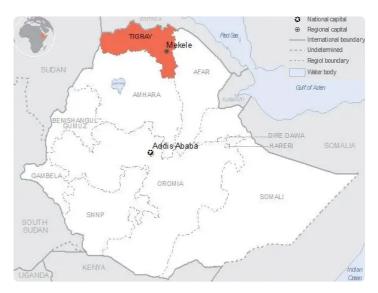
HIGHLIGHTS (28 Feb 2021)

- The humanitarian situation in Tigray Region remains critical, with reports of intensified fighting across the Region, particularly in the Central Zone.
- Incidents of house searches, looting, killings and gender-based violence (GBV) against civilians continue to be reported.
- Despite large amounts of food aid reportedly dispatched across Tigray, better monitoring is needed to ensure that aid is reaching those most in need.
- Unimpeded access remains critical to ensure principled humanitarian action in all parts of Tigray.
- Additional resources are urgently required to ensure that protection activities and other life-saving services can scale up.



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. © OCHA

KEY FIGURES

950,000 1.3M

People in need of aid Projected additional before the conflict people to need aid

61,307Refugees in Sudan

since 7 November

\$33.9M

Unmet requirements for the Response Plan

FUNDING (2020)

\$1.3B

Required

\$729.9M



FTS: https://fts.unocha.org/appeals/9 36/summary

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BACKGROUND (28 Feb 2021)

SITUATION OVERVIEW

The humanitarian situation in Tigray Region continues to deteriorate, with intensified fighting reported across the Region, particularly in Central Zone. Aid workers on the ground have reported hearing gunshots from the main cities, including in Mekelle and Shire. Residents and aid workers on the ground continue reporting incidents of house searches and indiscriminate looting, including of household items, farming equipment, ambulances and office vehicles, allegedly by various armed actors. This is likely to have a serious impact on food security in the coming period as people's livelihoods are disrupted. Protection actors continue to raise concerns over alarming levels of violence against civilians perpetuated by armed actors. Incidents of killings and gender-based violence (GBV) continue to be reported, mainly among women and

https://reports.unocha.org/en/country/ethiopia/

children. Ethiopian President Sahle-Work Zewde has confirmed that several survivors of sexual violence are being housed in a shelter in Mekelle, while aid workers are reporting a high demand for emergency contraception and post-exposure prophylaxis (PEP kits), a sign that many more incidences could be underreported. Mobile health and nutrition teams (MHNTs) across the Region continue to provide clinical management of rape survivors. Besides GBV, a rights group has documented a series of serious violations against civilians in Axum committed in November 2020, including indiscriminate shelling and mass executions of civilians, findings that the Ethiopian Human Rights Commission says should be taken very seriously. More recently, following the protests in Mekelle on 9 and 10 February, several people were allegedly killed by security forces in Adigrat, Axum, Mekelle and Wukro, according to aid workers on the ground, raising continued concerns for protection of civilians. Despite large amounts of food aid reportedly dispatched across Tigray, it is unclear how much aid is reaching their intended beneficiaries, according to the latest Emergency Coordination Centre meeting on 19 February. Thousands of people have not received vital assistance for almost four months since the conflict broke out in early November 2020. Humanitarians are putting in place appropriate systems to strengthen the targeting of food beneficiaries and the monitoring of food distributions, although continued disruptions to electricity and communications make such efforts extremely challenging. Electricity was switched off across the entire Region from 17 to 27 February, and phone communications were shut down from 16 to 27 February in several towns, including Axum, Adwa and Shire, where it had previously resumed. Although 71 per cent of the funding requested earlier has been received, the rising needs have vastly outstripped the requirements estimated in the preliminary response plan that was developed by the humanitarian community in the first weeks of the conflict. Several critical clusters, including Shelter, Health, Protection and Education, report that the resources received are inadequate for the dire needs, even in areas that are currently accessible. Given the volatile security situation and evolving access opportunities, it is critical that clusters are sufficiently equipped with resources to be able to provide life-saving assistance whenever and wherever possible.

High-level visits The UNICEF Emergency Director, Manuel Fontaine, together with the UNICEF Ethiopia Representative, the UNICEF Head of Field Operations and Emergency and a representative from the Swedish Government visited Adigrat and Mekelle from 21 to 23 February.

ANALYSIS (28 Feb 2021)

CROSS-BORDER IMPACT

Asof 25 February, at least 61,307 people have arrived in Eastern Sudan since early November 2020 when the conflict broke out, according to <u>UNHCR</u>. While at least 41,181 people have been relocated to Um Rakuba camp and Tunaydbah settlement, over 20,000 people remain by the crossing points near the border. Amid rising border tension between Ethiopia and Sudan, the number of Ethiopians fleeing into Sudan has reduced in the recent weeks.

