This document is dedicated to the affected communities across Ethiopia, whose empathy and hospitality as the first responders in emergencies continue to be a source of inspiration for us all.

About

This document is consolidated by OCHA on behalf of the Humanitarian Country Team and partners. It provides a shared understanding of the crisis, including the most pressing humanitarian needs and the estimated number of people who need assistance. It represents a consolidated evidence base and helps inform joint strategic response planning.

PHOTO ON COVER
Melka Soda Woreda, West Guji Zone, Oromia region, Ethiopia, Sara. Photo: OCHA/2020/Jordi Casafont

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OCHA

OCHA coordinates humanitarian action to ensure crisis-affected people receive the assistance and protection they need. It works to overcome obstacles that impede humanitarian assistance from reaching people affected by crises, and provides leadership in mobilizing assistance and resources on behalf of the humanitarian system.

unocha.org/ethiopia

Humanitarian Response

Humanitarian Response aims to be the central website for Information Management tools and services, enabling information exchange between clusters and IASC members operating within a protracted or sudden onset crisis.

humanitarianresponse.info/en/operations/ethiopia

Humanitarian InSight

Humanitarian InSight supports decision-makers by giving them access to key humanitarian data. It provides the latest verified information on needs and delivery of the humanitarian response as well as financial contributions.

hum-insight.info/plan/936

Financial Tracking Service (FTS)

The Financial Tracking Service (FTS) is the primary provider of continuously updated data on global humanitarian funding, and is a major contributor to strategic decision making by highlighting gaps and priorities, thus contributing to effective, efficient and principled humanitarian assistance.

fts.unocha.org
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## Summary of Humanitarian Needs and Key Findings

### Current figures January – March

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<thead>
<tr>
<th>People in Need</th>
<th>Women*</th>
<th>Children</th>
<th>With Disability</th>
</tr>
</thead>
<tbody>
<tr>
<td>23.5M</td>
<td>24%</td>
<td>53%</td>
<td>15%</td>
</tr>
</tbody>
</table>

### Projected figures (2021)

<table>
<thead>
<tr>
<th>People in Need (Apr-Jun)</th>
<th>People in Need (Jul-Sep)</th>
<th>People in Need (Oct-Dec)</th>
</tr>
</thead>
<tbody>
<tr>
<td>23.8M</td>
<td>23.8M</td>
<td>21.7M</td>
</tr>
</tbody>
</table>

### CHINAKSEN WOREDA/OROMIA REGION, ETHIOPIA

Rawda Mohammed stands in front of her damaged school in Chinaksen woreda. Rawda was in grade four but now out of school because her school is badly damaged by conflict.

Photo: UNICEF/2020/ Nahom Tesfaye

* includes all women over 18 years of age
### By Region

<table>
<thead>
<tr>
<th>REGION</th>
<th>PEOPLE IN NEED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Addis Ababa</td>
<td>49k</td>
</tr>
<tr>
<td>Afar</td>
<td>1.0M</td>
</tr>
<tr>
<td>Amhara</td>
<td>3.4M</td>
</tr>
<tr>
<td>Benishangul Gumuz</td>
<td>317k</td>
</tr>
<tr>
<td>Dire Dawa</td>
<td>65k</td>
</tr>
<tr>
<td>Gambela</td>
<td>90k</td>
</tr>
<tr>
<td>Harari</td>
<td>41k</td>
</tr>
<tr>
<td>Oromia</td>
<td>6.7M</td>
</tr>
<tr>
<td>Sidama</td>
<td>741k</td>
</tr>
<tr>
<td>SNNP</td>
<td>2.8M</td>
</tr>
<tr>
<td>Somali</td>
<td>3.8M</td>
</tr>
<tr>
<td>Tigray</td>
<td>4.5M</td>
</tr>
</tbody>
</table>

### By Population Groups

<table>
<thead>
<tr>
<th>POPULATION GROUP</th>
<th>PEOPLE IN NEED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internally displaced people</td>
<td>2.7M</td>
</tr>
<tr>
<td>IDP returnees</td>
<td>1.3M</td>
</tr>
<tr>
<td>General non-displaced population</td>
<td>19.5M</td>
</tr>
</tbody>
</table>

### By Age

<table>
<thead>
<tr>
<th>AGE</th>
<th>PEOPLE IN NEED</th>
<th>% PIN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children (0 - 17)</td>
<td>12.4M</td>
<td>53%</td>
</tr>
<tr>
<td>Adults (18 - 59)</td>
<td>9.8M</td>
<td>42%</td>
</tr>
<tr>
<td>older persons (60+)</td>
<td>1.3M</td>
<td>6%</td>
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</table>

### With Disability

<table>
<thead>
<tr>
<th>AGE</th>
<th>PEOPLE IN NEED</th>
<th>% PIN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Persons with disabilities</td>
<td>3.4M</td>
<td>15%</td>
</tr>
</tbody>
</table>
Context, shocks, and impact

Ongoing conflict, desert locust invasion, recurrent climatic shocks such as floods and droughts, and socioeconomic impact of COVID-19 are the key drivers of humanitarian needs in Ethiopia. Amidst the political transition, armed conflict and community violence remains a critical concern across Ethiopia, from Benishangul Gumuz, to Oromia, to Tigray. Heightened competition over resources due to pressures from climatic shocks, COVID-19 containment measures, and desert locust infestation in certain areas, create further inter-communal tension, violence, and displacement.

