

ETHIOPIA

08 August 2020

769,310	37,407	18.9 litres	2,151
Refugees and asylum seekers as of 31 July	Handwashing facilities in camps	Average per capita water supply in camps	Health and community workers trained

COVID-19 Operational Context

The Government of Ethiopia declared a five-month state of emergency in early April 2020 as part of the efforts to contain the spread of corona virus in the country. This came weeks after it closed all land borders and schools across the country, leaving millions, including over 200,000 refugee students out of school. UNHCR, ARRA and other partners continue working with the Ministry of Education (MoE) and Regional Education Bureaus (REBs) to include refugee students in the national distance learning programmes.



A child in Aw-barre Refugee Camp washes his hands in one of the communal handwashing stations

As of 07 August 2020, the Ethiopian Ministry of Health (MoH) reported 21,452 coronavirus cases and 380 fatalities in the country, with growing community transmissions of the virus. 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. At the beginning of August, the Government announced the launch of a month-long COVID-19 mass testing campaign to have a clearer picture of the situation in the country which,

according to the country's Prime Minister, will inform the Government's decisions in the new year which begins on 11 September.

Prevention and response: The Government of Ethiopia, represented by 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 are improving communication and hygiene, and working to reduce overcrowding to curb the spread of the virus. Supply of water and soap continue to be enhanced together with installation of handwashing stations, strengthening health services and providing personal protective equipment for health care workers, first responders and others.

A total of **37,407** handwashing stations have been installed in communal centres and households in all of the 26 refugee camps to promote regular handwashing with soap. Of these, **36,097** handwashing stations have been installed in refugee households and **1,310** were set up in communal facilities providing services to refugees and asylum seekers. Some **140,000** surgical masks were distributed within the refugee camps, with an additional **200,000** masks to be distributed soon.

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 **432** 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 also 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 **18.9** liters, with two refugee camps out of 26 receiving less than the minimum recommended amount. UNHCR and partners are working to ensure that all refugees have access to adequate potable water in keeping with the minimum international standards.

Isolation facilities 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.

Health Impact: Re-allocation of much of UNHCR's limited health budget to the COVID-19 prevention and response efforts will result in a strain on the provision of regular health services in the refugee camps and pose challenges in continuity of disease control programmes such as for HIV, TB and Malaria. It will also negatively impact the efforts made towards the control of non-communicable diseases including diabetes, hypertension and mental health. Disruptions of immunization programmes and the delivery of essential health services, such as treatment of chronic diseases will have longer term negative consequences on the health and well-being of refugees and asylum seekers. Once the acute phase of the pandemic is over, health systems will need to maintain COVID-19 specific services with the injection of new resources that were not foreseen during the planning cycle.

Economic impact: Ethiopia's Job Creation Commission reported the loss of 330,000 jobs in the country over the last four months. This will negatively affect employment opportunities for refugees despite Ethiopia's favorable policy directives granting them the right to work. Studies indicate a general national slowdown of economic activities and a decline in productivity. This has led to a decline in the supply of consumables and to increases in the prices of basic and essential items. In order to minimize the impact of the economic downturn on refugee enterprises that are being supported by the IKEA Foundation in Melkadida, UNHCR is working with the latter on a stimulus package for businesses to ensure that they are cushioned from any adverse effects.

In the capital Addis Ababa, where over **27,500** urban refugees reside, UNHCR is communicating with the refugees via telephone helplines, WhatsApp and Telegram groups. In order to meet additional expenses for soap and other sanitary materials, UNHCR provides an additional allowance of ETB 300 per person per month to those refugees entitled to monthly living allowances.

Challenges: UNHCR has, so far, received USD 3.4 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 for PPEs, medicines and medical supplies are among the key challenges hampering the response efforts. The extended closure of schools has the potential to adversely affect the development, safety, and well-being of children, especially in the camps where schools play an important role in child protection and promoting peaceful coexistence.

Limited testing capacity in the Gambella regional hospital is causing a delay in testing of refugees from Pagak Reception Centre to be relocated to camps. UNHCR has placed a procurement order of a second testing machine with 10,000 test cartridges.

