URGENT NEED FOR INTEGRATED EMERGENCY RESPONSE IN 141 OUTBREAK AND UNDERNUTRITION AFFECTED WOREDAS OF ETHIOPIA IN 2020







Ethiopian population is currently facing new crises while past crises are not yet resolved. The recurrent food & undernutrition crises and increased frequency of measles and cholera outbreaks in the course of 2019 are now further exacerbated by desert locust infestations and upcoming COVID-19 pandemic. The complexification of the emergency needs requires to bring together our integrated efforts and expertise to address them.

Ethiopia Health Cluster, WASH Cluster and Emergency Nutrition Coordination Unit established Health, WASH and Nutrition Technical Woking Group (HWN TWG) to further boost joint response in 141 woreda and IDP camps of Ethiopia by implementing minimum multi-sectoral response package.

OUR ASKS

- The HWN TWG asks the EHCT to support our initiative by providing more visibility and attention to this integrated initiative and request an opportunity to provide periodic updates at EHCT meetings.
- The HWN TWG asks the Government of Ethiopia, especially NDRMC, MOH, EPHI and MOWIE, to improve the joint Health, WASH and Nutrition collaboration, to foster joint system strengthening and data sharing with humanitarian actors.
- The HWN TWG asks Donors, including EHF and all the Rapid Response Mechanisms, to prioritise multisectoral funding in priority woredas and consider the multi-sectoral approach as an example of good practice.
- The HWN TWG asks implementing partners to include the pilot of the Health WASH and Nutrition minimum package in their future proposals and project design. Partners are encouraged to work as a consortium to jointly implement the full package. Where it's not possible to implement the full minimum package, partners are requested to include as many elements of the package as possible.

THE VICIOUS CYCLE OF UNDERNUTRITION, INFECTIOUS DISEASES AND WASH CONDITIONS

Globally, more than five million children die before reaching their fifth birthday. Preventable diseases account for more than one third of the child deaths and nutrition related underlying factors are observed in about 45% of global child mortality¹.

Although child mortality reached some of its lowest levels since 1990, Ethiopia is among the 5 countries accounting for half of all under-five deaths occurred in 2018 (together with India, Nigeria, Pakistan and the Democratic Republic of the Congo). New-born mortality accounts for half of under-five deaths globally while in Ethiopia it is around 70% (39 out of 55 deaths per 1000 live births).

In locations with outbreaks of infectious diseases and where the nutrition situation is already poor, the statistics may be worse. Acute malnutrition multiplies the risk of death due to measles by 2.5 fold², while vaccination and exclusive breastfeeding are confirmed to be protective factors. The condition of Severe Acute Malnutrition (SAM) and lack of access to cholera treatment facilities (distance, health seeking behaviour)³ are linked with increased case fatality rates while improved access to health, WASH and nutrition services can critically reduce infection transmission and prevent death. **Preventing and treating infection and undernutrition is only possible through a simultaneous provision of multi-sectoral services in a synergetic and coordinated manner.**

Currently the Ethiopian population faces a deteriorating food insecurity situation (high market prices, harvest production losses due to erratic rainfall and/or crop pest infestation)⁴ that is further exacerbated by the consequences of the desert locust (DL) infestation. This will continue to erode livelihoods including those of pastoralists whose coping strategies have been depleted by several years of droughts and/or prolonged dry spell.

The country is also facing measles and cholera outbreaks and a number of IDP crises are ongoing in several regions⁵. These further exacerbate the situation, by putting rural and displaced communities with weaker access to quality healthcare services in increased life-threatening conditions. Outbreaks are often resulting in further increase of SAM incidence while the fatal outcome of both measles and cholera can be exacerbated by malnutrition. This can have dramatic consequences on child mortality⁶.

¹ 2019 Levels and trends in child mortality. WHO, UNICEF, Word Bank and UN-DESA Inter-agency group for child mortality estimations.

² Risk factors for measles death: Kyegegwa District, western Uganda, February–September, 2015. Richardson Mafigiri et all.

