

U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT BUREAU FOR DEMOCRACY, CONFLICT, AND HUMANITARIAN ASSISTANCE (DCHA) OFFICE OF U.S. FOREIGN DISASTER ASSISTANCE (OFDA)

ETHIOPIA – Complex Health/Food Insecurity Emergency

Situation Report #1, Fiscal Year (FY) 2004

February 25, 2004

Note: This updates Fact Sheet #1 dated December 15, 2003.

BACKGROUND

In 2002, failed belg, or secondary rains from March through May, combined with delayed and sporadic meher, or main rains from July through September, led to severe drought conditions and widespread food insecurity in Ethiopia throughout 2003. A concerted international humanitarian response provided emergency health, nutrition, water and sanitation, agriculture, and food assistance for an estimated 13.2 million people and averted widespread famine-related mortality. Although current rains are improved from 2002/2003 levels, USAID's Famine Early Warning System Network (FEWS NET) reports that a trend of insufficient rainfall during the past seven years has adversely affected crop production. Many households are able to cope with a single poor rainy season, but the cumulative effect of consecutive seasons of failed rains has led some households to experience chronic food insecurity while exhausting traditional coping mechanisms. The humanitarian situation for affected Ethiopians is further exacerbated by a livelihoods crisis due to a decline in world coffee prices, decreasing labor wages, insufficient livestock production, environmental degradation, and market instability. According to a co-funded USAID/OFDA and USAID/Ethiopia report by the Feinstein International Famine Center at Tufts University, even if the rains return to normal levels in 2004, affected populations still face significant debt, poor overall health, decreased seed stocks, and fewer livestock. In December 2003, the Government of the Federal Democratic Republic of Ethiopia's (GFDRE) Disaster Prevention and Preparedness Commission (DPPC) issued the joint U.N./GFDRE emergency appeal, estimating that 7.2 million people will require food assistance in 2004. Although this figure represents a 45 percent reduction from 2003, Ethiopia faces ongoing challenges to recovery from the 2002/2003 complex food insecurity and health emergency.

NUMBERS AT A GLANCE		SOURCE	
Total Affected Population in 2004	7.2 Million	U.N./GFDRE, December 10, 2003	
Total Food Aid Requirements in 2004	964,690 MT	U.N./GFDRE, December 10, 2003	

CURRENT SITUATION

Food assistance still needed despite FAO/WFP prediction of bumper harvest. In a January 2004 Special Report, the U.N. Food and Agriculture Organization (FAO) and U.N. World Food Program (WFP) indicated that good meher rains had resulted in one of the largest harvests in Ethiopia in five years. FAO/WFP estimated meher season national cereal and pulse production levels to be 13.05 metric tons (MT). However, a January 2004 FEWS NET assessment reported that although the meher harvest was significantly better than in 2003, production was expected to be in the average range of 8.7 to 11.2 million MT. Both reports noted that populations in the less productive eastern highlands and pastoral areas of the

country remained vulnerable despite favorable weather conditions.

Current conditions in agricultural regions. Unseasonal rains in many parts of Ethiopia in mid-January increased water and pasture availability in pastoral areas and facilitated land preparation by farmers for the belg season. However, the impact of the rains on agricultural production may be mixed. Recent USAID/OFDA Disaster Assistance Response Team (USAID/DART) assessment trips to various agricultural areas noted farmers' concerns that the belg rains had arrived too early and may stop before enough moisture is in the ground to sustain the plants through to the meher season. If farmers wait

to plant and the rains stop, they may not be able to plant at all or may lose plants early in the germination stage.

Humanitarian concerns in Somali Region. Following the extended delay of the deyr rains, which usually occur from October to early December, Somali Region received substantial rains during the first two weeks of December 2003. Unseasonal rains in mid-January, locally referred to as lixkor rains, further improved the water and pasture supply, especially in areas of Warder and Korahe zones where water shortages were growing acute. The USAID/DART reported that most of the berkeds, or cement-lined water reservoirs, were recharged and the water yield in wells and boreholes showed improvement. However, according to pastoralists, the appearance of lixkor rains usually signals a delay in the gu rains that normally occur from March to May. As the long dry season approaches, livestock may not have sufficient pasture and water to last until the rains begin again. Another concern is that pockets within *deyr* rain-receiving areas remained dry, forcing livestock to migrate. While seasonal migration is common, significant increases in movement is worrisome, especially if resources become depleted and the long season rains are delayed.

Ongoing insecurity in parts of Somali Region continues to hamper humanitarian access. Currently, the most seriously affected areas of the region fall within U.N. restricted security zones. The U.N. Children's Fund (UNICEF) and the World Health Organization (WHO) plan to implement a measles vaccination and vitamin A supplementation campaign in Degahbour, Korahe, and Warder zones, but efforts have been delayed due to insecurity in the region. Health workers have observed increased malnutrition rates in children under five and lactating mothers, particularly in Kebridehar and Gode hospitals and in the health centers in Warder, Degahbour, and Fik zones.