Of an estimated 2.7 million people currently internally displaced in Ethiopia, 1 million of which occurred in 2020, approximately 68 per cent were displaced by conflict, underlining the rapidly evolving protection crisis in Ethiopia.

Ethiopia is also experiencing its worst desert locust outbreak in 25 years, which exacerbates an already alarming food security and nutrition situation. The desert locust infestation has so far damaged 365,015 hectares of cropland across multiple regions, devastating crops and livelihoods in at least 76 woredas. The 13.2 per cent increase in admissions for Severe Acute Malnutrition (SAM) treatment reflects a rapidly deteriorating nutrition situation. Frequent flash floods and droughts, together with measles and cholera outbreaks, place people at further risk.

The COVID-19 pandemic and its containment measures worsened a dire humanitarian situation, with an estimated loss of up to 2.4 million jobs. As a result, 31 million people were estimated to be living below the poverty line in 2020, up from 26 million people in 2019. Women, who had comprised a large majority in the hard-hit tourism and hospitality sector, have been disproportionately affected by not only the economic crisis, but also by related protection concerns, including gender-based violence, which has seen an exponential rise since April 2020.

Evolution of Needs 2021

In the first three months of 2021, 23.5 million people are estimated to need urgent humanitarian assistance, yet another increase from 19 million at the end of 2020. The crippling socioeconomic impacts of COVID-19 are expected to persist into 2021. Furthermore, while ongoing insecurity both in and beyond Tigray will continue to severely undermine the availability and access to food and other basic goods and services, the desert locust upsurge is most likely to persist into 2021 with incidences of swarms causing damage to crops and pasture despite concerted control efforts. Predicted La Niña conditions and below-average rainfall particularly in the South and South-Eastern parts of the country also threaten to exacerbate food insecurity and other humanitarian needs, in addition to increasing the concern for unrest as communities compete for even more limited water resources.

While an estimated 23.5 million people are in humanitarian need in the first quarter of 2021, risk analysis and corresponding projections of needs indicate that this number is expected to rise slightly in the second and third quarters (23.8 million) before it reduces to 21.7 million in the last quarter of 2021.

Scope of Analysis

The 2021 Humanitarian Needs Overview covers humanitarian needs across all 1,042 woredas in Ethiopia without geographic limitation or focus. The analysis was conducted at the woreda-level, and national, zonal and regional-level figures in the document are the aggregates of relevant woreda-level results.

The analysis in this document excludes refugees hosted in Ethiopia, whose needs and particular vulnerabilities are assessed through the Ethiopia Country Refugee Response Plan.
Estimated number of people in need

TOTAL POPULATION

103.7M

PEOPLE IN NEED

23.5M

BY SECTOR

AGRICULTURE 13.0M
FOOD 13.7M
PROTECTION 5.3M
EDUCATION 8.5M
HEALTH 8.8M
WASH 10.1M
ES/NFI 4.5M
NUTRITION 7.1M

BY AGE & SEX

CHILDREN <18 YEARS 12.4M
ADULT 18-59 YEARS 9.8M
ELDERLY >60 YEARS 1.3M

FEMALE 50.2%
MALE 49.8%
Humanitarian Conditions, Severity and People in Need

The multiple shocks, while far-reaching in their impacts, affect various population groups in different ways with respect to their physical and mental wellbeing, living standards and coping mechanisms.

Internally Displaced Persons (IDPs) are amongst the groups that are hardest hit by the humanitarian situation in Ethiopia. An alarming 56 per cent of woredas (220 out of 395) hosting IDPs face ‘extreme’ humanitarian conditions, with many of these woredas located in Oromia (64), Somali (62), and Tigray (39). Limited Water, Sanitation and Hygiene (WASH) facilities — only 31 per cent of IDPs have access to functioning latrines — increase the risk of disease outbreaks, in addition to visible WASH and health needs. Women and girls who travel long distances to reach WASH facilities or practice open defecation, along with older persons and persons with disabilities (PWD), are particularly exposed to heightened protection risks, including Gender Based Violence (GBV), due to poor safety and security measures; for example, 83 per cent of woredas where IDP and returnees reside are reported to have no or inadequate lighting in communal spaces. Further, 58 per cent of the IDP population are children, of whom 21,659 are Unaccompanied and Separated Children (UASC) at particular risk of child labor, child trafficking and sexual exploitation and abuse (SEA). Hazardous child labor is prevalent in Ethiopia, with staggering 7 per cent of IDP children (predominantly in Tigray, Oromia and Somali) involved in exploitative and hazardous forms of child labor. Of particular concern, repeated disasters and protracted displacement erode coping capacities, forcing more people to adopt negative coping mechanisms such as child labor and unsafe shelter conditions.

Additionally, IDP returnees who have returned to their area of origin face heightened needs and unique challenges, and 68 per cent of woredas (78 out of 115) where IDP returnees reside are under ‘extreme’ (severity 4) humanitarian conditions. Often lacking legal documentation, returnees are exposed to additional risks, including movement restrictions and are limited in their access to safe and adequate shelter, education, health and at times even humanitarian assistance. Returnees face particularly acute water shortages, with only 25 per cent having access to improved water sources and 8 per cent to at least 15 liters of water per day. This, again coupled with severely constrained access to functioning latrines, leads to dire living conditions and heightened risk of disease outbreaks.