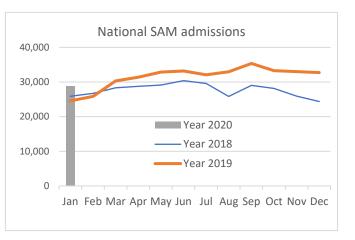
³ Geographic Distribution and Mortality Risk Factors during the Cholera Outbreak in a Rural Region of Haiti, 2010-2011. Anne-Laure Page, Iza Ciglenecki, Ernest Robert Jasmin et all.

⁴ A number of reports and analysis highlight this dire situation including the 2020 January 2020 Hotspot woreda classification.

⁵ OCHA Humanitarian concerns map, Ethiopia, February 2020.

⁶ Malnutrition, measles, mortality, and the humanitarian response during a famine in Ethiopia. Salama P, Assefa F, Talley L et all.

As of end of January 2020, SAM admissions nationwide were 17% higher than admissions observed at the same period last year⁷ (see graph on National SAM admissions). The results of Nutrition surveys conducted last year pointed at locations where the prevalence of wasting is very high / above the 15% emergency threshold notably in Shabelle and Liban zones of Somali region⁸. Nutrition surveys undertaken



more recently in Somali region continue to show a critical nutrition situation notably in Ararso woreda (prevalence of GAM was 19.5% and SAM prevalence was 2.6%) in February 2020.

Given the current COVID-19 pandemic, needs across all three sectors are expected to increase as movement is restricted, livelihood opportunities decrease, and prices of food and basic necessities inflate. An effective emergency response will require the collaboration of all three sectors at both the facility and community levels in order to maximize impact:

- The health system will be supported to detect and treat sick children, women, and men
- WASH activities will ensure availability of clean water and supplies to improve hygiene and sanitation
- Nutrition interventions will continue to target malnourished children, children in need of Infant and Young Child Feeding practices support, and malnourished pregnant and lactating women in order to build their immune response to diseases, including COVID-19
- All sectors will enhance IPC, water quality surveillance and treatment, and community health, nutrition, and hygiene promotion

The absence of any one of these sectors will weaken the COVID-19 response, place beneficiaries and staff at risk, and worsen the humanitarian consequences of the pandemic.

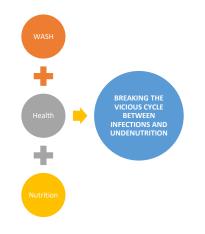
In order to increase their efficiency and further prevent infection and malnutrition, integration amongst **Health, WASH and Nutrition actors in Ethiopia** is urgently needed. Hence, to facilitate the process and launch more structured collaboration, the three clusters are currently working to make integration happen.

⁷ ENCU synopsis March 2020

⁸ Nutrition surveys were conducted by AAH, Concern and RENCU

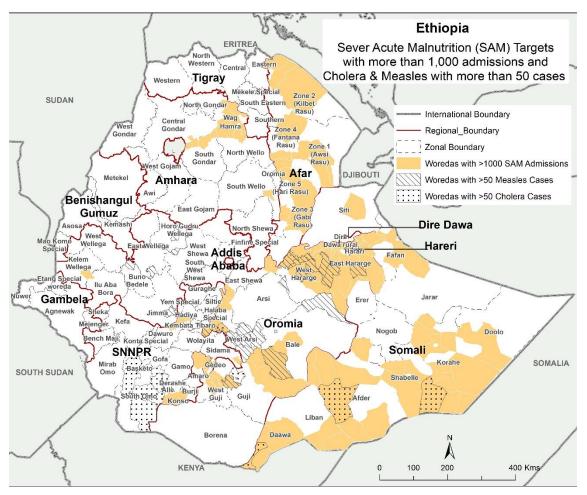
OUR COMMON VISION

The WASH, Health and Emergency Nutrition Coordination Unit (ENCU) converge efforts to break the vicious cycle between infection and undernutrition by piloting an integrated approach.



OUR COMMON PRIORITISATION

In the context of limited resources, WASH and Health Clusters and ENCU will strengthen their presence in woreda's affected simultaneously by **high acute malnutrition, cholera and measles outbreaks, and low WASH conditions**. Our priority mapping considers all woredas with more than 1,000 new SAM admissions yearly and/or more than 50 new cholera cases and/or with more than 50 new measles cases (See Map below and the detailed list of prioritized woreda in Annex 1).



