

# Ethiopia

25 November 2020

796,437

38,830

2,509

Refugees and asylum seekers as of 31 October 2020

Handwashing facilities in camps

Health and community workers trained



A refugee child washes his hands with soap to prevent COVID-19. @UNHCR

### **COVID-19 Operational Context**

As of 22 November 2020, the Ethiopian Ministry of Health (MoH) reported 105,789 coronavirus (COVID-19) cases and 1,647 fatalities in the country, showing an increase of 7.5% and a 9.2% respectively, compared to the previous report on 6 November. Close to 1.6 million samples were collected and tested throughout the country to date.

Following the Government's announcement and guidelines for a phased reopening of schools, schools in the capital Addis Ababa and in some regions are gradually opening their doors to students, starting with grade 8 and 12 students, who need to sit for the national examinations.

## COVID-19 Prevention and Response

The Government's Agency for Refugee and Returnee Affairs (ARRA) and UNHCR, together with the Regional Health Bureaus and other health partners continue to reinforce their response to COVID-19 in

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both refugee camps and other locations sheltering refugees and asylum seekers. They have enhanced communication and hygiene and are continuously working to reduce overcrowding, to curb the spread of the virus. Supplies of water and soap continue to be reinforced, together with the installation of handwashing stations, as well as ongoing strengthening of health services, equipping isolation and quarantine centers, and the provision of personal protective equipment for health care workers, first responders and others.

- PPEs, COVID-related medicines and medical equipment worth approximately 1 million \$USD are being delivered for health services and health staff while a fresh procurement order for medicines and medical equipment for both COVID and regular health programmes has just been placed by UNHCR.
- 38,830 handwashing stations have been installed in communal centres and households in all the 26 refugee camps, to promote regular handwashing with soap. Of these, 37,557 have been installed in refugee households and 1,273 were set up in communal facilities, providing services to refugees and asylum seekers. More capacity is needed to ensure that every refugee household has a handwashing facility.
- Over 2,509 trained health and community outreach workers are actively engaged in awareness raising, case investigation and management, as well as mitigation, prevention and control of the virus. They include 446 healthcare workers, 22 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 **18.6** liters, with five refugee camps out of 26 receiving less than 15 liters per person per day, below the UNHCR minimum standard of 20 litres 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 provided hospital beds, mattresses, coverall gowns and other supplies to equip the facilities and extended support to the Government-run treatment centers which are accessible to refugees.
- In the capital, Addis Ababa, where over **33,000** urban refugees reside, UNHCR is **communicating with 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\$ 7.86) per person per month, to those refugees entitled to monthly living allowances.
- UNHCR is supporting the inter-agency COVID-19 response to the IDP situation in the country, distributing non-food items, equipping isolation and quarantine centers and providing community communications on health messaging.

### **COVID** Impact and Challenges

**Health Impact:** Pivoting of much of UNHCR's limited health budget to the COVID-19 prevention and response efforts is resulting in a strain on the provision of regular essential health services in the refugee camps. This, in turn, will pose challenges in the continuity of maternal and child health services, disease control programmes such as for HIV, TB and Malaria, among others. The reallocation of funds to combat



COVID-19 may negatively impact the efforts already made towards the control of non-communicable diseases including diabetes, hypertension and mental health.

**Economic impact**: UNHCR continues to closely monitor how the COVID-19 pandemic is affecting the socio-economic dynamics in the different refugee hosting areas, including through referencing third party assessment reports on the impacts on enterprises and jobs. In addition to COVID-19, refugee hosting areas are under the double threat of the desert locust invasion and floods. Many projects funded by partners continue to report implementation challenges as a result of COVID-19 measures and changed priorities. Refugees, in many of the camps, indicate that the pandemic has negatively affected their economic and food security, with some mentioning that opportunities for maintaining their self-reliance through income earned -by working as daily laborers, are now limited due to COVID-19. Others who run small-scale businesses have also reported significant reductions in business opportunities.

UNHCR received **USD 9.8 million** out of its financial requirements of **USD 34.7 million** for the COVID-19 response. The funding shortfall is limiting UNHCR's ability to effectively respond to the pandemic as resources are not enough to procure all needed PPEs, medicines, WASH facilities and other supplies. Inadequate WASH infrastructure, lack of additional space in schools and lack of masks for school children are making the reopening of schools a challenge.

#### **Operational Response Updates**

**Developing Situation in Tigray Region**: UNHCR is highly concerned by the impact of the ongoing conflict and the declaration of a six-month state of emergency on the humanitarian situation in the Tigray Region. This is adding to the already difficult situation precipitated by COVID-19, particularly on protection and the humanitarian response for Eritrean refugees and internally displaced persons in the Tigray Region. Humanitarian activities are limited by the current situation. Phone and internet services remain cut off, making communication nearly impossible. There is a shortage of fuel and banking services which were halted, resulting in a lack of access to cash. Concerns continue about the safety of civilians in the region, including the displaced, refugees and UNHCR and partner staff on the ground.

Regular Ethiopia country and regional UNHCR updates on the crisis can be found at: https://data2.unhcr.org/en/situations/rbehagl



**New arrivals in Gambella**: The relocation of new South Sudanese refugees from the Pagak Reception Centre to Nguenyyel Refugee Camp was suspended in early October, as the schools that served as quarantine centres have now been readied to resume classes. This, together with shortage of budget to construct an additional 330 shelters in Nguenyyel, leaves 4,655 refugees remaining at the Reception Centre. Out of the total 8,220 new arrivals, 3,565 were already relocated and accommodated in the camp.

**Peaceful co-existence**: In Nekemte, Oromia Region, UNHCR and the Oromia, Benishangul Gumuz and Gambella Trilateral Peace and Development coordination office, organized a training on the Do No Harm (DNH) principle and peaceful conflict resolution mechanisms for 71 government officials from conflict affected woredas of West Wollega and bordering areas of Kamashi zone (Benishangul Gumuz region).

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Two refugees virtually participating in the South Sudan National Dialogue Conference ©UNHCR/Reath Riek

Refugees' participation in South Sudan National Dialogue: UNHCR facilitated the participation of nine South Sudanese refugees in Ethiopia in the South Sudan **National Dialogue** Conference, which took place in Juba from 3-17 November 2020. It was conducted under the theme "Come let's dialogue, come let's heal our nation", the conference was aimed to "unite and reconcile the people of South Sudan after years of brutal conflicts, and to explore what the South Sudan of the future could look like". UNHCR provided internet access and other support to the refugees (4 from Assosa, 3 from Addis Ababa and 2 from Gambella) to remotely participate in the conference and represent the voice of the 360,000 South Sudanese refugees in Ethiopia.



#### **EDUCATION**

**Reopening of Schools**: Schools in the refugee camps have gradually started to reopen to students, prioritizing grades 8 and 12 first, as they need to prepare for the upcoming national exams. UNHCR is working to fully reopen schools in all of the refugee camps, but the impact of the COVID-19 pandemic, and the need to meet the Ministry of Education's strict precautionary requirements are exerting additional pressure on the already limited existing school infrastructure in Ethiopia. There is a dire need for additional personal protective equipment (PPEs), classrooms, furniture, learning spaces and water and sanitation facilities, which UNHCR and its partners are working to address.



**120 shelteres completed**: Out of the planned construction of 150 shelters in the Gedeo (Southern Nations, Nationalities and Peoples') and Guji (Oromia), UNHCR's partner Action for the Needy in Ethiopia (ANE) has completed 120, thanks to the active participation of targeted households.

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