Update on Afar Region. In January 2004, the USAID/DART traveled to Zones 1 and 3 of Afar Region to assess the humanitarian situation due to concerns regarding the late arrival of the kirma, long rains that usually occur from mid-June to September. The situation in all areas visited had improved since the December 2003 USAID/DART assessment as a result of the timely arrival of the December dade rains and the early arrival of the sugum rains that usually occur from March to April. According to the USAID/DART, water and pasture availability had improved in most areas visited and the overall condition of livestock was good.

Regional DPPC officials reported to the USAID/DART that the health situation in Afar was stable despite limited health equipment and facilities and a shortage of medical staff. Some communities reported outbreaks of malaria, but local health posts had an adequate supply of drugs. In addition, the regional health bureau was carrying out bednet distribution and insecticide spraying activities in affected zones. Although chronic malnutrition remained a concern throughout the

region, the USAID/DART noted improvements in nutritional status and reported that therapeutic and supplementary feeding programs were closing due to declining admissions. Nutrition surveys of Zone 3 conducted by GOAL reported that Global Acute Malnutrition (GAM) rates had decreased from 18 percent in September 2002 to 11.6 percent in May 2003.

Humanitarian situation in SNNPR. During the first half of 2003, the humanitarian situation in Southern Nations, Nationalities, and Peoples Region (SNNPR) reached crisis levels, with mortality rates in pockets of the region above emergency thresholds. Since June 2003, the situation in SNNPR has stabilized through the combined efforts of donors, U.N. agencies, non-governmental organizations (NGOs), and the GFDRE. The *meher* rains were generally good in 2003, improving short-term food security in the region.

From January 23 to 24, 2004, U.N. agencies, donors, NGOs, and regional health bureau and DPPC officials met to review lessons learned from the 2002/2003 crisis and assess current humanitarian trends. Although the situation has improved significantly, remaining pockets of critical needs require ongoing rapid response capacity and emergency assistance in the nutrition, health, and water sectors. USAID/DART assessments indicate that populations affected by the 2002/2003 crisis remain vulnerable and require close monitoring to ensure that new humanitarian hot spots do not emerge. In addition, complementary response and recovery activities, particularly cash grants, agricultural, and livelihoods programs are vital during the transition period.

National nutritional trends. Recently, the USAID/DART traveled to SNNPR, Afar, and Oromiya regions to analyze and evaluate national nutritional trends. The situation across the country has improved compared to 2003 crisis levels, and most agencies have scaled down or closed emergency nutrition programs. However, pockets of malnutrition remain and new areas of concern continue to emerge, particularly in Somali Region. Although global malnutrition rates have decreased slightly, lower rates reflect the period after the harvest when food is most abundant. With coping mechanisms exhausted from the 2002/2003 crisis, affected populations require continued monitoring and support through the hunger period from March to April.

Potential break in pipeline. As of January 2004, USAID's Office of Food for Peace (USAID/FFP) estimates that 23 percent of the 964,690 MT of the U.N./GFDRE joint appeal has been met by U.S. Government (USG) assistance. Without additional contributions from the donor community in the near future, pipeline breaks may occur in late spring.

Violence in Gambella Region. On December 13, armed attackers killed eight people, including three workers from the GFDRE's Administration for Refugee and Returnee Affairs (ARRA), sparking violence between ethnic Anuaks and ethnic Nuers in the Gambella Region of western Ethiopia. Reprisals

over the next few days claimed the lives of an estimated 50 to 100 Anuaks. Although the GFDRE deployed 5,000 troops to the area to restore calm, tensions remained high.

Following weeks of relative calm, violence erupted on January 30, when approximately 200 people were killed following an armed attack on a gold mine in the town of Dimma. On February 6, clashes claimed an additional 40 lives at the Dimma refugee camp, home to 18,700 Sudanese refugees. The U.N. Office for the Coordination of Humanitarian Affairs (UN OCHA) reported on February 12 that 10,000 people had fled from western Ethiopia to Pochalla in southern Sudan since the violence began. The U.N. High Commissioner for Refugees (UNHCR) indicated that 100 to 200 people were crossing the border daily and the humanitarian situation could deteriorate. In response to the insecurity, UNHCR withdrew non-essential staff from the region.

U.N. Appoints Special Envoy for Peace Process. On February 2, UN OCHA announced the appointment of former Canadian Foreign Minister Lloyd Axworthy as U.N. Special Envoy for Ethiopia and Eritrea. The special envoy is expected to initiate dialog and provide support toward implementation of the December 2000 Algiers Agreement that ended the border conflict between the two countries. The special envoy arrived in Addis Ababa on February 19 to meet with the Ethiopian Prime Minister, African Union Chairman, European Union (EU) ambassadors, and head of the U.N. peacekeeping mission for Ethiopia and Eritrea (UNMEE).

