HIGH LIGHT:

- According to WFP, early warning data suggests relief food beneficiaries may increase from the current 4.9 million during the hunger season: July until September 2009. The report furthers indicates that relief food pipeline is broken. Urgent donor support is required. The stakeholder food prioritization committee is regularly meeting to decide on rations for upcoming distributions.

- WHO continue to provide technical support to the national Government to facilitate Influenza A H1N1 preparedness and respond at national and regional levels. According to official reports from the Federal Ministry of Health (FMOH), three confirmed cases of Influenza A H1N1 have been reported in Addis Ababa this month.

- According to official reports from the Federal Ministry of Health (FMOH), 703 cases of AWD and 15 deaths with (CFR of 2.1%) have been reported from Oromiya, SNNP, Afar and Harari Regions this month.

I. GENERAL SITUATION

A. Political, social and security

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

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

- Preliminary findings of the belg assessment teams indicate poor harvests in many belg crop-producing areas due to poor performance of the February to May rains. Major belg crop failure is reported in East and West Hararghe zones, while serious shortages of water and pasture are reported in the lowland areas of Oromiya Region. In SNNPR, poor performance of root crops is contributing to worsening food security, particularly in Kembata Tembaro, Sidama and Wolayita zones. In the six belg-dependent woredas of Southern Zone in Tigray Region, poorly performing rains have significantly impacted production: the belg harvest is expected to an estimated 1.3 per cent of normal. Moreover, near to total failure of the sugum rains in Afar has reportedly resulted in serious shortages of water and pasture in Zone 2 and Zone 5.

- WFP reports that the relief food pipeline is broken, noting that the situation is critical. Only one round of relief distribution is available for the second quarter given the low level of available resources. The limited food balance available after ongoing dispatches will have to be further prioritized. The Disaster Risk Management and Food Security Sector (DRMFSS) available in-country stock stands at 27,947 MT, including 5,034 MT for relief and 22,914 MT Productive Safety Net Programme (PSNP). WFP inputs to the national relief programme are short by 177,983 MT (US$155.7 million); while inputs to PSNP are short by 53,329 MT (US$46.1 million); Targeted Supplementary Feeding shortfalls are 30,565 MT (US$26.5 million). The Ethiopian Food Security Reserve Administration (EFSRA) stock stands at 168,254 MT. Urgent donor support is required. The shortage of trucks available for transport of relief food into and throughout the country is exacerbating the situation. Given the critical nature of the situation, WFP has requested the Government to give additional berths for food aid ships arriving in Djibouti and priority for relief food import into Ethiopia and dispatch throughout the country.
• WFP’s May Market Watch reports that the price of grain is decreasing in most large urban markets due to decline in demand and government restrictions imposed on the bulk purchase of cereals from local markets. The supply of cereals has also increased during the month due to release of stocks by farmers anticipating further price decline as green maize harvests have started to arrive in markets. Meanwhile, general inflation based on the monthly moving average stood at 41.6 per cent in May 2009, with food inflation at 52.6 per cent and non-food inflation at 24.5 per cent. This reflects a nearly 2 per cent decrease compared to April 2009, although the rate remains 19.8 per cent higher than that of May 2009.

• FAO reports that locust swarms have been confirmed in 7 of Ethiopia’s 11 regions, including in areas where there is no previous record of infestation. The Ministry of Agriculture and Rural Development (MoARD), in collaboration with FAO and the Desert Locust Control Office (DLCO) for Eastern Africa, is closely monitoring the situation. The Government is expected to present a response plan specifying immediate and medium-term actions to be taken next week. To control the spread of the infestation, MoARD has identified immediate requirements, amounting to approximately US$ 1 million. Meanwhile, a total of 1,110 hectares of land has been sprayed through ground and air operations in May and June. Control efforts in the area of origin (Somaliland), however, are challenged by community resistance to air spraying operations.

• The level of food insecurity will be updated in late July when the Government-led multi-agency needs assessment mission return from the field. The Government’s early provision of relief food and coordination response to growing malnutrition in parts of the country, especially Oromiya, SNNP and Amhara Regions, has made a significant contribution towards managing the emergency response. Although the general weather outlook for the kiremt rains (Meher rains) was reportedly near normal to normal, the Tigray and Amhara regions have reported a delay in these rains.

• The Amhara Regional Emergency Nutrition Coordination Unit (ENCU) identified 7 hotspot woredas, namely Telemet, Wadla, Sehala, Abergale, Argoba, Legihida and Bati, in which nutrition assessment should be conducted. Meanwhile, CONCERN is undertaking an emergency standard nutrition assessment in Gobalafo woreda in North Wollo zone, following a request by the Amhara regional authorities, while ACF France is conducting nutrition intervention monitoring and standard nutrition assessments in Malga and Loka Abaya woredas in SNNPR. Save the Children US is also undertaking standard assessments in Burji and Hulla woredas in the same region. In Tigray Region, a similar assessment is underway in Tselemeti woreda in Western zone. Findings of the above mentioned assessments will be shared with the Multi-Agency Nutrition Taskforce members. Meanwhile, the quality checking of the Somali Region nutritional survey data and review of the preliminary reports has been completed by the Emergency Nutrition Coordination Unit/Disaster Risk Management and Food Security Sector.