Reports of increasing militarization on both sides of the border are evidence of increased tensions between the two countries, and this presents a direct risk to the continued protection of civilians and a threat to regional stability. Military build-up has been reported along the Fashaga area with confrontations leaving to death of military personnel on both sides.

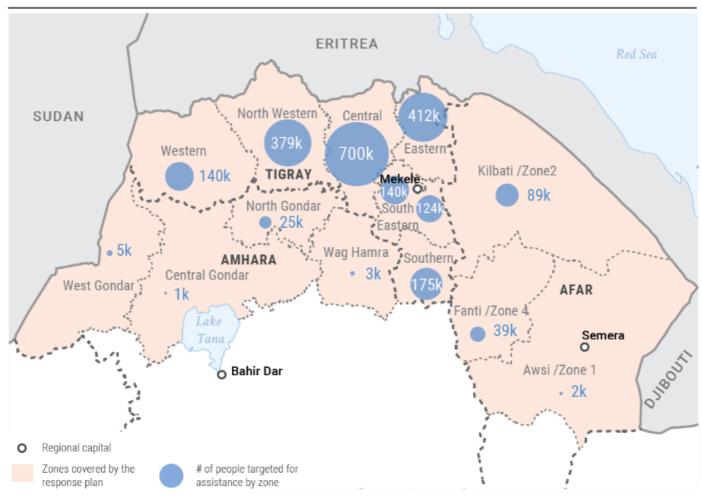


Ethiopian refugees, fleeing clashes in Tigray region, cross the border into Hamdayet, Sudan, over the Tekeze river. Photo: © UNHCR/Hazim Elhag

VISUAL (12 Feb 2021)

PEOPLE TARGETED FOR HUMANITARIAN ASSISTANCE IN TIGRAY

NUMBER OF PEOPLE TARGETED FOR HUMANITARIAN ASSISTANCE BY ZONE



EMERGENCY RESPONSE (28 Feb 2021)

HUMANITARIAN PREPAREDNESS AND RESPONSE

Despite some progress, particularly in the food and nutrition response, the overall humanitarian response remains inadequate compared to the needs on the ground. Assistance remains particularly limited in rural areas, and access to rural areas, even locations that are unaffected by major clashes, continues to be challenging. Insecurity in Southern and South Eastern Tigray is limiting access to areas that were previously reachable, and in the past week, several partners reported being prevented from leaving Mekelle due to an apparent deterioration of the security situation. There has reportedly been a significant variation in reach and quality of the response, with reports from rural areas indicating that food is mostly benefitting city dwellers. In terms of quality, there continue to be reports of severely incomplete food baskets. A fluid security situation and bureaucratic and logistical constraints have seriously compromised the food response, with several woredas in Central, North Western and Southern Zones yet to be reached. The gap vis-à-vis the target is particularly high in

the Central Zone, followed by the Eastern and Southern Zones. Partners report that unavailability of trucks, private truck operators refusing to operate in certain areas due to insecurity, and limited storage capacity in distribution areas are posing additional challenges to the response.

There are also concerns regarding the potential exclusion of beneficiaries based on gender, ethnicity and political affiliation. While protection actors on the ground highlight reports of discrimination against female-headed households, other partners report that displaced Tigrayans in Western Tigray and in Mae-Tsebri in North Western Tigray, are not receiving appropriate shelter support and are forced to sleep in open spaces, exposing them to heightened protection risks. In light of these reports, aid agencies continue to stress that the full resumption of free and unconditional access, including blanket clearances, is critical to ensure principled humanitarian action in all areas of Tigray. In view of imminent plans to re-open schools, which have been used as shelters for displaced people, partners underscore the urgent need to provide adequate Site Management Support and Camp Coordination and Camp Management services, particularly in Mekelle and Shire. Inadequate humanitarian access continues to be one of the critical obstacles preventing aid workers from scaling up the response. Although an increasing number of access clearance for international staff has been granted, other challenges are emerging, including the restriction of movements out of Tigray's capital Mekelle.

The Tigray Emergency Coordination Center (ECC) continues to meet weekly, and in its latest meeting on 19 February, discussed ways to improve the targeting of assistance to ensure that aid reaches those who are in most need. The Inter-Cluster Coordination Group (ICCG) in Mekelle meets every week, while an ICCG has been activated in Shire and held its second meeting on 15 February.

