



Dance show by refugee children in Tsore camp on WRD 2016

# ETHIOPIA

## FACT SHEET

June 2016

### HIGHLIGHTS

<b>743,190</b> Total number of refugees in country	<b>2,891</b> Number of refugees newly registered in May	<b>38,839</b> Number of unaccompanied and separated refugee children in country	<b>15,031</b> Number of Eritrean refugees who signed up for verification in Addis Ababa
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### Population of concern

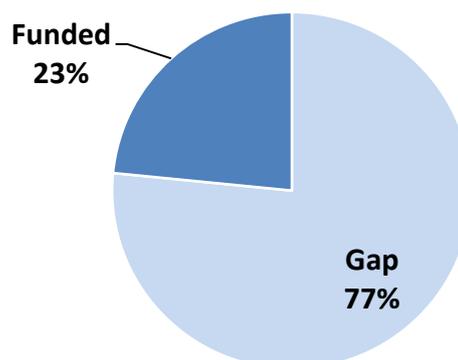
A total of **743,190** population of concern (As of 30 June 2016)

#### By country of origin

Country	Total PoC
South Sudan	285,809
Somalia	251,987
Eritrea	159,842 *
Sudan	38,801
Other nationalities	6,751
<b>Total</b>	<b>743,190</b>

### Funding

**USD 280.0 million** requested



- **Funding level as of 27 June 2016**

### UNHCR Presence

#### Staff:

- 320 national staff
- 122 international staff
- 84 individual contractors
- 38 deployees
- 9 IUNVs

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Total: 564

#### Offices:

24 offices, including the **UNHCR Representation in Ethiopia**, as well as Sub and Field-Offices located in five Regional States: **Afar** (Semera) **Benishangul-Gumuz** (Assosa, Bambasi, Sherkole, Tongo), **Gambella** (Gambella, Dimma, Itang, Jewi, Pugnido), **Somali** (Jijiga, Melkadida, Aw-barre, Sheder, Kebribeyah, Dollo Ado, Bokolmanyo, Kobe, Hilaweyn, Buramino) and **Tigray** (Shire, Mekele, Embamadre, Shimelba).

\*81,084 Eritrean refugees previously registered as living in the camps are believed to have spontaneously settled in Ethiopia. This figure will be subjected to Verification

## WORKING WITH PARTNERS

- UNHCR is fully engaged in the Humanitarian Country Team in Ethiopia consisting of UN Agencies, NGOs and donor representatives, where the refugee programmes are discussed strategically to ensure that the needs of refugees are adequately presented and addressed. The Representation Office is also building on well-established coordination fora such as the Refugee Task Force, donor and NGO and inter-agency meetings at the field and camp levels.
- UNHCR's main Government counterpart and implementing partner in Ethiopia is the Administration for Refugee and Returnee Affairs (ARRA) and the Offices are closely cooperating to ensure the protection of refugees.
- Some 40 partners, including government agencies, national and international non-governmental organizations and UN agencies work closely with UNHCR to support the refugees in the country. The effective coordination environment that was established in response to the Level 3 emergency with refugees arriving from South Sudan is working well; a Regional Refugee Response Plan was developed with participation of all partners.

## MAIN ACTIVITIES

### Protection

- The Government of Ethiopia generally maintains open borders for refugees seeking protection in the country. A party to both the 1951 Convention relating to the Status of Refugees, and its 1967 Protocol and the 1969 OAU Convention, the Government provides protection to refugees from some 20 countries, with the majority originating from South Sudan, Somalia, Eritrea and Sudan.
- Most asylum-seekers are granted automatic refugee status. Individual refugee status determination is undertaken for all other asylum seekers through a government Eligibility Committee, on which UNHCR sits as an observer.
- Refugees and asylum-seekers are generally expected by the Government to reside in camps, although some are permitted to reside in urban areas for medical, security, or humanitarian reasons. There are some 17,345 such refugees in Addis Ababa. The Government's "Out of Camp Policy" provides Eritrean refugees the opportunity to live in Addis Ababa and other non-camp locations if they have the necessary means to support themselves. Key protection concerns for the country operation include child protection, education and sexual and gender-based violence. The situation of Eritrean unaccompanied and separated children (UASC) in Shire is of particular concern, given the limited family-based care options.
- UNHCR and ARRA started verification of urban-based Eritrean refugees on 16 May, starting with the capital Addis Ababa where the majority of them are believed to be staying. Verifications will also be undertaken in Mekele and Shire towns in the Tigray Region as well as Semera in the Afar Region.

### Education

- An estimated 50% of school-age children are still out of school, including over 47% for primary and 91% for secondary level with great regional variations. Classrooms are often overcrowded and there is a shortage of teachers (on average one teacher for 80 students).
- A total of 153, 589 children (86,981 males and 66,608 females) have been enrolled in schools within and outside of the refugee camps during the current academic year. This represents an average Gross Enrolment Ratio (GER) of 53% of school-age children. Compared to the same time last year, there is an increase of 16% in the average gross enrollment rate. Similarly, 3,845 (9%) of secondary school-aged refugees are enrolled in schools in camps and urban areas.
- More than 1,600 qualified refugees are enrolled in higher education institutes throughout the country, including some 1,300 sponsored by the Government of Ethiopia, and 300 others supported by UNHCR through the DAFI scholarship programme.
- A total of 2,638 refugees are enrolled in technical and vocational education and training (TVET) and 9,672 adult refugees are enrolled in adult functional literacy and numeracy programmes in the different camps and urban settings. Moreover, some 1,096 refugees are enrolled in language training programmes in camps and urban areas.