Children across Ethiopia have been severely impacted by the humanitarian situation, particularly those whose nutrition status has been compromised. The deteriorating food security situation due to constrained access to markets and high food prices have exacerbated the already critical nutrition situation. SAM admissions reached unprecedented levels in 2020; rural areas in Oromia and Somali Regions have the highest rates of malnutrition, with Oromia accounting for nearly 40 per cent of the national SAM cases. With a national prevalence of anemia among children at 56 per cent, stunting rates in Afar, Amhara and Tigray Regions exceed 40 per cent. As the food and nutrition situation deteriorates, children will be increasingly subject to negative coping mechanisms, including early marriage, school drop-outs and decreased meal sizes, as witnessed during the period that followed the first cases of COVID-19. Children are also particularly vulnerable to different forms of GBV, including domestic violence, transactional sex and other forms of SEA.

Returning migrants also face severe humanitarian challenges, as essential goods and services, from food, to Non-Food Items (NFIs), to health assistance, are seldom provided at temporary shelters at/ close to Points of Entry (PoE), and 73 per cent of migrants are reportedly in need of improved access to WASH services, including clean water. Of the more than 44,466 migrants who returned to Ethiopia between April and December 2020, many suffer from psychological and physical trauma from experiences of physical abuse, sleep deprivation, illegal detention, forced labor and wage theft and need urgent mental health and psychological support. The 1,776 UASC among the returning migrants gives rise to serious protection concerns, particularly given that the majority lack access to child protection services. All 28 “hotspot” woredas for returning migrants are in Tigray (11), Amhara (9), and Oromia (8) Regions.
Part 1:

**Impact of the Crisis and Humanitarian Conditions**

**FAFAN ZONE/SOMALI REGION, ETHIOPIA**

Children attend class under the cactus tree and sitting on stone stools in Hagajan Libah. Photo: UNICEF/2020/Nahom Tesfaye
1.1 Context of the Crisis

Demographics

Ethiopia is the second most populous country in Africa with a population of 103.7 million people (49.9 per cent female, 50.1 per cent male), over half of whom are children. Besides having a young population, Ethiopia has an ethnically diverse population with over 80 different ethnic groups living in the country. The two largest of these groups, the Oromos and Amharas, comprise approximately 60 per cent of the population.

While the urban population is growing, almost 80 per cent of the total population live in rural areas. The average household has 4.6 persons, but this differs by region and by rural and urban areas, with rural households being larger on average. There is limited data on people with disability in Ethiopia, but according to a World Bank and World Health Organization (WHO) report in 2011, some 17.6 per cent of Ethiopians live with some form of disability.

Ethiopia achieved six out of eight Millennium Development Goals (MDGs). Amongst the goals not achieved is the promotion of gender equality and women empowerment. The 2018 Global Human Development Report shows that Ethiopia is among countries with low Gender Development Index (ratio of female to male HDI values) scoring 0.846. The same report indicates that Ethiopia's Gender Inequality Index (GNI) score is one of the lowest, ranking 121 out of 160 countries. Substantial achievements are recorded in enrolling girls in schools with high gross and net enrollment ratios. However, the participation of girls is still lower than that of boys with the national Gender Parity Index (GPI) for grades 1-8 being 0.90 in 2016/17. Moreover, Ethiopia was ranked 117 out of the 129 countries assessed in 2019 using the global Sustainable Development Goals (SDG) Gender Index. Historically, Ethiopia has been a country of origin, transit, and destination for migrants in the Horn of Africa, which has, in turn, created additional needs and risks to the population. Each year, poverty, chronic unemployment, limited livelihood opportunities, and the lack of regular migration options force tens of thousands of Ethiopians to embark on often hazardous journeys in search of better opportunities abroad, making them increasingly vulnerable to human trafficking, family separation, and other protection risks. Among them are thousands of UASC travelling without parents or guardians. Most irregular migrants return to Ethiopia involuntarily after spending time in detention and with very few or no belongings or assets. Irregular migration exposes migrants to abuse and violence by human smugglers and traffickers, and many returnees require urgent physical or psychological treatment. Only about 1 per cent of migrant returnees are originally from Addis Ababa or other Points of Entry and lacking the financial resources to return home, the majority are at risk of becoming stranded in unfamiliar cities with little resources to access official or unofficial safety networks. This risk is particularly acute for UASC.

Irregular migrants from Ethiopia usually travel on three major routes: the Eastern route via Somaliland, Puntland, Djibouti, and Yemen to the Gulf Cooperation Council (GCC) countries with the Kingdom of Saudi Arabia (KSA) being the destination of the overwhelming majority; the Southern route through Kenya, Tanzania, Zimbabwe, Zambia, and Malawi to South Africa; and the Northern route through Sudan, Egypt or Libya to Europe. From January to December 2020, a total of 337,576 movements of Ethiopian nationals were tracked of which 173,605 were within the Horn of Africa Region (51.43 per cent), 154,290 along the Eastern route (45.71 per cent) towards KSA, 5,570 along the Southern route (1.65 per cent),
and 4,111 along the Northern route (1.22 per cent). A reduction in total movements by Ethiopian nationals compared to previous years was in large part due to COVID-19 movement restrictions.

According to the Ministry of Labor and Social Affairs of the Government of Ethiopia, the main Regions of origin of irregular migration are Tigray, Amhara, Oromia, and Southern Nations, Nationalities, and Peoples’ (SNNP), while many migrants transit through Afar, Dire Dawa, and Somali Regions. In 2020, most migrants in the Horn of Africa Region were moving for economic reasons (56 per cent) in 2020 and the percentage was much higher along the Eastern route (91 per cent) which is dominated by Ethiopian nationals.