USG HUMANITARIAN ASSISTANCE

Non-food assistance. In FY 2003, USAID/OFDA provided more than \$31.9 million to support humanitarian needs in Ethiopia. From May 9, 2003, to January 31, 2004, a USAID/DART was based in Addis Ababa to assess humanitarian needs and enhance the non-food response to the humanitarian crisis in Ethiopia. The USAID/DART traveled throughout the six drought-affected regions, monitored programs and humanitarian conditions, and outlined recommendations regarding areas requiring additional support. The USAID/DART has been replaced by a USAID/OFDA humanitarian team consisting of an Emergency Disaster Response Coordinator (EDRC), a field officer based in SNNPR, an information officer, and two local program officers.

In FY 2004, USAID/OFDA has committed approximately \$6.5 million to support humanitarian activities in Ethiopia, with priorities to health and nutrition, agriculture, water and sanitation, livelihoods, and local NGO capacity building activities.

In FY 2004, USAID/OFDA has provided more than \$110,000 to Medical Emergency Relief International (MERLIN) to increase access to potable water and improve community

sanitation and hygiene practices. In addition, USAID/OFDA has provided \$1.5 million through the International Rescue Committee (IRC) to support water and sanitation programs in drought-affected areas of Oromiya Region.

In response to agricultural and livelihoods recovery needs, USAID/OFDA has provided more than \$860,000 to CARE for seed fair and voucher programs during the belg and meher seasons. Through CARE, households will each receive 27 kg of seeds and agricultural extension support to complement seed fair initiatives. USAID/OFDA has also funded Catholic Relief Services (CRS) with \$500,000 to support access to supplemental irrigation systems, community-based water associations, agronomic training, seed fairs and vouchers, linkages to the International Agricultural Research Center (IARC), seed grower training, livestock security assessment, livestock fairs and vouchers, and local veterinary services. In Tigray Region, USAID/OFDA has provided \$500,000 to Relief Society of Tigray (REST) for agriculture and livelihoods programs including livestock distribution to female-headed households, improved irrigation through household ponds and hand dug wells, cash for seeds, and vegetable seed distribution. To support agricultural recovery and food security in SNNPR and Oromiya Region, USAID/OFDA has provided \$500,000 to World Vision for seed fairs to distribute maize and vegetable seeds, agricultural tools, and lablab or pigeon pea to increase cover crops and soil conservation.

In response to ongoing health and nutrition concerns, USAID/OFDA has provided more than \$1.4 million to support Save the Children/U.S.'s (SCF/US) multi-sector rapid assessment and response activities throughout Ethiopia. To support the countrywide measles immunization program, USAID/OFDA has approved \$800,000 to UNICEF for FY 2004.

Emergency food assistance. The USG is the largest donor of food assistance to Ethiopia. To date in FY 2004, USAID/FFP has pledged 275,160 MT of P.L. 480 Title II emergency food assistance valued at approximately \$123 million through implementing partners CRS, SCF/UK, and WFP. Since the emergency began in August 2002, USAID/FFP's response to Ethiopia has reached more than 1 million MT of emergency food assistance valued at more than \$500 million. The commodities provided by USAID/FFP include a combination of cereals, pulses, and vegetable oil, and corn-soya blend (CSB) for therapeutic and supplementary feeding. USAID/FFP emergency food assistance is provided to vulnerable populations through direct distribution, food for work programs, emergency school feeding, maternal and child health programs, and therapeutic and supplementary feeding programs.

U.S. GOVERNMENT HUMANITARIAN ASSISTANCE TO ETHIOPIA

Implementing Partner	Activity	Location	Amount	
USAID/OFDA ASSISTANCE ¹				
CARE	Agriculture and Livelihoods	Oromiya	\$863,805	
CRS	Seeds, Livestock, Livelihoods, Water and Sanitation	Multiple regions	\$500,000	
IRC	Water and Sanitation	Oromiya	\$1,500,000	
MERLIN	Water and Sanitation	Oromiya	\$112,119	
REST	Food Security/Agriculture	Tigray	\$500,000	
SCF/US	Rapid Assessment and Response	Countrywide	\$1,424,312	
World Vision	Agricultural Recovery	SNNPR, Oromiya	\$500,000	
UNICEF	Measles Vaccinations	Nationwide	\$800,000	
Administrative Costs	Various	Countrywide	\$329,352	
TOTAL USAID/OFDA				
USAID/FFP ASSISTANCE				
WFP/ PRRO	5,700 MT of P.L. 480 Title II Emergency Food Assistance	Countrywide	\$3,464,674	
WFP/EMOP	27,000 MT of P.L. 480 Title II Emergency Food Assistance	Countrywide	\$18,234,700	
CRS	224,830 MT of P.L. 480 Title II Emergency Food Assistance	Countrywide	\$94,446,025	
SCF/UK	17,450 MT of P.L. 480 Title II Emergency Food Assistance	Countrywide	\$6,888,696	
TOTAL USAID/FFP				
TOTAL USAID HUMANITARIAN ASSISTANCE TO ETHIOPIA IN FY 2004\$129,563,683				
TOTAL USG HUMANITARIAN ASSISTANCE TO ETHIOPIA IN FY 2004				

¹ USAID/OFDA funding represents committed and/or obligated amount as of February 25, 2004

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