Update on Pagak Reception Centre:

UNHCR and ARRA carried out preliminary (Level1) registration of South Sudanese asylum seekers currently sheltered at the Pagak reception center in Gambella. To date, a total of 8,220 asylum seekers are sheltered in the hangars within the reception centre and in the nearby school compound. Congestion and overstretched services are still a concern, and UNHCR and ARRA are working to decongest the Reception Centre in order to mitigate the spread of COVID-19. Empty shelters are being identified in the existing camps to be able to accommodate some of the most vulnerable people in Pagak.

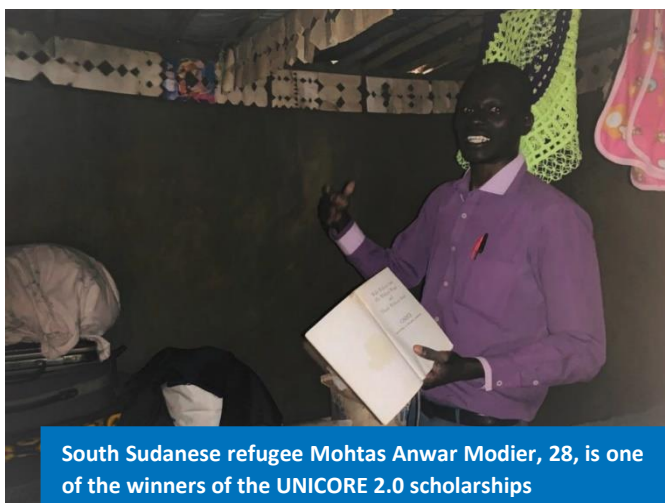


Some of the new arrivals at Pagak Reception Centre

The relocation to vacant spaces in Kule, Tierkidi and Nguenyiel Refugee Camps will be followed by testing for COVID-19. Only negative cases will be relocated to camps after two weeks of isolation in a school at Lare Woreda. The school is being prepared to isolate up to 600 people. Heavy rains and flooding in the area are however slowing down the progress.

Award of education scholarships to Italy: Twenty (20) refugees in Ethiopia have been awarded scholarships in Italy as part of the University Corridors for Refugees project (UNICORE 2.0) which is promoted by 10 Italian universities with the support of UNHCR, Italian Ministry of Foreign Affairs and International Cooperation, Caritas Italiana, Diaconia Valdese, and other partners.

The programme aims to increase opportunities for refugees currently residing in Ethiopia to continue their higher education in Italy. The selected students will be exempt from tuition fees and will receive financial support for air



South Sudanese refugee Mohtas Anwar Modier, 28, is one of the winners of the UNICORE 2.0 scholarships

travel, visa-related expenses, as well as a study grant to help them during their stay in Italy. UNHCR is working with the Government of Ethiopia to facilitate their travel arrangements in time to begin their studies in September 2020.

UAE donation on Eid al-Adha: In connection with Eid al-Adha celebrations marked on 31 July, the Embassy of the United Arab Emirates in Ethiopia donated [Qurbani](#) meat to vulnerable refugee families in Addis Ababa. The beneficiaries included 480 families of Somali, Syrian and Yemeni nationality residing in Addis Ababa.

For their sustenance, a majority of the 27,000 urban refugees in Addis Ababa heavily rely on remittances from families and relatives abroad, or on income generated by working in the informal sector. They are now amongst the hardest hit by the COVID-19 pandemic as remittances reduce, and as job opportunities in the informal sector become increasingly limited.

Over 900 children vaccinated against measles: In coordination with Benishangul Gumuz Regional Health Bureau, UNHCR and partners vaccinated 9,463 children aged between 9 and 59 months, against measles. The campaign met 97.2% of its target.

Distribution of briquettes to Eritrean refugees: As part of the Alianza Shire project, UNHCR in collaboration with ARRA, ZOA and representatives of refugees distributed 50,000 briquettes to Eritrean refugees in Hitsats camp through Hilla Cooperative. Produced by Hilla Cooperative, the briquettes serve as a source of alternative cooking energy for the refugees.



For further information, please contact:
Kisut Gebreegziabher | UNHCR Representation in Ethiopia | P.O. Box 1076 Addis Ababa | Tel. +251-116 17 05 90,
email: gegziabk@unhcr.org
www.unhcr.org | [Twitter](#) | [Facebook](#)