CLUSTER STATUS (28 Feb 2021)



!! AGRICULTURE



Needs

- The agricultural systems have been devastated by months of fighting and extensive looting and destruction. Crops and animals have been looted or burned, particularly notably in the Eastern and Central zones. Farmers are becoming increasingly desperate, with partners describing their food security status as catastrophic. Livestock production across the Tigray Region has also been devastated due to the lack of feed, water and health services, with outbreaks of foot and mouth disease (FMD) in at least two woredas in East and South East zones.
- Field assessments conducted in four zones (South, South East, East and Central zones) found that Office of
 Agriculture employees at the woreda level, though many have resumed their work, are unable to fully operate since
 all office vehicles and equipment have been looted. Offices in a third of the assessed woredas have also had their
 animal clinic equipment destroyed, and drugs and vaccines looted. Concerningly, the gravity of the situation remains
 unknown in other unassessed parts of the Region, such as in Northern and Western Tigray.

Response

 The Agricultural Cluster has conducted field assessments in 21 woredas across four zones and has developed a series of recommendations.

|←>| Gaps

• Funding to re-equip the office of agriculture at *woreda*-level, in addition to providing emergency agricultural inputs (seed, fertilizer, chemicals and animal drugs), is an urgent priority.



Education



- Approximately 1.3 million children need protective services and safe education in Tigray and neighbouring areas, as
 the conflict disrupted their learning process. An estimated 25 per cent of schools in Tigray have been damaged,
 according to the Ministry of Education, and approximately 48,500 teachers need psychosocial support.
- Many schools across the Region are currently being used as temporary shelters for displaced people, as well as by various security forces.
- Poor WASH facilities in these learning spaces are a major concern for safe reopening of schools amid the COVID-19 pandemic and other disease outbreaks.
- Increasing food insecurity is also considered a barrier to continuing education, according to the Education Cluster.

Response

- The Education Cluster is targeting 228,000 children for the Tigray response. At least 87 per cent of the targeted children (199,900) are in Tigray, while there are some 15,000 and 13,000 internally displaced in Afar and Amhara, respectively.
- During the response, the priorities will include establishing temporary learning spaces and renovating schools and classrooms damaged. Distribution of teaching and learning materials, teacher training and well-being support for children and teachers will also be part of the activities.
- Save the Children and UNICEF led a rapid needs assessment in IDP centres in Mekelle and have identified 65 teachers and 1,721 students, latter of whom included 428 unaccompanied and separated children (UASC). The Cluster also provided orientation to 35 people, including from the Regional Education Bureau (REB) and humanitarian partners, to conduct such assessments. Partners have also started providing socioemotional learning training to 1,400 teachers in Mekelle, with a series of trainings scheduled for the coming month.
- Ayuda en Action Ethiopia conducted an assessment in four districts in Afar that had been affected by the situation.
- As the REB plans to move forward with school re-opening, partners are engaging with teacher training and community mobilization. Procurement for 12,500 educational kits is also ongoing.
- The sub-national Cluster has been re-activated and has resumed its weekly meetings. Partners are also working closely with the REB.
- Education Cannot Wait (ECW) allocated \$1 million for responding to Education in Emergencies needs in Tigray Region, and ECC is finalising the process through an independent Grantee Selection Committee.

⇔ Gaps

 Funding is a critical challenge amid a high demand for reopening of schools. The Regional Education Bureau (REB) is reportedly facing resource constraints to address the needs identified before re-opening of schools.



Emergency Shelter & Non-Food Items

Needs

- The conflict has uprooted hundreds of thousands of people across Tigray, leaving people in urgent need of
 emergency shelter and basic household items, including kitchen utensils, blankets, mats, among others. While most
 displaced people are seeking shelter with relatives and friends, thousands are also living in overcrowded collective
 centres in different parts of Tigray. ES/NFI Cluster-led assessments in Adigrat and Shire confirmed that people were
 living in overcrowded settings in unfinished buildings.
- Joint assessments led by the Cluster and Regional Government in centres for newly displaced people in Mekelle
 highlighted a dire situation, with on average 30 people sleeping in a single classroom. There are no separate rooms
 for men, women, people with special needs, exposing particularly women and girls to GBV. Some schools in which
 displaced people are currently hosted have broken doors and windows and have inadequate lighting, further adding to
 GBV risks.