The economic drivers of migration must be understood in the context of communities disproportionately dependent on subsistence agriculture, a population boom, increasingly scarce farmland, and extremely limited employment opportunities in non-agricultural sectors. Irregular migration is often the only available coping mechanism for severe poverty.

Between January and December 2020, a total of 75,595 returning migrants were identified by the International Organization for Migration (IOM), with the majority coming from the KSA. This was a drastic reduction due to the pandemic as compared to the same period in the previous year, when there were 120,825 returnees from KSA alone. Since May 2017 when Saudi authorities announced a large-scale forced return campaign as part of efforts to promote the employment of Saudi nationals to 31 December 2020, IOM registered 345,742 Ethiopian nationals who returned from the KSA, 92 per cent of whom
were forcefully returned. Prior to the Government of Ethiopia’s declaration of the State of Emergency due to the COVID-19 pandemic in early April, 30,087 migrants returned from the KSA to Ethiopia between January and March 2020. Among these returning migrants, almost 87 per cent were male and 1,688 were UASC.

From April to October 2020, 5,063 migrants returned from the KSA, of whom nearly 53 per cent were women. Among these returning migrants, 442 were UASC. Of the total 36,632 returning migrants from KSA from January to December 2020, over 99 per cent reported that they were returning involuntarily. Human rights organizations reported that thousands of Ethiopians are being kept in inhumane conditions in detention camps while awaiting their return. As of January 2021, an average of 1,000 Ethiopians are returned each week, and rate of return is expected to increase over the year.

Ethiopia also has a long-standing history of hosting refugees. The country maintains an open-door policy for refugee inflows and allows humanitarian access and protection to those seeking asylum on its territory. Ethiopia’s parliament adopted revisions to its existing national refugee law in 2019, making it one of the most progressive refugee policies in Africa. The law provides refugees with the right to work and reside out of camps, access social and financial services, and register life events, including births and marriages. Refugee protection in the country is provided within the framework of these national and international refugee laws as well as the core international human rights treaties that have been ratified by the country. As of 30 November 2020, Ethiopia hosted 800,870 refugees from 26 countries. The majority are from Eritrea, Somalia, South Sudan, and Sudan. Sixty per cent of the refugees are children, of whom nearly 41,438 are unaccompanied or separated, further increasing their vulnerability.

**Political Context**

With Dr. Abiy Ahmed’s appointment as Prime Minister in April 2018 by the Ethiopian People’s Revolutionary Democratic Front (EPRDF), the political landscape in Ethiopia changed dramatically. The new Prime Minister promised political, economic, and social reforms and to bring unity, peace, and democracy to Ethiopia. In November 2019, he was awarded the Nobel Peace Prize for his efforts, in particular for his contributions towards ending a twenty-year long “cold war” between Ethiopia and neighbouring Eritrea.

Progress has been made in several areas, including making peace with Eritrea, the release of political prisoners, and inviting political exiles to return to Ethiopia, as well as reopening the space for civil society with the amendment of the Civil Society Proclamation, anti-terrorism laws, and the reform of the Ethiopian Human Rights Commission (EHRC). Challenges, however, remain. Worrying developments in 2020 included increased political polarization, hate speech, and growing ethno-nationalism, which risked undoing some of the hard-won gains. The abolishment of the long-standing EPRDF and the creation of the new Prosperity Party (PP) at the end of 2019 further widened the distance between the Federal Government and opposition groups such as the Tigray People’s Liberation Front (TPLF), which criticized the move as illegal and refused to join the new PP. The creation of the new party led to the exclusion of the TPLF from the national Government for the first time in three decades, marking the start of deteriorating relations between the TPLF and the Federal Government.

When the Federal Government postponed the national elections scheduled for August 2020, tentatively to 5 June 2021, due to the COVID-19 pandemic, some opposition parties including the TPLF heavily criticized this decision and accused the Prime Minister of unlawfully extending his mandate. Despite the Federal Government’s orders, the Tigray Regional Government announced that it would hold its regional elections as scheduled and conducted the election on 9 September 2020. While the outcome of this regional election solidified TPLF’s position as leading party in the Regional Government (with 98.5 per cent win of the available 190 regional seats), the Federal Government nullified the election held in Tigray, labelling it unconstitutional.

As tensions and the military build grew, the TPLF-led Regional Government of Tigray announced that it considered the Prime Minister’s rule illegitimate as of 5 October 2020, the date Dr. Abiy Ahmed’s term
would have ended had the national elections been held as planned. Almost a month later, on 3 November 2020, the Federal Government accused TPLF for attacking the Northern Command post in Mekelle, killing and injuring Federal Government soldiers and commandeering weapons and ammunition. The Prime Minister considered a red line had been crossed and, in response, ordered the Ethiopian National Defense Forces (ENDF) to commence a military offensive against TPLF. He also announced a six-month state of emergency in Tigray.

