been discussed with the Regional Health Bureau.
- WFP reports progress in logistics particularly in trucking capacity with actual allocation of 130 trucks per day to transport food from ports to in-country warehouses. Meanwhile, efforts continue to further improve the situation at the ports to facilitate timely in-country arrival of relief items. Between 12 and 22 August, a joint mission to Sudan led by the State Minister of DRMFSS and the Country Director of WFP assessed the port Sudan-Ethiopia corridor and discussed continued use of Port- Sudan to serve the north western part of the country. In addition, WFP also undertook a recent visit to Djibouti to discuss the possibility of allocating additional berth space, review transport capacity progress and introduce the WFP Djibouti office to officials.
- As most of the meher crops are in their flowering or earlier stages, continued rainfall well into October is critical for the surviving crops to reach maturity. Meanwhile, crops are already performing poorly or even drying up in several areas of eastern and southern Tigray, parts of eastern Amhara, many low lands of eastern Oromiya, the southern low -lying areas of SNNPR, and nearly the whole of Gambella. The prospect of harvest in these areas therefore looks gloomy.
- Given the late start of the meher rains (main rains July -September) and generally below normal rains across most of the country, the Government and the humanitarian partners will conduct a Mid meher assessment starting 28 September 2009. The assessment will primarily focus on understanding the impact of the rains on crop performance and its impact on food security next year, and identify the areas that are critically food insecure. A total of seventeen food security teams will be deployed to different parts of the country beginning 28th September for a period of two weeks. A half-day orientation was provided to participants from Addis Ababa.

The results of the assessments will be used to refine the Contingency Plan for early response to any relief needs in 2010.

- According to FAO, the regional water shortage has forced pastoralists from Ayisha woreda (Shinile zone) and Harshin woreda (Jijiga zone) of Somali Region of Ethiopia to move their stock into Somalia (Somaliland). Internally, the drought has forced thousands of people to move from Fik into Babile town, while pastoralists have taken their livestock into the nearby Erer valley for grazing. Livestock that earlier migrated to Filtu woreda have progressed further north to the Oromiya region, while livestock moving away from drought-affected areas of northern Kenya through Dillo and Moyale (Oromiya) have pushed further north into Dhas, Miyo, Dire, Yabello and Arero and west into Taltele (Oromiya). In Arero, the animals have been able to graze on pastures abandoned by local communities fleeing conflict.

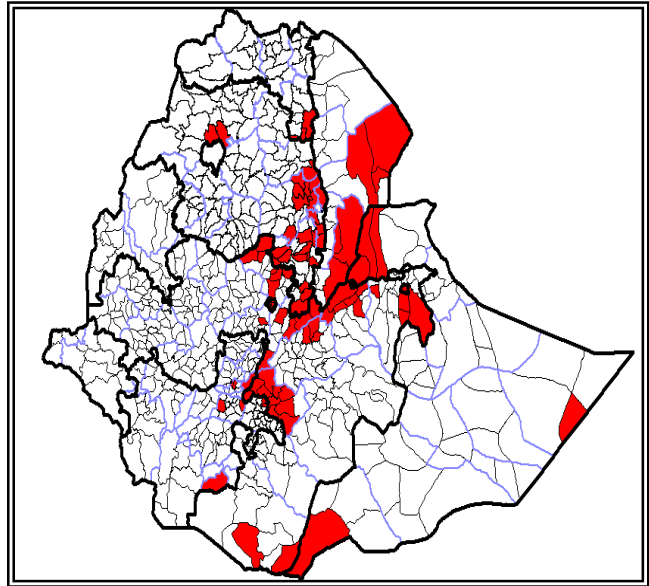
**C. Acute Watery Diarrhea(AWD) Situation and Response**

