

Ethiopia

15 September 2020

779,261
Refugees and asylum seekers as of 31 August
38,648
Handwashing facilities in camps
2,151
Health and community workers trained


© UNHCR A refugee child in Aw-barre refugee camp, Jijiga, washing his hands with soap against COVID-19.

COVID-19 Operational Context

The Government of Ethiopia declared a five-month state of emergency in April 2020 to mitigate the spread of corona virus in the country. This came weeks after all land borders and schools were closed for the same reason, leaving millions, including over 200,000 refugee students out of school. The Ministry of Education (MoE) has initiated consultations with its education and health partners to design a strategy on how to reopen schools without compromising the health of students, teachers and others.

As of 14 September 2020, the Ethiopian Ministry of Health (MoH) reported 64,786 coronavirus cases and 1,022 fatalities in the country, with a growing number of transmissions of the virus in communities. More than 37,000 of the positive cases were identified during a month-long national testing campaign by MoH. The aim was to gather a clear picture of the situation before the reopening of schools. MoH and its UN partners have adopted a coordinated approach, and are working in the areas of contact tracing, case investigation, case management, prevention and control of infections.

COVID-19 Prevention and Response

The Government of Ethiopia, represented by the Agency for Refugees and Returnees Affairs (ARRA), and UNHCR, together with the Regional Health Bureaus and other health partners have scaled up preparedness and the response to COVID-19 in refugee camps and other locations sheltering refugees and asylum seekers. They have enhanced communication and hygiene and are working to reduce overcrowding to curb the spread of the virus. Supply of water and soap continues to be enhanced together with installation of handwashing stations, strengthening health services, equipping isolation and quarantine centers and provision of personal protective equipment for health care workers, first responders and others.

- **340,000 face masks** dispatched by UNHCR to the different sub-offices and partners while other agencies working in the refugee response also provided masks, sanitizers and other personal protective equipment (PPE).
- **38,648 handwashing stations** have been installed in communal centres and households in all the 26 refugee camps to promote regular handwashing with soap. Of these, **37,218** handwashing stations have been installed in refugee households and **1,430** were set up in communal facilities providing services to refugees and asylum seekers.
- Over **2,150 health and community outreach workers** have been trained and are actively engaged in awareness raising, case investigation and management, as well as mitigation, prevention and control of the virus. They include **410** health care workers, **16** 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 **18.8** liters, with four refugee camps out of 26 receiving less than 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.
- **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 if necessary. UNHCR is working to equip these facilities and extend support to the Government-run treatment centers which are also accessible to refugees. Recently, UNHCR provided **160** hospital beds and **170** mattresses to help furnish the camp-based isolation centres in Melkadida. It also donated medical equipment to the Government-run COVID-19 treatment centre in Dollo Ado and 100 coverall gowns to the Gambella Regional Health Bureau for use by medical personnel who are collecting samples for testing.
- In the capital Addis Ababa, where over **33,000** urban refugees reside, UNHCR is **communicating with the refugees** via telephone helplines, WhatsApp and Telegram groups. Refugee Outreach Volunteers (ROVs) and refugee leaders are also helping raise awareness. In order to meet additional expenses for soap and other sanitary materials, UNHCR provides an additional allowance of 300 Ethiopian Birr (US\$ 8.6) per person per month to those refugees entitled to monthly living allowances.
- UNHCR, and its partners are **supporting the inter-agency COVID-19 response to the IDP situation** in the country, distributing non-food aid items, equipping isolation and quarantine centers and facilitating communication among communities.

COVID Impact and Challenges

Health Impact: The allocation of much of UNHCR's limited health budget to the COVID-19 prevention and response efforts could result in a strain on the provision of regular health services in the refugee camps, and pose challenges in the continuity of disease control programmes such as for HIV, TB and Malaria. This may also negatively impact the efforts made towards the control of non-communicable diseases including diabetes, hypertension and mental health.

Economic impact: UNHCR continues to monitor the economic impacts of COVID-19 in refugee hosting areas. In Sub-Office Melkadida in the Somali Regional State, the harvesting and sale of agriculture produce have been taking place in all nine established irrigation schemes, generating income for refugee and host community farmers. However, farmers are reporting low market prices as a result of the disruption of transport linkages to areas serving as major markets for onion produce. These disruptions are as a result of the COVID-19 state of emergency measures, which limit vehicular movements. To mitigate these disruptions, UNHCR is working on linking cooperatives in the nine irrigation schemes with potential buyers in cities closer to the production area.