Response

- The Cluster has so far reached more than 65,000 people with emergency shelter or non-food items assistance. During the reporting period, the International Committee of the Red Cross commenced the distribution of 5,000 kits in Shire, while ZOA is distributing 2,500 kits in Wukro.
- There are currently 20 national, international NGOs and UN agencies operational across six zones in Tigray, three zones in Amhara and four zones in Afar. Partners are engaged with several life-saving activities, including the distribution of ES/NFI kits, cash-for-rent and cash-for-NFIs activities and the rehabilitation of communal centres.
- Partners are also on the ground in Tseada Emba, Adigrat, Adwa, Mekelle, Enderta and Zalambesa to conduct beneficiary selection.
- The sub-national Shelter Cluster, which was activated on 26 January in Mekelle, continues to hold weekly meetings every Tuesday and continues to improve data management.
- ES/NFI Cluster led a rapid assessment in Shire on 14 February.

⇔ Gaps

- Access continues to severely hinder the response, as some rural areas remain inaccessible to humanitarian actors.
- Funding is a pressing challenge—with a gap of 73 per cent of the total required. There is an urgent need to scale up
 the response to meet the existing critical needs of displaced people and guarantee a dignified relocation from
 schools to alternative sites.
- Operational constraints, including lack of communication and limited information, continue to pose challenges to the response.
- Inconsistent and constantly changing figures due to more people arriving in urban areas add to the difficulty in planning and response.



Food Security



Needs

- With the harvest and markets disrupted by the conflict, there are indications of hunger rising across Tigray. Most newly internally displaced families across the Region are seeking refuge with relatives and host communities, putting an incredible strain on their already stretched resources.
- Partners on the ground report serious concerns about poor targeting and, in some areas, food not reaching those in
 most need particularly in the rural areas, according to the latest ECC meeting on 19 February. These reports highlight
 the urgent need to strengthen the monitoring system. Insufficient distribution in IDP sites have also led to increased
 tensions among the displaced population, according to aid workers on the ground.

→ Response

- The National Disaster Risk Management Commission (NDRMC), the Joint Emergency Operation (JEOP) through its
 partner Relief Society of Tigray (REST), World Food Programme (WFP) and other partners are involved in the food
 response across Tigray, including in the Mai Ayni and Adi Harush refugee camps.
- WFP began its February food distribution to some 35,000 refugees in Mai Ayni and Adi Harush camps this week, which includes those who were recently relocated from Shimelba and Hitsats camps; the ration per person per month consists of 16 kilogrammes of cereals, 1.5 kilogrammes of pulses, 1 kilogramme of super cereal, 0.9 kilogrammes of vegetable oil and 0.15 kilogrammes of iodised salt. Super Cereal Plus (CSB++) is also allocated to all children aged between 6 and 23 months and pregnant and lactating women to prevent malnutrition, while ready-to-use food supplement (Supplementary Plumpy) is allocated for moderately malnourished children aged between 6 and 59 months for treatment.
- JEOP has reached at least 609,464 people with a full double ration. As of 21 February, JEOP's overall dispatch and distribution in Tigray Region reportedly reached 62 per cent and 41 per cent, respectively. JEOP reports to have assisted 84 per cent of the planned beneficiaries in Mekelle and 60 per cent in Shire. It has not yet dispatched food to two of the 12 planned woredas—Oflo and Raya Alamata—following NDRMC's communication that it is covering the needs. Regarding distribution, JEOP is reported to have distributed food in all but three woredas in Central Zone—Aheferom, Kola Temben and Were Lehele—due to access difficulties.
- WFP is planning to assist 1.1 million people in Tigray and has conveyed the need for more than \$107 million from
 donors to deliver assistance for six months, including through the blanket supplementary feeding and provision of
 secondary transport services to humanitarian partners.
- The Food Cluster is in the process of setting up a Sub-Working Group to provide guidance on monitoring of food response in the region and strengthen the food response. Considering reports of misuse of food assistance, strengthening the monitoring and accountability system is also of paramount importance.

|←>| Gaps

- Funding gap in the WFP pipeline remains a major challenge in the food response. Partners have also raised the need to ensure that the adequacy of the food basket and that a full basket is delivered.
- Communications challenges, particularly given that there has been extremely limited power in Mekelle since mid-February, pose significant challenges to the dispatch and distribution of food assistance. Partners report that maintaining contact with staff in remote areas has become even more difficult.
- Access constraints and insecurity continue to impede the delivery of assistance to certain woredas. At least nine
 woredas seven of them in the Central Zone–have not been reached since the beginning of the conflict,