OUR MULTI-SECTORAL RESPONSE PACKAGE

The three clusters will collaboratively work at reinforcing **the coverage and the quality** of WASH, Health and Nutrition minimum package of activities at both health facilities and community level in 2020. The goal is to pilot the implementation of the integrated minimum package in at least 10 high priority woredas.

To be adjusted for COVID-19 response based on each clusters' specific guidance.)
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	HEALTH	WASH	NUTRITION		
HEALTH FACILITY HOSPITAL, HEALTH CENTER, HEALTH POST, MHNT	 Vaccination; Micronutrients supplementation; LLIN distribution and IPT for pregnant women; Integrated management of Childhood Illnesses; Disease surveillance, early warning and response; 	 Water supply with adequate storage; Provision of Point of Use water treatment; Rehabilitation and/or construction of sexsegregated latrines (trench latrine in CTC); Provision of cleaning tools, potties and/or trowel/spade for faces collection & disposal; Maintenance and/or installation of handwashing station; HF waste management; Provide mats for safe playing spaces; WASH NFI kit to households with SAM memilian Provision of water treatment chemical upor days and discharge of MAM for 30 days; Hygiene kit (sanitary pads, underwear, potty 	 Routine nutrition screening and management of SAM/MAM treatment (both inpatient and outpatient care); IYCF practices (including during cholera and measles outbreaks) with respect to IFE guidance, BFHI and BMS code; BCC to prevent malnutrition and infection*; 		
EALTH OSPIT	paper); Hygiene promotion and adequate water treatment visit to SAM households.				
II		IPC and Water quality surveillance and treatme	nt**		
COMMUNITY AND HOUSEHOLDS	 Vaccination; IMCl; Clean delivery kit distribution to pregnant women ***; Health and Hygiene promotion & education; Disease surveillance, early warning and response; 	 Train HEWs and Community Volunteers on nutrition and health sensitive WASH practices; Establishment/strengthening of WASH facilities management committees; IEC materials and Hygiene promotion teaching aid; Rehabilitation of water facilities or water trucking; Chlorination of water sources Sanitation and hygiene promotion (C4D) 	 Home visits to ensure compliance to SAM and MAM management protocol Post SAM/MAM treatment follow-up visit Promotion, protection and support to IYCF practices BCC to prevent malnutrition and infection 		
<u> </u>		Water quality surveillance and treatment			

*Including Nutrition counselling, Safe food preparation, WASH and faecal contamination, Health seeking behaviours (ANC/PNC, caring for a sick child, immunization), Growth monitoring and promotion.

**Activity to be maximised through all sectors under the leadership of Health Cluster.

*** In mass population displacement

The sectoral activities included in the minimum package might need to be adjusted to the sectorial recommendations with regards to **COVID-19** as per sectoral recommendations.

OUR GOVERNANCE

The three clusters have engaged to work together by establishing a **Health, Nutrition and WASH Technical Working Group**. The Terms of reference of the group and the membership were endorsed in January 2020.

NEXT STEPS

Further in 2020, the technical working group will work towards:

- 1. Developing Health, WASH and Nutrition integration one-year road map and action plan.
- 2. Establishing joint monitoring of the minimum multi-sectoral package.
- 3. Cascading and disseminating the integrated approach from the national to sub-national level to ensure implementation.
- 4. Preparing advocacy messages based on in country lesson learnt/research findings or/and international experience.