Beyond Tigray, several situations of generalized unrest have prompted security incidents in Oromia which have had severe impact on humanitarian operations in and around the Region as well as in neighboring Benishangul Gumuz, Gambela, SNNP and Somali Regions. The most prominent were violent protests in June/July 2020, following the killing of a local socially influential and politically active Oromo artist Hachalu Hundessa on 29 June in Addis Ababa. These incidents resulted in loss of lives, casualties, detentions (over 5,000 people), population displacement (9,000 people), destruction of private and public property (including humanitarian assets), road blockade and movement restrictions. To mitigate the impact of the incident, the Government of Ethiopia shut down internet access for weeks. The situation significantly affected humanitarian operations, including limiting the ability to collect, assess, and share information on emerging humanitarian needs.

At the international level, political relations between Ethiopia and other countries have deteriorated, with escalating tensions between Ethiopia, Egypt, and Sudan since Ethiopia announced it had started filling the Grand Ethiopian Renaissance Dam (GERD) reservoir without a legally binding agreement over the Nile water distribution. Ethiopia, whose highlands supply more than 85 per cent of the water that flows into the Nile River, has long argued that it has the right to use its natural resources to address poverty and improve the living standards of its people. On the other hand, Egypt and Sudan view the GERD as a major threat to their water security, although Ethiopia argues that the GERD will not significantly affect the flow of water into the Nile.

In addition to the GERD dispute, there have been clashes on the border between Ethiopia and Sudan. The conflict in Tigray has caused the age-old dispute around the Fashaga area to flare up again, and is already affecting people living in the disputed areas as well as the security of newly arrived Ethiopian refugees in Sudan, especially in Um Raquba camp.

### Media Environment

While the media space had opened up to some extent since Dr. Abiy Ahmed came to power in 2018, media platforms have also become a regular platform for score-settling and ethnically divisive political messaging and hate speech, at times further fueling violence. To this end the Government of Ethiopia responded legislatively by amending existing laws that govern media and making new laws such as the adoption of hate speech and disinformation prevention and suppression proclamation.

In an attempt to curb divisive messaging both by broadcasting companies often affiliated to certain ethnic groups and on social media, the Federal Government has regularly enforced internet and communication blackouts at the national as well as local levels. In July 2020, the Federal Government responded to the unrest in Oromia and Addis Ababa with a total internet blockage across the country for just under a month, while in November all communication channels were cut off in the Tigray Region. This has impacted humanitarian operations, including limiting the ability to collect, assess, and share information on emerging humanitarian needs.

Besides communication blackouts, there have been incidents of media broadcasting companies being shut down over accusations of broadcasting polarizing content and inciting further violence. An example was the closure of the Oromia Media Network in July 2020, which is owned by prominent opposition figure Jawar.
Mohammed, who was also arrested during the unrest and remains in prison.

**Socio-Economic Situation**

Over the past decade, Ethiopia’s economy has grown an average of 9.8 per cent per year, marked with a decline in overall poverty in rural and urban areas.\(^9\) While this trend was expected to continue, with initial gross domestic product (GDP) growth projections for 2020 at just over 10 per cent, the impact of COVID-19 have slowed down economic growth, with current International Monetary Fund (IMF) projections suggesting a dip in the growth rate to 3.7 per cent with projections of a slight revival in 2021. There has also been a significant decline in tourism, remittances, and foreign direct investments, leading to a reduction in foreign exchange earnings.

In Ethiopia, gender roles and stereotypes contribute to structural barriers in women’s and girls’ lives, leading to gender discrimination and inequality. Four in ten young women were married before the age of 18.\(^10\) Despite recent government policies to address gender inequality, women and girls in Ethiopia remain strongly disadvantaged compared to boys and men in several areas, including literacy, decision-making, economics, ability to make choices about their sexual and reproductive health, education, livelihoods, access to housing, land, and property (HLP) rights, access to legal identity and civil documentation, family dynamics, as well as in their ability to claim their basic human rights. This gender disparity also adversely affects their health and wellbeing as well as access to livelihood/income, as well as access to basic services. Sex- and gender-based discrimination, together with intersectional factors that may negatively affect women and girls’ access to opportunities and services e.g. age, disability, and ethnicity - place them at further risk of marginalization.\(^11\)

Inequality is manifested in widespread violence against women and girls. One out of four Ethiopian women has experienced physical violence since the age of 15,\(^12\) and 1 out of 10 Ethiopian women has experienced sexual violence since the age of 15. GBV is both a cause and consequence of this gender inequality. Emergencies heighten the exposure to and impact of GBV, including domestic violence, sexual violence (including as a weapon of war) and perpetuating pre-existing harmful practices (such as child and early marriage, and prostitution). Prevalence of female genital mutilation (FGM) also increases under emergencies, despite the practice having been made illegal in Ethiopia.

There is very limited information on persons living with physical disabilities (prevalence is estimated at 17.6 per cent of the Ethiopian population (World Bank & WHO, 2011), while for common mental illness, the prevalence in the general population is 22 per cent.\(^13\) Ninety-five per cent of all persons with physical and mental disabilities are estimated to live in poverty.
Timeline of Events

**MARCH 2020**

**Nationwide: COVID-19**
First COVID-19 case in the country

**APRIL-SEPTEMBER 2020**

**Nationwide: State of Emergency**
To mitigate the spread of COVID-19, the Government announced a five-month State of Emergency during which prevention measures and movement restrictions were enforced.

**JUNE / JULY 2020**

**Killing of a prominent Oromo singer**
The attacks following Hachalu Hundessa's murder on 29 June 2020, which included ethnic-based killings, injuries, harassment, and destruction of properties, constitute elements of a crime against humanity.14

**JUNE-JULY 2020**

**Nationwide: Internet black-out**
In response to the civil unrest and violence following Hachalu Hundessa's death, the Government of Ethiopia introduced a country-wide internet blackout which lasted over two weeks.