Health



- Health-care services in Tigray are alarmingly limited, leaving hundreds of thousands of people, including those who
 are chronically ill and others who were injured during the fighting, without adequate access to essential medicines
 and basic services. Although the two referral hospitals in the region have resumed operations despite some
 limitations, only 3 of the 14 general hospitals and 5 of the 24 primary hospitals are fully functional, according to
 ongoing assessments by the Health Cluster. Further, of the 205 health facilities in Tigray, only 40 (22 per cent) are
 fully functional, while 36 (19 per cent) are partially functional. All centres, however, urgently need more medical
 supplies, drugs and equipment, according to World Health Organization (WHO).
- Child and maternal services have been drastically disrupted. Only 16 per cent of the health facilities are providing
 vaccination services while only 22 per cent are providing maternal services, such as antenatal care and birth delivery,
 according to health partners. Access to drugs also remains critically low at 28 per cent. Most woreda health offices
 are not yet functional, according to the Health Cluster.
- People living in overcrowded conditions in displacement centres face tremendous challenges. The rapid assessment
 conducted by the Bureau of Labour and Social Affairs (BoLSA) and humanitarians in displacement centres in Mekelle
 Town, for example, showed a high number of diarrheal diseases and women delivering in the camps, as no
 emergency services are provided during the night. Although free basic attention is being provided, displaced people
 face challenges to access medicines due to the lack of essential drugs in the hospitals

→ Response

- WHO and UNICEF are working with the Regional Health Bureau (RHB) to scale up mobile health and nutrition services, deploying Government health workers while hospitals and health centres are gradually restored.
- WHO continues to assess the status of health facilities in the region through its Health Resources and Services Availability Monitoring System (HeRAMS) and has so far assessed 205 out of 263 health facilities in Tigray.
- IOM, in collaboration with the Ministry of Women, Children and Youth Affairs and University of Gondar, conducted a mental health gap action programme (mhGAP) and psychosocial support mainstreaming training for government focal points, volunteers and implementing partners in Gondar. The training aimed to promote better consideration of

psychosocial support in emergency basic service provision and to advocate for the psychosocial rights of conflict-affected vulnerable women, children and youth.

- IOM continues to provide health services for displaced people in Dabat and Kebero Meda sites in Gondar. In the two
 camps, it conducted a total of 270 medical consultations and provided sexual and reproductive health (SRH) services
 to 10 antenatal care clients, while reaching 458 people with health promotion activities, focusing on antenatal care
 and delivery, and environmental and personal hygiene to prevent acute watery diarrhea, COVID-19 and other
 communicable diseases. In Dabat IDP site, 473 women between the ages 12 and 45 received UNFPA-donated health
 and hygiene kits.
- Meanwhile, in Kisanet and Ethio China School IDP sites in Mekelle, IOM conducted 385 consultations and reached
 719 people with health promotion activities. 11 additional clients received SRH services.
- Mothers and Children Multisectoral Development Organization (MCMDO) continues to provide emergency health response in 12 woredas through their MHNTs and has reached a total of 2,326 beneficiaries through primary healthcare services.
- International Medical Corps provided consultations and treatment for 774 adults and children under age 5, as well as
 delivery services to 4 women, during the third week of February. At least 185 people received MHPSS, and 126
 women in childbearing age received modern contraceptives. In addition, 13 boxes of reproductive health kits were
 distributed.
- The Emergency response MHNTs, supported by UNICEF grant, have been deployed to all projected *woredas* and have started supporting health facilities.
- UNICEF has a total of nine active MHNTs, of which two, through the RHB, started providing services in Laelay
 Maychew, Emba Alaje, Endamehoni and another two in Freweyni town. The MHNTs collectively delivered 747
 Expanded Programme on Immunization (EPI) services, and through its Out-Patient Therapeutic Program (OTP)
 service, provided 253 services to children under age 5, as well as 853 services to adults. They have also provided 130
 maternity services, as well as distributing PPEs for 60 health workers. In Shire, the MHNTs provided 247 medical
 consultations, as well as supporting the activation of two health centres in Aganesh and Omar.
- Plan International has completed start-up activities in Adi Arekay, Berhale and Aba Ala woredas and is currently conducting a baseline assessment.

⇔ Gaps

- The volatile security situation, access constraints and limited communications continue to hinder the response, including by disrupting the transportation of essential supplies. Access to remote *kebeles*, such as Eren, Betel, Beskia and Merew, is particularly difficult, and most services remain focused in major towns and along the main roads.
- Weak technical capacity of Government and partners on the ground continues to undermine a coordinated response, while the turnover of staff poses an additional challenge.
- While the two referral hospitals have resumed operations, the referral system is hindered by fees often charged at the next level of care.
- Abi Adi hospital remains occupied by the Ethiopian National Defense Force (ENDF), preventing up to 500,000 people from accessing health services, according to partners on the ground.