Addis Ababa Total AWD Cases



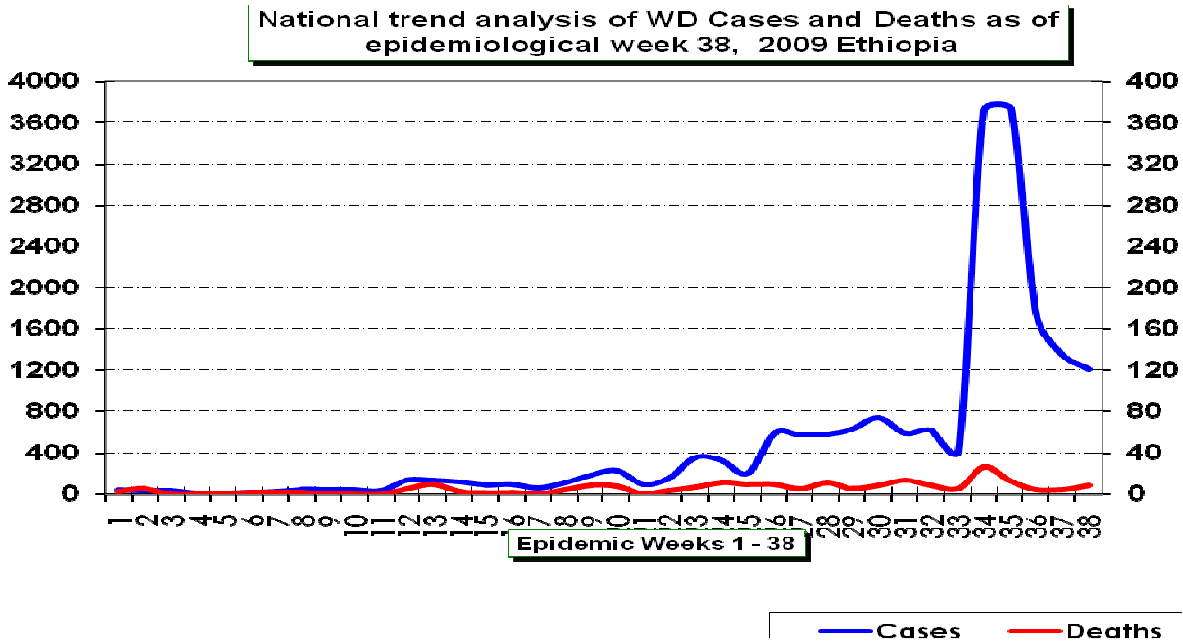
- Acute Watery Diarrhoea (AWD) cases have been reported from all ten sub-cities in Addis Ababa, with the highest case load recorded from *Akaki/Kaliti, Addis Ketema, Arada and Kolfe*, according to official reports from the Federal Ministry of Health (FMoH). The outbreak also continues to spread in other regions of the country and new woredas are reportedly affected in Amhara, Oromiya, Tigray and SNNPR. In September, Federal Ministry of Health (FMOH) reported, **4,320** new cases and 16 deaths with **0.4** per cent case fatality rate have been reported from 36 woredas Amhara, Somali, Oromiya, Tigray, Addis ababa and SNNPR. The ongoing *kiremt* rains, and the continuous movement of pilgrims and migrant labourers to and from holy water sites and private farms are contributing to the spread of the disease. The re-opening of schools in mid-September also requires a special attention.

- Response is ongoing at both federal and regional levels. The central command centre continues to provide guidance, meeting twice a day to plan and coordinate response activities. In response to the US\$ 500,000 financial request to contain the outbreak in Addis Ababa, WHO committed US\$ 30,000 for surveillance, case management and training activities. In addition one diarrhoea disease kit and one inter agency emergency drug kit is provided for Addis Ababa. WHO has assigned 3 consultants providing technical support to the sub-cities in Addis Ababa.



**Map shows:** September 2009, current AWD outbreak in the regions. Emergency drugs donated to Addis Ababa City Administration Health Bureau

- Critical gaps in the response include lack of CTC materials and drugs, lack of funds for operational budgets, inadequate protection of water sources, poor hygiene practices and trained health staff. Case detection and management is still a challenge in CTCs located remote community where health workers have little experience in AWD treatment, preventative measures in communities also needs to be further strengthened.
- The absence of clean safe water supply, proper sanitation facilities, medical care and very poor and overcrowded living conditions in the state farms and holy water sites serves as an appropriate foci of infection for AWD transmission within the regions and other areas of the country. WHO and partners are addressing this issue at federal and regional level through increase supervision and monitoring.