**AUGUST 2020**

**Nationwide: Kiremt floods**
Kiremt floods affected at least 151,828 people and displaced 100,176.15

**SEPTEMBER 2020**

**Benishangul Gumuz: Attacks on civilians/human rights violations.**
Multiple instances of killing of civilians occurred in the region, most notably in the Metekel zone. New displacements occurred due to the violence.16 17

**NOVEMBER 2020**

**Tigray/Northern Ethiopia: Conflict in northern Ethiopia**
Armed clashes started between the Ethiopian Defense Force and Tigray Regional Security Forces

**Benishangul Gumuz, Oromia and Tigray: Attacks on civilians/human rights violations**
Alleged violence against civilians in November include the Mai Kadra massacre in Tigray, attack on a passenger bus in Benishangul-Gumuz, and attack on a school yard in West Wollega (Oromia).19 20 21

**DECEMBER 2020**

**Benishangul-Gumuz: Attacks on civilians/human rights violations**
Attack in the Metekel zone in the early hours of 23 December 2020, which reportedly led to 207 deaths.18
1.2 Shocks and drivers of the crisis

Over the last few years, Ethiopia has been affected by various shocks, including conflict, climatic shocks - floods, erratic rainfall and droughts -, desert locusts, disease outbreaks, and the socioeconomic impact of the COVID-19 pandemic. Marginalized and at-risk population groups have been impacted by multiple shocks, creating an emerging protection crisis.

Conflict and inter-communal violence

On 4 November, following tensions that had been building between the Federal Government and Tigray Regional Government over the past months, military clashes erupted between the two. ENDF started security operations in Tigray to dislodge the TPLF from power. Initial clashes took place along the regional border with Sudan and between Amhara Region and Western and North-Western Tigray, and quickly moved towards other parts of Tigray. Unverified reports indicate the involvement of Unidentified Military Elements (UME), which at the time of writing continue to be present in large areas along the Northern and Eastern parts of Tigray. Reportedly, ENDF conducted multiple airstrikes, while Tigray Security Forces (TSF) fired rockets to Amhara and Eritrea.
The conflict in Tigray Region has prompted a major humanitarian crisis, with a large part of its 5.7 million inhabitants in need of emergency assistance and protection. As of the end of December, humanitarian access to Tigray is highly restricted, with hostilities impacting most areas in the region. In November, airstrikes and heavy artillery impacted towns such as Mekelle, Adwa, Axum and Shire. The conflict has prompted major displacement within the region and outside, compromising the safety and access to services of the population. In Western Tigray, over 50,000 people have fled to Sudan and an undetermined number to other parts of Tigray, including as far as Mekelle.

Unverified reports indicated that the conflict is having a huge toll on the population, including indiscriminate killings of civilians, sexual violence, looting of personal property, and attacks on key basic infrastructure and livelihoods, including the burning of harvests and pillaging of factories. The conflict has also impacted the safety of Eritrean refugees. Unverified reports indicate that the refugee camps of Hitsaats (40km west from Shire) and Shimelba (30km south from Shiraro) in the North-Western Zone have been vandalized. Refugees who were living in these settlements have reportedly fled to Shire, Mai-Tsebri and other parts of the region to live with host communities while others have been moved to Mai Ani and Adi Harush refugee camps in the same zone.

Humanitarian access to Tigray has been severely hampered by insecurity and the closure of road and air access to Tigray, Afar and Amhara Regions. Reports indicate that people have no access to basic services, including to healthcare, with many health workers vacating their posts, and hospitals, health facilities, medical supplies and ambulances looted by parties to the conflict. Further, 1.3 million children have not been able to access education, as teachers abandoned their posts due to insecurity and lack of remunerations. Reportedly, critical infrastructures have been damaged during the clashes, including roads and bridges.

Since 2019, violence by UAGs in Western and Southern Oromia has compromised the security situation in those areas, with frequent attacks including explosive devices in urban areas such as Nekemte (East Wellega) against security forces and government officials. This violence has caused dozens of casualties and impacted the civilian population in terms of safety and security as well as access to basic services and livelihoods. In Western Oromia, the security situation worsened significantly in 2020, in particular in Western and Kelem Wellega, and expanded to previously stable areas in East and Horo Gudru Wellegas, with clashes taking place almost daily. In the last trimester of 2020, UAGs conducted a number of attacks against ethnic minorities. On 1 November, an UAG reportedly perpetrated an attack in Guliso woreda, West Wellega, and human rights reports indicate that at least 50 people were killed (ethnic Amhara) and dozens injured.

In Southern Oromia, hostilities between security forces and UAGs escalated. The most affected areas in Guji Zone were Gumi Ildalo, Liban, Goro Dola, and Seba Boru woredas. Violence has displaced thousands of people, prompted the confinement of entire communities and IDPs and the loss of many lives and livelihoods. In West Guji, the security situation improved during the first half of the year but deteriorated again in the last trimester with a surge of attacks by UAGs, particularly in Gelana, Bule Hora, and Kercha woredas. In Borena, the humanitarian situation to people in need and exacerbated needs. The return to Ethiopia of these UAG from abroad, and the limited success in terms of their disarmament, demobilization and reintegration, have challenged the ability of security forces to ensure law and order, particularly in Oromia Region. In 2020, out of 1,702 “humanitarian access incidents” reported by partners to the Office for the Coordination of Humanitarian Affairs (OCHA), 1,086 have been reported in Oromia (64 per cent), particularly in Western and Southern Oromia. On the other hand, inter-communal violence stemming from long-standing ethnic grievances, inequity in regard to access to resources, undefined and contested regional boundaries, plus economic pressures, exacerbated humanitarian needs.
remained volatile with recurrent security incidents / clashes between security forces and UAGs in Arero, Dhas, Miyo, Moyale and Wachile woredas.