HNO2020 Pcode	Region	Zone	Woreda
ET020109	Afar	Zone 1 (Awsi Rasu)	Adaa'r
ET020103	Afar	Zone 1 (Awsi Rasu)	Asayita
ET020101	Afar	Zone 1 (Awsi Rasu)	Dubti
ET020107	Afar	Zone 1 (Awsi Rasu)	Dubti Town
ET020207	Afar	Zone 2 (Kilbet Rasu)	Afdera
ET020205	Afar	Zone 2 (Kilbet Rasu)	Berahile
ET020206	Afar	Zone 2 (Kilbet Rasu)	Dalol
ET020305	Afar	Zone 3 (Gabi Rasu)	Bure Mudaytu/Gelealo
ET020303	Afar	Zone 3 (Gabi Rasu)	Gewane
ET020402	Afar	Zone 4 (Fantana Rasu)	Ewa
ET020403	Afar	Zone 4 (Fantana Rasu)	Teru
ET020106	Afar	Zone 5 (Hari Rasu)	Chifra
ET020505	Afar	Zone 5 (Hari Rasu)	Hadelela
ET031001	Amhara	Oromia	Dewa Cheffa
ET030201	Amhara	South Gondar	Ebenat
ET030202	Amhara	South Gondar	Libokemekem
ET030805	Amhara	Wag Hamra	Abergele
ET030803	Amhara	Wag Hamra	Dehana
ET030804	Amhara	Wag Hamra	Gaz Gibla
ET030802	Amhara	Wag Hamra	Sekota
ET030801	Amhara	Wag Hamra	Zequala
ET041114	Oromia	Bale	Berbere
ET041116	Oromia	Bale	Goro (Bale)
ET041111	Oromia	Bale	Harena Buluk
ET041113	Oromia	Bale	Meda Welabu
ET041112	Oromia	Bale	Mena (Bale)
ET041004	Oromia	East Hararge	Babile (Oromia)
ET041013	Oromia	East Hararge	Bedeno
ET041015	Oromia	East Hararge	Chinaksen
ET041011	Oromia	East Hararge	Deder
ET041005	Oromia	East Hararge	Fedis
ET041016	Oromia	East Hararge	Girawa
ET041017	Oromia	East Hararge	Golo Oda
ET041010	Oromia	East Hararge	Goro Gutu
ET041089	Oromia	East Hararge	Goro Muti
ET041003	Oromia	East Hararge	Gursum (Oromia)
ET041006	Oromia	East Hararge	Haro Maya
ET041019	Oromia	East Hararge	Haromaya Town
ET041002	Oromia	East Hararge	Jarso (East Hararghe)
ET041008	Oromia	East Hararge	Kersa (East Hararge)
ET041001	Oromia	East Hararge	Kombolcha
ET041098	Oromia	East Hararge	Kumbi
ET041012	Oromia	East Hararge	Melka Balo

Annex 1. List of targeted Woreda's, i.e., woredas with > 1,000 SAM admissions and high incidence of measles and/ or high incidence of cholera (>50 as per end of Feb data)

HNO2020 Pcode	Region	Zone	Woreda
ET041009	Oromia	East Hararge	Meta
ET041018	Oromia	East Hararge	Meyu Muleke
ET041014	Oromia	East Hararge	Midhaga Tola
ET040708	Oromia	East Shewa	Adama Tulu Jido Kombolcha
ET040707	Oromia	East Shewa	Dugda
ET040701	Oromia	East Shewa	Fentale
ET041405	Oromia	Guji	Odo Shakiso
ET041801	Oromia	Kelem Wellega	Hawa Galan
ET041702	Oromia	West Arsi	Shala
ET041712	Oromia	West Arsi	Shashemene Zuria
ET041701	Oromia	West Arsi	Siraro
ET041513	Oromia	West Guji	Abaya
ET041596	Oromia	West Guji	Birbirsa Kojowa
ET041501	Oromia	West Guji	Bule Hora
ET041509	Oromia	West Guji	Hambela Wamena
ET041502	Oromia	West Guji	Kercha
ET040910	Oromia	West Hararge	Boke
ET040998	Oromia	West Hararge	Burqua Dhintu
ET040913	Oromia	West Hararge	Chiro Zuria
ET040902	Oromia	West Hararge	Doba
ET040912	Oromia	West Hararge	Gemechis
ET040907	Oromia	West Hararge	Goba Koricha
ET040991	Oromia	West Hararge	Gumbi Bordede
ET040908	Oromia	West Hararge	Habro
ET040911	Oromia	West Hararge	Kuni
ET040904	Oromia	West Hararge	Mesela
ET040901	Oromia	West Hararge	Mieso
ET040903	Oromia	West Hararge	Tulo (Oromia)
ET050807	Somali	Afder	Barey
ET050802	Somali	Afder	Charati/Weyib
ET050808	Somali	Afder	Dolobay
ET050804	Somali	Afder	Elkare/Serer
ET051104	Somali	Daawa	Hudet
ET051103	Somali	Daawa	Moyale (Somali)
ET051187	Somali	Daawa	Mubarek
ET051198	Somali	Daawa	Qada Duma
ET050704	Somali	Doolo	Warder
ET050408	Somali	Erer	Meyumuluka
ET050205	Somali	Fafan	Aw-bare
ET050203	Somali	Fafan	Babile (Somali)
ET050290	Somali	Fafan	Goljano
ET050202	Somali	Fafan	Gursum (Somali)
ET050207	Somali	Fafan	Harshin
ET050206	Somali	Fafan	Kebribeyah
ET050283	Somali	Fafan	Tuliguled

