HIGHLIGHTS

- Annual nutrition surveys were conducted in 23 of the 26 refugee camps and the results showed that the global acute malnutrition (GAM) rate in 21 refugee camps is below the emergency threshold of 15%. Prevalence of anemia for children aged 6-59 months is below the emergency threshold (<40%) in 13 of the 23 camps. Interventions are being made to bring the malnutrition and anemia rates in the remaining camps to the minimum level possible.

- The amount of general ration provided to refugees remained less than the minimum requirement of 2,100 Kcal per person per day, ranging from 1,737 Kcal in Gambella, Melkadida, Assosa and Jijiga to 1,920 Kcal in camps in the Afar and Tigray regions.

- Challenges in addressing malnutrition remain, with a need to strengthen preventive programmes through a multi-sectoral approach to support infant feeding and care. Improvements in the camps in 2018 are partially attributed to the elevated cut off Middle Upper Arm Circumferences (MUAC) for community referrals to the facility for further weight-for-height screening. UNHCR rolled-out the UNHCR infant and young child feeding framework to enhance engagement of other nutrition-sensitive sectors and a general scale up of WASH services.

- All children aged 6 to 23 months in all camps continued to receive complementary food which is super cereal plus in order to complement the breast feeding and general food ration with high energy and nutrient dense foods appropriate for optimal growth and development.

20,781 children under the age of five were admitted in supplementary (14,538) and therapeutic (6,243) feeding and treated for acute malnutrition with a recovery rate of 90.0% and 92.9% for severe and moderate cases respectively. Prevalence of global acute malnutrition in 21 out of 23 camps surveyed to date (91.3%) is below the WHO emergency threshold of 15%.
STRATEGIC PRIORITIES

- The Ethiopia Refugee Public Health Sector Strategic Plan covering health (including HIV and reproductive health), nutrition and 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 area of the Somali Region receive cash and food assistance, while the service is yet to be extended to those in Melkadida and Gambella camps. Use of ash based interventions (CBIs) in nutrition to be explored and linkages to CBIs to be expanded.

- A comprehensive Infant and Young Child Feeding (IYCF) strategy which accounts for nutrition sensitive sectors in the Gambella and Melkadida operations will be developed and implemented shortly. The strategy is expected to be rolled-out in other locations as well.

- The use of Mobile technology will be expanded to enhance efficiency of registration and reporting within the nutrition programmes.

- UNHCR and WFP continue their joint advocacy for the reinstallation of the minimum requirement of general food rations to refugees (2,100 Kcal per person per day).

CHALLENGES

External / Donors Relations

UNHCR is grateful for the direct contributions to the UNHCR Ethiopia Operation from:
USA | UK (DFID) | European Union | Denmark | EHF | Italy | Republic of Korea | Switzerland | Spain
Special thanks to the major donors of softly earmarked regional contributions from:
Germany 19.6 million

CONTACT: DOROTHY GAZARWA, NUTRITION OFFICER, GAZARWA@UNHCR.ORG, +251 116170590
LINKS: Data portal: data2.unhcr.org, Facebook: UNHCR Ethiopia, Twitter: @UNHCREthiopia