### Health

- Major health problems presented are upper respiratory tract infections (20% of consultations), lower respiratory tract infections (10%), watery diarrhoea (9%) and malaria (6%). Consultations for mental health disorders and chronic diseases accounted for 2% of the total consultations. Mortality rates in children under five is 0.2/ 1,000/ month and remains within the expected range in all camps. UNHCR together with ARRA and other health partners ensured the provision of full Elimination of Mother To Child Transmission of HIV services, including universal access to counselling and testing for 3,735 pregnant women; access to antiretroviral therapy for 62 pregnant women and 55 exposed babies, including early infant diagnosis.

- Between January and May 2016, 307,009 persons received consultation in health centers in all refugee camps. Of those, 13 % (39,911 consultations) were from host community members. Altogether, 36% of the consultations were for children under five years of age. Health facility utilization rate reached 1.2 consultation per refugee per year (standard: 1-4 consultations).

## Nutrition and Food Security

- There has been an improvement in the provision of the general food ration in camps that suffered from ration cuts in the past months. Refugee households in camps in the Assosa, Melkadida and Jijiga areas have now seen an increase in their monthly cereal entitlements from 10 kg/ person /month to 13.5 kg/ person/month. Moreover, distribution of corn soya blend plus (CSB+) - was resumed in all refugee camps. However, there is no milling allowance for cereals and sugar continues to be absent from the general food ration. These contribute to food insecurity at household level.
- Global acute malnutrition prevalence in children under five varies between 6.3% and 28.3%; a total of 10 out of the 22 assessed refugee camps remain above the emergency threshold of 15%.
- Key interventions to reduce malnutrition are the promotion of appropriate Infant and Young Child Feeding (IYCF) practices, which is currently being implemented fully only in Gambella, Melkadida and Berhale camps. We are also providing complementary food to diversify refugees' diet in Gambella. Funding and capacity constraints do at present not allow for further expansion of the IYCF programmes.

## Water and Sanitation

- The impact of the ongoing drought led to a reduction in yield of boreholes and deterioration of water quality especially in Shire camps (Adi Harush, Hitsats) where the daily amount of water provided was reduced from 17 litres per person per day (lppd) to 10 lppd in Hitsats camp. Aging water infrastructure in older camps, particularly pumps and generators, is causing supply disruptions. Open defecation, resulting from stagnating improvement in sanitation infrastructure coverage, remains a major public health concern. The resulting open defecation remains a major public health concern. Moreover, low levels of refugee community participation on WASH infrastructure development and maintenance.
- On average 10.35 million litres of treated water are supplied daily to refugee camps. However, only 8 camps attained UNHCR minimum threshold of 20 litres per person per day (lppd).

## Camp Coordination and Camp Management

- The Government of Ethiopia (ARRA) manages all the 24 refugee camps in Ethiopia. UNHCR and ARRA work together with partners to ensure proper and coordinated delivery of protection and assistance. Camp coordination meetings and technical working groups take place both at the zone and camp levels.

## Access to Energy

- UNHCR continues to provide refugees with energy for cooking, household and street lighting purposes. Access to ethanol fuel is ensured for refugees in the three Jijiga camps and partly for refugees in Sherkole, Asyaita and Hitsats camps. Though sporadic, refugee households in Bambasi and Tongo camps near Assosa, as well as the Dollo Ado camps and those in Shire receive kerosine for their domestic energy needs. However, refugees in the gambella camps, those in Barahle and Tsore are yet to receive any kerosine. To date, UNHCR could address the domestic energy needs of only 5% of the refugees in Ethiopia.
- Over 1 million tree and fruit trees seedlings have been raised across the refugee camps and would soon be planted. The trees help conserve the environmental, green the camps, as well as for wood lot development and food. Planting of the seedlings have started in regions where enough rain fall is received for planting purpose.

## Community Empowerment and Self-Reliance

- UNHCR-Ethiopia operation has a well-established community based structure, where refugee men, women and children are represented by different committees. Refugee Central Committees, Women's Associations, Youth Associations, Associations for Persons with Disability, Traditional Justice Leaders Associations, Children's Parliaments, Girls Clubs, Male Involvement Groups, Parents and Teachers Association, Block and Zone Leaders, Community Watch Groups, are some of the main structures used to ensure meaningful participation of the refugees in the planning and implementation of different projects.
- Innovative approaches to refugee shelters, renewable energy and camp lay-out have also been piloted in Dollo Ado for eventual implementation in other regions. In addition to providing training on cooperative development and business management, business grant support has been made available by UNHCR to improve the livelihoods of refugees. UNHCR is also piloting an agricultural project focusing on improving the livelihoods of more than 200, 000 Somali refugees in Dollo Ado/Melkadida.

## Durable Solutions

- Resettlement remains the only viable durable solution in the Ethiopia operation as conditions in the countries of origin are not conducive for voluntary repatriation, while local integration remains elusive.
- Ethiopia's resettlement referral target for 2016 is 6,465 individuals. As of June, 10,35 cases (3,801 individuals) were referred to