Nutrition



Needs

An alarming malnutrition situation is emerging across Tigray as partners conduct more screenings. A sample nutrition screening of 4,441 children under age 5 by MCMDO, GOAL Ethiopia and World Vision reported higher than emergency levels of global acute malnutrition (GAM) in all five *woredas* screened (Raya Azebo, Ofla, Tselemti, Enderta and Mekelle). The situation is particularly critical in Tselemti in North Western Zone, where almost every other child is malnourished. Severe acute malnutrition (SAM) prevalence rate is at 4.4 per cent in Ofla in Southern Zone, exceeding the critical level of 3 per cent, while Enderta in South Eastern Zone also reported close to the critical level at 2.7 per cent. Similarly, more than half of pregnant and lactating women in all five *woredas* were malnourished, and partners are concerned about the unfolding of an intergenerational cycle of nutrition in the Region, which can manifest as increased stillbirths, miscarriages, and risk of maternal and neonatal mortality.

Response

- In the third week of February, GOAL and International Relief Committee (IRC) screened a total of 1,620 children under age 5 in Enderta woreda in South Eastern Zone and Indasilassie town in North Western Zone. At least 57 of the screened children were identified as SAM and 222 as moderate acute malnutrition (MAM). Some 225 pregnant and lactating women were screened in Enderta woreda, and more than half (154) were identified as MAM.
- Partners continue with the blanket supplementary feeding programme (BSFP) in three *woredas* (Enderta, Raya Azeba and Hintalo Wejerat), reaching more than 14,252 people. So far, a total of 191 SAM admissions have been reported.
- About 1,800 cases of ready-to-use supplemental food, enough to meet the nutritional needs of 18,000 children for
 one month, reached Mekelle earlier this week for Samaritan's Purse's activities. Meanwhile, Concern Worldwide, IRC
 and Action Against Hunger are establishing response teams and prepositioning supplies.
- The sub-national nutrition Cluster continues to meet weekly, and the partners' mapping has been completed.

⇔ Gaps

- The collapse of the pre-existing systems is causing delays in both the implementation emergency protocols for the management of SAM and MAM cases in a continuum of care and the scale-up of Infant and Young Child Feeding in Emergencies (IYCF-E) activities, while MAM treatment supplies remain unavailable.
- Limited access and the volatile security situation continue to impede the response; in the past week, for example, BSFP activities were interrupted, while the establishment of several mobile health and nutrition teams (MHNT) in Central Zone was delayed due to security challenges, according to the Cluster.
- Lack of communications similarly complicate information-sharing on the constantly evolving needs and gaps.

CLUSTER STATUS (28 Feb 2021)





Needs

- Gross violations and abuses against civilians, such as forced displacement and returns, killings, abductions, sexual
 violence including against children, allegedly perpetrated by various parties to the conflict, have been reported since
 the beginning of the conflict.
- Reports of sexual violence are widespread across the region. While more than 100 rape survivors currently seeking
 medical care in several medical institutions, according to the Protection Cluster. These incidences are greatly underreported due to fear of stigma, discrimination and repercussion. Partners have also received anecdotal reports that
 GBV survivors who have reached out locally for community support were not able to access any GBV services. Given
 the stigma and shame surrounding GBV, survivors in rural and remote areas are less likely to access local or mobile
 clinics as they are less confidential. Further, since many areas in Tigray remain inaccessible, GBV survivors in these
 are not able to receive urgent and life-saving medical care, GBV case management or mental health and
 psychosocial support (MHPSS).
- Women and children displaced are at heightened risk of abuse and exploitation, while recent assessments in
 collective centres for displaced people in Mekelle, Adigrat and Shire showed that the severe lack of infrastructure
 leaves women and children exposed to a range of abuse, including GBV. In general, many are sheltering in unfinished
 or damaged building and most centres do not include separate spaces or latrines for women and men, doors or even
 windows. At least 90 unaccompanied and separated children are living in these three centres that were assessed.
- As of 18 February, 724 unaccompanied and separated children (UASC) were registered by the Bureau of Labour and Social Affairs (BoLSA) and protection partners in Mekelle, Adigrat and Axum towns. These children are at increased risk of GBV, as well as child labour, trafficking and exploitation.
- Reports of exclusion from food assistance are increasing. Partners are receiving anecdotal reports on alleged exclusion of female-headed households from food assistance unless their "male" members come.
- Unsolicited relocation of displaced people is also reported by protection actors on the ground. While advocacy by
 protection actors successfully halted the relocation of more than 30,000 IDPs from Axum University to an unused
 prison in Shire, it is critical that these advocacy efforts continue in order to ensure that a suitable location is
 identified, the displaced people are engaged and informed, and conditions for safe and dignified relocation are met.
- Overall, people affected by the conflict in Tigray are traumatized and still face high protection risks, and in need of
 urgent assistance, including psychological support. There is an immediate need for the government to hold its
 responsibility in terms of protection of civilians, restoration of law and order, and bringing perpetrators of human
 rights violations to account. Access to justice and protection of survivors and witnesses of violence are essential to
 attain favourable protection environment.