In Jewi and Kule refugee camps in the Gambella region, a total of 5,716 households were given redeemable electronic vouchers to pick up fresh food, including vegetables from 17 vendors that were contracted to provide the service. Vulnerable households, including those with pregnant or lactating mothers and children under the ages of 5 were prioritized to ensure that they have access to nutritional foods.

In Tsore and Gure-shombola camps in the Benishangul-Gumuz region, UNHCR has initiated a pilot project to produce face masks by refugees, both to support their livelihoods and to supply face masks to the communities at affordable prices.

UNHCR received **USD 9.8 million** out of its financial requirements of **USD 34.7 million** for the COVID-19 response. The funding shortfall coupled with delayed delivery of international procurement orders of PPEs, medicines and medical supplies are among the key challenges hampering the response efforts. The delay was caused due to the general slow down of global air traffic and international shipments, which is gradually improving. There is no testing machine in Melkadida, and samples are being transported to Jijiga for testing, posing a considerable logistical challenge and delays to obtain results.

Operational Response Updates



Update on Pagak Reception Centre: UNHCR, ARRA and partners continue to extend protection and emergency assistance to the nearly 7,000 South Sudanese new arrivals at the Pagak Reception centre in the Gambella Region. ARRA continues to provide health services including medical consultations, disease surveillance, maternal and child health care as well as health education and health referrals. Some **9,781 medical consultations** were undertaken during the reporting period, with malaria, lower respiratory tract infections, watery diarrhoea and eye and skin diseases as the main causes of morbidity. A total of **3,740 Long-lasting Insecticide Treated Nets (LLITNs) and 1,870 jerry-cans** were distributed to the new arrivals to protect themselves from malaria and to improve hygiene and safe storage of drinking water, respectively.

Flood response: Heavy rainfall in many parts of Ethiopia has destroyed property, damaged livelihoods and displaced thousands across the country. UNHCR is providing emergency aid in different parts of the country to support 80,000 flood-displaced people in the Jijjiga and Melkadida areas in the Somali Region as well as in the Afar Region.

In the Afar Region, UNHCR is a member of the Regional Flood Taskforce and has partnered with the regional Disaster Prevention and Food Security Programme Coordination Office (DPFSPCO) to provide



©UNHCR/ Distribution of aid items to flood-displaced Ethiopians in the Somali Region

relief items to 5,584 households who are currently being hosted in four public schools in Aysaita town. UNHCR distributed relief items over 2,500 of the families, including laundry soap, kitchen sets, jerrycans, sleeping mats, mosquito nets and plastic sheets.

In the Jijjiga area of the Somali Region, UNHCR in partnership with GOAL Ethiopia and Danish Refugee Council (DRC) distributed similar relief items to 6,000 displaced families in the Shabele/Fafen zone. They include 4,000 families that were displaced by recent flooding and 2,000 others who recently returned to a village called Tuli-guled.



SHELTER AND NFIS

Shelter construction: As part of its shelter support to vulnerable IDP returnees in Mate Toma Kebele, Bule Hora Woreda of West Guji Zone, UNHCR through its partner Action for the Needy in Ethiopia (ANE), completed construction of **44 of the planned 70 shelters**. The remaining 26 shelters are at their final phase of completion. UNHCR has already constructed **850 shelters** in the Gedeo-Southern Nations, Nationalities and Peoples Region- (SNNPR) and West Guji in Oromia Region and allotted them to selected vulnerable members of the communities who had returned from displacement sites.



COMMUNITY EMPOWERMENT AND SELF RELIANCE

Livelihoods: Refugee and host community farmers in the Melkadida area of the Somali Region have been harvesting and selling their products, generating an income for their families. In Buramino, Hilaweyn and Melkadida, for example, 11 farmers from the two communities generated 1,363,140 Ethiopian Birr (\$39,000) from the sales of onions. UNHCR and its partner WaPYDO are collecting data to inform and further improve the programming of agriculture projects. In Buramino, UNHCR handed over the first of nine granaries to the agricultural cooperative in the area, which will serve as an important infrastructure for post-harvest handling and marketing of products. Two commercial seedling nurseries in Hilaweyn and Melkadida were completed, which will eventually allow the farming cooperatives to sell seedlings and diversify their income.

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