## 2- IMPLEMENTATION OF WORK PLAN:

### A. Key Results achieved (Products, Services, and other)

#### Emergency Health Action – Strategic Objective 5

##### Product:

1. **Epidemic preparedness and response strengthen in disaster prone areas.**  
WHO has continued its technical support by recruiting 6 additional national consultant supporting 7 regions and Addis Ababa in responding to health & nutrition crisis in the country.
2. **Health needs assessment supported.**  
Supported health sector needs assessment in the country to identify priority needs for malaria and AWD intervention.
3. **Coordination of health sector interventions-**  
WHO continues to provide technical and financial support to central level coordination at EHNRI and in the regions. With strong advocacy from WHO SNNPR and Amhara Regions have reactivated the health sector emergency coordination committee chaired by the regional health bureau and WHO providing secretariat support.
4. **Surveillance and early warning system strengthened at all levels-**
  - Supported and financed health workers training in AWD surveillance, prevention and control in Amhara
  - Recruited a data manager for Oromia region to improve timeliness and completeness of reporting.
5. **Epidemic preparedness and response strengthened at all levels particularly in disaster prone areas**
  - Financial support provided to Afar Pastoralist Development Association in AWD community awareness and prevention interventions.
  - WHO has assigned 10 consultants in 7 regions and Addis Ababa supporting the current AWD and nutrition response.
  - Supported AWD preparedness and response activities in Amhara, Addis Ababa Somali, Afar, Oromia and SNNPR.
  - WHO procured 100,000 water treatment chemicals for the 10 affected sub cities in Addis Ababa for AWD response.
6. **Other activities conducted**
  - Regular EHA weekly and monthly activity reports have been produced and shared with partners
  - WHO continue to contribute to UNOCHA weekly humanitarian bulletin and monthly bulletin.
  - Supporting UNCT and cluster lead coordination meetings.

##### Constraints :

- Insufficient funding for emergency preparedness and recovery at country level.
- Timeliness and completeness of reporting still weak in some regions.
- Tracking financial expenditure from AFRO is still a challenge.

##### WHO Activities with other sectors than Health e.g. water.

- WHO continue to support the WASH Task Force chaired by the Federal Ministry of

Water Resources and nutrition task force in coordinating WASH related nutrition and AWD interventions.

- Facilitated and supported health sector emergency response coordination meeting in September 2009 to enhance the AWD outbreak response in Addis Ababa, Amhara, SNNPR, Oromia and Somalia Regional states.

### **3- PARTNERSHIPS IN HEALTH AND RESOURCE MOBILIZATION**

#### **a- Partnerships within the UN System**

- WHO is working closely with the UN agencies and NGO humanitarian partners in coordinating the current AWD outbreak and nutrition response in Afar, Amhara, Addis Ababa, Somali, SNNPR, Oromia and Harari

#### **b- Partnerships with other multi laterals/bilateral/NGOs**

- Partnership with NGOs, multilateral and bilateral donors continue to be strengthened through the UN country team, humanitarian coordination meetings, personal contact and advocacy by WHO Country Representative.
- WHO is working in close collaboration with MSF group (Belgium, Greece and France), Afar Pastoralist Development association in the AWD and nutrition response.
- Emergency Health and Nutrition Task Force led by EHNRI met 3 times this month with participants from NGOs, government and UN-agencies to coordinate the current AWD outbreak in the country.

#### **c-Resource Mobilization**

- A proposal for CERF funding at the tune of USD 400,000 was submitted to CERF Secretariat through the Resident Coordinator for funding.

### **4- ADMINISTRATION AND FINANCE ISSUES INCLUDING BUDGET SITUATION:**

- Finance and administration continue to provide guidance on administrative and financial matters which facilitated the smooth running of EHA programme.

### **5- ANY REQUIRED SUPPORT FROM AFRO / INTER COUNTRY TEAM / HQ:**

- Technical support in emergency preparedness, resource mobilization and quarterly supervision.
- Technical and financial support on post epidemic evaluation and seasonal pattern of AWD/Cholera outbreak

### **6- ANY OTHER BUSINESS:**

- IST emergency coordinator provided technical assistance on the current AWD response in the country for 3 weeks