→ Response

- The Protection Cluster, with 16 partners on the ground, is planning to assist nearly 410,000 people, including 263,000 with general information, support and protection activities, 106,000 with prevention of gender-based violence (GBV) programmes, over 35,300 children with specific services for this group, and 4,565 people with housing, land and property activities.
- The Cluster, which meets weekly to ensure a coordinated response, finalized the referral pathway for GBV survivors.
 The referral pathway for GBV survivors has been shared during the Protection against Sexual Exploitation and Abuse (PSEA) network training and with the government MHPSS task team. CP and GBV partners are finalising the regional response plan, while service mapping of CP and GBV-related multi-sector services is ongoing.

- In the past week, the Protection Cluster, with 10 partners on the ground, reached an additional 12,927 people across 13 *woredas*, including through dignity kits distribution (7,317), case management and psychosocial support (22), and Child Protection (CP) and Gender-Based Violence (GBV) awareness raising programmes (5,588).
- In Shire, International Rescue Committee reached 1,000 displaced women and girls with dignity kits and awareness-raising activities, while UNFPA transported 3,600 dignity kits to Gondar in Amhara, as well as mapping GBV services across Gondar to facilitate the re-instatement of referral pathways for GBV survivors.
- UNFPA also trained 15 journalists and broadcasters in Amhara Region on ethical and safe reporting on GBV.
- A total of 145 displaced people in Mekelle received psychosocial support, while Mekelle University deployed 25
 MHPSS experts to Mekelle, Adigrat, Axum and Shire to provide a more organized and specialized support for children
 and women. Related, identification of particularly vulnerable people among the displaced population is underway, and
 6 people have received individual counselling.
- UNHCR, in coordination with other partners, has begun conducting observation/assessment missions in Maistebri and Shire.
- Ten additional partners are preparing to start providing Protection services during February and March across 18
 woredas, and this response plan will target 137,886 people with critical CP and GBV services.
- The Protection Cluster and the Food Cluster are developing a joint plan to mitigate the risk of food exclusion and use of food assistance as a means to abuse beneficiaries.
- Additional Protection actors are to start engaging in protection response utilizing the \$1.5 million CERF funding and
 the \$0.5 million EHF /SWAN funding in areas of protection monitoring, establishing and strengthening referral
 pathways for specialized service provisions in thematic areas of Child Protection, GBV and tailored support to
 persons with disabilities, targeting beneficiaries across the three regions of Tigray, Amhara and Afar. Priority locations
 are being identified.

⇔ Gaps

- Despite the gradual scale-up, the Protection response remains insufficiently resourced to meet the scale of the needs and identified targets.
- The delayed programming for protection interventions is hampering the efforts to provide emergency protection services and mitigate the risk of further exacerbation of the protection needs.
- Besides access constraints, the operating environment in Tigray is particularly challenging for protection actors given the sensitive thematic areas they cover.
- The deteriorating security situation and limited staffing continue to impede the response.

CLUSTER STATUS (28 Feb 2021)



Water, Sanitation and Hygiene (WASH)



Needs

- With access to water, hygiene and sanitation (WASH) services largely disrupted across Tigray, the population is at heightened risk of disease outbreaks, including water-borne diseases and COVID-19.
- COVID-19 services have stopped in Tigray and, according to WASH Cluster estimates, more than 300 motorized
 pumping systems are out of order due to lack of fuel, damages or looting. The situation is particularly dire in sites for
 internally displaced people, including those located the bordering areas in Amhara. A rapid assessment carried out in
 eight displacement centres in Mekelle reported a severe water shortage, people relying on contaminated sources, as
 well as poor hygiene conditions and open defecation due to the limited number of latrines available.
- Recent assessments also found Sheraro water supply system collapsed and pipeline damaged, while extensive
 looting of materials and electromechanical equipment, such as switchboards, generators, and spare parts, had taken
 place across various locations.