C. Acute Watery Diarrhea (AWD) Situation and Response
• According to official reports from the Federal Ministry of Health (FMOH), 876 cases of AWD and 26 deaths have been reported from Oromiya, SNNP, Afar and Harari Regions from 1st to 21st June 2009. The technical committee of the Emergency Health and Nutrition Task Force continues to meet with secretariat support from WHO to improve coordination of the AWD response.
• Reports from Oromia, SNNP, Afar and Harari indicated that AWD infection is spreading to new districts with weekly CFR in Afar above 1% an indication of inadequate case management. A total of 20 districts have reported active cases from Oromiya, SNNP and Harari Regions this month.
The identified gaps are inadequate CTCs materials and drugs in some districts, poor water supply, inadequate human resources, poor hygiene and sanitation. The needs of affected people are provision of portable water supply, community awareness creation and support for coordination.

Government and partners are responding and mobilising more resource to support response.

Table 1. Distribution AWD cases and death by epidemic week by region Ethiopia

<table>
<thead>
<tr>
<th>Regions</th>
<th>Week 22</th>
<th>Week 23</th>
<th>Week 24</th>
<th>Week 25</th>
<th>Week 22 - 25</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td># Dist</td>
<td>C</td>
<td>D</td>
<td>CFR</td>
<td># Dist</td>
</tr>
<tr>
<td>Afar</td>
<td>2</td>
<td>67</td>
<td>1</td>
<td>1.5</td>
<td>3</td>
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<td>7</td>
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<td>1</td>
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<tr>
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<td>0</td>
</tr>
<tr>
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<td>0.0</td>
<td>0</td>
</tr>
<tr>
<td>National</td>
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<td>151</td>
<td>3</td>
<td>2.0</td>
<td>11</td>
</tr>
</tbody>
</table>

National Trend shows the distribution of AWD Cases and Deaths as of 07 June 2009

National Trend Shows Acute Watery Diarrhoea Cases and Deaths as of 21 June 2009
D.Influenza A (H1N1)

- This month 3 confirmed cases of Influenza A H1N1 have been reported by the Federal Ministry of Health. WHO continues to support the FMOH’s preparedness and response planning. Daily coordination meeting is held at the FMoH chaired by the Minister of health is supported by WHO. The National technical working group is updating /finalization of National Influenza Pandemic Preparedness and response plan in view of the current Pandemic phase.
- The FMOH with support from WHO and other partners has strengthened the national laboratory now functioning 24 hours a day and diagnosis and handling of specimen as per guidelines. Additional human resources have been identified and trained in order to boost the laboratory capacity. Operating centers have been established, and personal protective equipment has been provided to Bole International Airport Quarantine Directorate staff.
- WHO in collaboration with the FMOH provided training/orientation for Ethiopian Airlines crew members on the procedure for handling cases of influenza A H1N1 entering the country via air transport and on the notification procedures to the Bole quarantine health officers.
- FMOH is reinforcing communication of appropriate messages and health promotion actions mobilizing communities for preparedness and response.
- Reinforcing influenza surveillance by designating 30 major public health facilities (hospitals) in the country as surveillance centre at central and regional levels.
- Orientation of health workers on case management, surveillance and infection prevention protocols.
- Supporting finalization of national Influenza preparedness and response plan.
- Supporting resource mobilization at country level.
E: Malaria

According to report obtained from Tigray, malaria is under controlled with support from partners and effort by the region, but inadequate drug supply is still an issue. In SNNPR even though case load decreased in Dabe Gofa woreda in Gofa Zone completeness and timeliness of reporting is still a major challenge. In Oromia Region, Nejo town in West Wolega Zone reported 257 cases and zero deaths reported.

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 through three consultants recruited and supporting 6 regions in responding to health & nutrition crisis in the country? The nutritional survey in Somali Region has been completed in the seven sample woreda of Filtu, Aysha, Degehabur, Hamero, Bare, Kelafu and Bokh. Preliminary findings were shared and results waiting for final endorsement from the the FMoH.

2. **Health needs assessment supported.**
   - Supported joint national health and food needs assessment in the country. Report compilation is in progress.

3. **Coordination of health sector interventions**- WHO continues to provide technical and financial support to central level coordination at EHNRI and in the regions

4. **Surveillance and early warning system strengthened at all levels**- Supported and financed health workers training in AWD surveillance, prevention and control in Afar region.

5. **Epidemic preparedness and response strengthened at all levels particularly in disaster prone areas** –
emergency drug kits provided to MSF Greece, Oromia RHB, East Shoa and West Arsi Zones for AWD response. In addition WHO consultants in 6 regions continue to support the regions in preparedness and response activities for AWD and malnutrition response. Supported preparedness and response activities in Somali, Afar, Oromia and SNNPR.

6. **Other activities conducted**
   - Regular EHA weekly and monthly activity reports have been produced and shared with.
   - WHO continue to contribute to UNOCHA weekly humanitarian bulletin and monthly bulletin (Focus).
   - Supporting UNCT and cluster lead coordination meetings.

**Constraints**:
- Insufficient funding for emergency preparedness and response at country level.
- The continuous security problems in Somali Region hinder access and implementation at the operational level.
- Inadequate staff at federal and regional levels slowed down programme implementation.

**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 June 2009 to enhance the AWD outbreak response in 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 in coordinating the current AWD outbreak and nutrition response in Afar, 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.
   - Health and nutrition task force meeting held this month to with participants from NGOs, government and UN-agencies to coordinate the current AWD outbreak and nutrition response in the country.

c- **Resource Mobilization**
   - Proposals for malaria, measles, cholera and essential drugs submitted for HRF funding is approved and MOUs signed. The sum of USD 995,421.38 was mobilized and WCO Ethiopia is waiting for funds to be transferred to start implementation.

5- **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.

6- **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

7- **Any other business:**