Underlying political, social, and ethno-religious issues re-surfaced in the Oromia Region since 2019 and through 2020. Unrest impacted the main urban centres populated by large ethnic minorities. In June 2020, the killing of an influential Oromo artist in Addis Ababa unleashed generalized protests through the region, taking an ethnic dimension in some locations with targeted assassinations and attacks on private and public property. Security forces deployed swiftly to restore law and order and reopen blocked roads, with allegations of excessive use of force on protesters echoed by human rights organizations. Over 250 people were reportedly killed and thousands arrested—including prominent Oromo political opposition figures. Furthermore, an estimated 9,000 people were displaced.

Eastern Oromia was impacted by ongoing social unrest and protests by youth, which continued into October and November. The region hosts a very large number of IDPs and IDP returnees, i.e. 134,000 IDPs and 201,000 IDP returnees in East Hararghe, and 12,000 IDPs and 108,000 IDP returnees in West Hararghe. The conflict between Jarso (Oromo) and Geri (Somali) clans in Chinaksen (East Hararghe) and Tuliguled Woredas (Fafan) continued, though reduced in the last trimester of 2020. However, since November—following conflict dynamics in other parts of Oromia—an UAG scaled up attacks against government officials and security forces in Deder and Meyu Muluke woredas as well as Tiyara Woreda (Harar Region).

In Benishangul Gumuz Region (BGR), simmering ethnic tensions and violence, both inter-communal and by UAGs, have impacted the safety of the population, displaced thousands of people and limited relief operations. The security situation in Metekel Zone deteriorated in 2020, and at the time of writing, the situation remains highly volatile and unpredictable. Since June, attacks by UAGs against ethnic minorities (Amhara, Agew, Shinasha, but also Gumuz), government officials, and security forces, have displaced approximately 100,000 people (70 percent of them in the last two months of 2020). In addition, violence impacted some 28,000 ethnic Amhara returnees. On 23 December, according to the Ethiopian Human Rights Commission, over a 100 people were reportedly killed in Bulen woreda. Further, inter-communal violence rose, with reports indicating violence between different ethnic groups in Gilgel Beles Town. The United Nations has not been able to access Metekel in the last half of 2020.

In Kamashi Zone (Benishangul Gumuz), the security situation improved in 2020, however, lingering tensions at the community level continue to hamper peace efforts, and Oromo IDPs still feel too unsafe to fully return. On the other hand, ethnic Gumuz faced movement limitations into Oromia due to insecurity in East and West Wellega, losing access to health services, secondary and tertiary education, and markets.

The long-standing conflict between Afar – Issa communities (Somali) continued unabated. The disputed areas are along the routes that connect Addis Ababa with the Red Sea ports of Djibouti and Assab (Eritrea). The conflict relates to the presence of Issa communities in three (contested) kebeles, i.e. Gedmayitu (Amibara woreda), Undufo (Gewane woreda), and Adeyitu (Mille woreda), which are under Afar administration. In May 2019, Somali regional authorities unilaterally withdrew from the 2014 agreement that handed over the three kebeles to Afar Region. Inter-communal violence continued through 2020, affecting the livelihoods of pastoralists, exacerbating chronic needs, and limiting humanitarian access.

The situation in the Southern Nations, Nationalities, and People’s Region (SNNP) remained volatile as a result of major political developments such as the consolidation of Sidama as Ethiopia’s 10th Regional State in July, and demands by ethnic minorities to change the administrative division of the multi-cultural region. Since mid-November, the resurgence of the inter-community conflict in Konso Zone and adjacent Alle, Derashe and Amaro Special woredas displaced an estimated 118,000 people. Demands for increased political autonomy by these woredas prompted a spike
of violence, including in and around Konso. Further, isolated opportunistic attacks by unidentified gunmen against security forces and civilians aggravated the precarious security situation and limited partners’ movements.

In Gambela, underlying issues driving violence and social unrest persisted through 2020, namely confrontations between Agnuak and Nuer communities, intra-communal violence, spill-over of violence from South Sudan, and high criminality. However, the scale of violence reduced from 2019. According to the United Nations High Commissioner for Refugees (UNHCR), there are some 333,000 refugees in Gambela, most from South Sudan, while thousands are internally displaced by seasonal rains and flooding year after year. In Western Gambela, boundary areas with South Sudan in Akobo and Wantawo Woredas (Nuer Zone) remained inaccessible at different times due to the presence of armed groups and militias from South Sudan. Lastly, Eastern Gambela’s Dima Woreda (Agnuak Zone) and boundary areas with SNNP remained highly insecure due to criminality, including frequent violent thefts on public buses.

Since the end of 2017, conflict - mostly driven by inter-communal tensions - has been a key driver of humanitarian needs. Unequal access to resources, regional boundaries and ethnic differences, together with economic pressures that compound these land/resource disputes, fuel violence in Ethiopia.