Response

- More than 280,000 people have received water assistance, with an additional 38,400 people reached with water trucking since last week. The Cluster has deployed 58 trucks to provide water services.
- An additional 7,200 people in Mekelle, Wukro, Adigrat, Adwa, Axum and Shire have been reached with key hygiene
 and sanitation kits.
- Cluster coordination structure has been established in Mekelle, with meetings taking place weekly.
- The WASH Cluster undertook rapid assessments across various locations, including Sheraro, Shire, Edaga-hamus, Adigrat, Wukro, Axum, Rama and Fireweini.

⇔ Gaps

- Partners are still unable to meet the increasing demand for water services across the region due to shortage of fuel
 for deployed water trucks and engine generators. In addition, only 58 of the 280 water trucks required are available,
 while fuel shortages are also disrupting the operation of water-pumps. Only 11 per cent of the targeted population
 have been reached through emergency latrine and bathing and hand-washing facilities, while only 34 per cent
 received emergency hygiene and sanitation items.
- Partners have reported a shortage of vehicles and water purification chemicals, such as chlorine and aqua tabs.
- The security situation continues to disrupt efforts to conduct assessment and provide maintenance in certain areas, including Wukro, Abreha, Weatsbeha, Shire and Mai-dimu.
- Water utility workers have not received their salaries for four months, affecting water provision in many locations.
 Further, due to budget shortage, partners are not able to purchase electromechanical spare parts to maintain water systems.

CLUSTER STATUS (28 Feb 2021)



Logistics



Needs

- While the Logistics Cluster has so far transported over 300 million tons of humanitarian cargo on behalf of its
 partners along the main routes into Tigray, primarily Gonder Mai Tsebri Shire routes, and from Kombolcha to
 Mekelle, secondary routes have yet to be serviced due to lack of requests from partners for delivering of cargo along
 these routes. Additional food operators are needed to complement ongoing efforts to deliver aid to areas that have
 not been reached for over three months.
- The supply of commercial trucks is expected to be further limited during the agricultural season—March to September—, according to the Logistics Cluster Partners. Overall, increased capacity to mobilize humanitarian supplies and personnel, particularly to rural areas of Tigray, is needed to allow partners to scale up the response.

Response

- The Logistics Cluster is increasing capacity and has now established six storage capacities and common transport from Addis Ababa, Adama, Kombulcha, Semera, Gondar, and Mekelle.
- Further, a 4,000 square metres facility with a 1,600 square metres warehouse has been established in Mekelle and is
 operational as of this week. In the coming month, the Cluster will be working to identify common storage for partners
 in Shire.
- Since early November, the Logistics Cluster has facilitated 11 convoys from logistics hubs into Tigray (Shire, Mai Tseri and Mekelle). In order to respond to increased demand, WFP is increasing its fleet size from the current 23 trucks to over 100 fleet trucks by late March to support WFP and Logistics Cluster operations.
- The Cluster currently supports 31 partners in the Tigray response and is on standby to facilitate access to a dedicated WFP fleet to support the humanitarian community, should commercial transport become unavailable.
- The Cluster has submitted 45 cargo clearance requests to NDRMC and Agency for Refugee and Returnee Affairs.

⇔ Gaps

• Delays in clearance for humanitarian staff, together with ongoing security issues, are the main challenges of the response.

COORDINATION (4 Feb 2021)

REGULAR MEETINGS

The Tigray Emergency Coordination Center (ECC) meeting is convening weekly in Mekelle. The National Disaster Risk Management Commission has deployed senior staff to support the initial set up of coordination mechanisms. On 18 January, the Deputy Humanitarian Coordinator and a OCHA team were also deployed to Mekelle to support partners coordination and the ECC.

The United Nations and partners continue to engage at the highest levels with the Government of Ethiopia to coordinate operational details and advocate for access for humanitarian workers and supplies to respond to people affected by the conflict in Tigray.

VISUAL (22 Feb 2021)

Funding Update



ETHIOPIA

Northern Ethiopia - Humanitarian Response Plan Funding Update

As of 16 February 2020

FUNDING REQUIREMENTS (in million US\$)









116.5m Requirements 82.8m Total funding

33.9m Unmet requirements

Funding requirements by sector (in million US\$)







¹ CERF contributions in 2020 come from 55 member states and observers, 3 international organizations, regional and local authorities, and 2 private sector and civil society organizations. For more information, see https://cerf.un.org/our-donors/contributions.

¹ EHF made an allocation for Tigray response through a reserve window, using funding received from the United Kingdom, Germany, Denmark, Canada and Norway, and also carry-over resources from other donors of the EHF incudding Ireland, United States, Sweden, Swithzerland, New Zealand and Republic of Korea.

The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nation:
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