HNO2020 Pcode	Region	Zone	Woreda
ET050599	Somali	Korahe	Bodaley
ET050504	Somali	Korahe	Debeweyin
ET050597	Somali	Korahe	Higloley
ET050502	Somali	Korahe	Kebridehar
ET050595	Somali	Korahe	Kudunbur/Gogolo
ET050596	Somali	Korahe	Lasdhankayre
ET050501	Somali	Korahe	Shekosh
ET050503	Somali	Korahe	Shilabo
ET050999	Somali	Liban	Bokolmayo
ET050902	Somali	Liban	Dolo Odo
ET050903	Somali	Liban	Goro Baqaqsa
ET050904	Somali	Liban	Guradamole
ET050602	Somali	Shabelle	Adadle
ET050608	Somali	Shabelle	Berocano
ET050601	Somali	Shabelle	East Imi
ET050607	Somali	Shabelle	Ferfer
ET050604	Somali	Shabelle	Gode
ET050605	Somali	Shabelle	Kelafo
ET050606	Somali	Shabelle	Mustahil
ET050106	Somali	Siti	Hadhagala
ET070206	SNNP	Hadiya	Soro
ET070409	SNNP	Sidama	Aroresa
ET070501	SNNP	Gedeo	Wenago
ET070502	SNNP	Gedeo	Yirgachefe
ET070503	SNNP	Gedeo	Kochere
ET070504	SNNP	Gedeo	Bule
ET070506	SNNP	Gedeo	Gedeb
ET071012	SNNP	Gamo	Kemba Town
ET071303	SNNP	Konso	Kena /Karat Zuria
ET071704	SNNP	Dawuro	Gena
ET040893	Oromia	Arsi	Shanan Kolu
ET041107	Oromia	Bale	Lega Hidha
ET041623	Oromia	Buno Bedele	Chewaka
ET040215	Oromia	East Wollega	Nunu Kumba
ET041905	Oromia	Horo Guduru Wollega	Abay Choman
ET041907	Oromia	Horo Guduru Wollega	Jimma Rare
ET040411	Oromia	Jimma	Omo Nada
ET041119	Oromia	Robe Town	Robe Town
ET041711	Oromia	Shashemene Town	Shashamane Town
ET041710	Oromia	West Arsi	Adaba
ET041707	Oromia	West Arsi	Dodola
ET041706	Oromia	West Arsi	Gadab-Hasasa
ET041704	Oromia	West Arsi	Kofale
ET041709	Oromia	West Arsi	Nansabo
ET041403	Oromia	Guji	Adola Rede

HNO2020 Pcode	Region	Zone	Woreda
ET041711	Oromia	Shashamane Town	Shashemene
ET071018	SNNP	Gamo	Garda Martha
ET071504	SNNP	Gofa	Uba Debretsehay
ET070705	SNNP	South Omo	Bena Tsemay
ET070704	SNNP	South Omo	Hamer
ET070707	SNNP	South Omo	Malie
ET070701	SNNP	South Omo	Salamago