In Benishangul Gumuz Region, attacks on civilians and security forces by UAGs have displaced more than 120,000 people since June 2020, according to the regional Disaster Risk Management Commission. Violence is most intense in the Metekel Zone, and ethnic Gumuz, Amhara, Oromo, Agew, and Shinasha people are among the most affected. Notable incidents include the attacks on 25 September when armed assailants killed at least 15 civilians in in Metekel Zone (EHRC statement 26 September 2020), on 14 November when gunmen killed dozens of civilians on a bus, and on 23 December when 207 civilians were massacred including women, children, and older persons, according to the EHRC.

Violence in other parts of Ethiopia includes, inter-communal violence in North, West, and Central Gondar, tensions between Awir Zone (Amhara) and Metekel Zone (Benishangul Gumuz), inter-communal conflict between Jarso (Oromo) and Geri (Somali) clans along the Somali-Oromia administrative boundary. Old border and resource disputes resurfaced in Konso Zone in SNNP; in July 2020, a conflict between Konso Zone and Ale special woreda resulted in 23 deaths and displaced 8,982 people. Most recently, in mid-November, a new conflict erupted in which more than 100 people were killed, over 10,000 houses were burned down, and 116,714 people were displaced. In Oromia, violence by UAGs occurred in East Wellega, West Wellega, Kelem Wellega and Horo Gudru Wellega, while security operations against UAGs led to further violence in Guji and Borena Zones.

**Human rights environment**

The Ethiopian Human Rights Commission has in recent years increasingly played its independent role of monitoring human rights violations and calling for accountability for crimes committed. Recent publicly released monitoring reports of the situation in Tigray and human rights violations are cases in point. To mention a few: its brief report on Humera, Dansha and Bissober released on 18 January 2021 highlighting civilian suffering in these areas and calling for “an immediate and high-level collaboration among all relevant bodies for reconstruction” and the monitoring report on the situation in Tigray released on 11 February 2021 recounting cases of sexual violence, injury and deaths. One of the most alarming human rights violations that occurred amidst the conflict in Tigray is the Mai Kadra massacre on 9 November 2020. While there continue to be contested accounts of the event, a Tigrayan youth group called ‘Samri’, with support of local militia, reportedly killed at least 600 non-Tigrayans, according to the Ethiopian Human Rights Commission.

Different international sources also reported allegations of grave violations of human rights and international humanitarian law that occurred during the law enforcement operation in Tigray. The United Nations High Commissioner for Human Rights
UNHCHR) issued press statements on 22 December 2020 underscoring the human suffering resulting from the conflict, verify allegations and to help ensure accountability for violations. Over 50,000 people fled to Sudan and thousands of others were displaced with Tigray and surrounding regions.

Elsewhere in the country, there have been reports of human right violations resulting from insecurity, including reports of indiscriminate attacks on civilians and lack of basic services such as food, water, sanitation, shelter, health and education including in Metekel Zone of Benishangul Gumuz Region. There was also a disturbing report of a school yard attack in West Wollega Zone of Oromia Region, where gunmen reportedly targeted civilians based on their ethnicity. The alleged kidnapping of 17 university students at the end of 2019 from Wollega, has not been resolved throughout 2020 and students remain missing.

Floods

Floods continue to affect millions of people and displace thousands every year. The above-normal kiremt and karma/karan rainfall led to flash floods and landslides that submerged farmlands and livestock grazing reserves in six Regions (Afar, Amhara, Benishangul Gumuz, Gambela, Oromia, SNNP, Somali, and Tigray) between June and September 2020. The flooding resulted in crop losses, disruption of livelihoods, and increased food insecurity among the affected populations. Floods also put communities at higher risk of waterborne diseases like cholera (especially in West Omo and South Omo Zones in SNNP and West-Guji Zone in Oromia) and acute watery diarrhea. A report by the National Disaster Risk Management Commission (NDRMC) in September 2020 indicated that close to 1.1 million people were affected, and that 342,000 people were displaced by floods across the country.

Erratic rainfall and drought

While some areas in Ethiopia were impacted by floods, other areas were at risk of drought. Given that over 80 per cent of people in Ethiopia rely on agriculture and livestock for their livelihoods and are consequently heavily dependent on seasonal rainfalls, recurrent droughts are critical drivers of food insecurity and related protection risks for millions of people.

Mixed kiremt rains in 2020, which normally peaks from July to September, led to severe localized failures in Southern Tigray and parts of Afar Region. Similarly, mixed deyr/hagaya rainfall, according to Famine Early Warning System Network (FEWSNET), has led to poor rains in parts of Somali Region, undermining crops and livestock production, and, in turn, increasing malnutrition and food insecurity. The ongoing moderate to strong La Niña event has also led to drier than usual conditions in the October - November rainy season in Southern and South-Eastern Ethiopia, causing the NDRMC triggering its first national drought alert on 1 November 2020.

Desert locusts

Ethiopia has been experiencing the worst desert locust infestation in 25 years. Since the first-wave of infestations at the end of 2019, the desert locust invasion has spread to over 170 woredas, which are home to over 16 million people, including pastoral and agro-pastoral households as well as smallholder farmers. The locust infestation has caused significant damage to crops, pasture, and rangelands, affecting people’s livelihoods and exacerbating malnutrition, food insecurity, and ultimately, protection. The desert locust infestation has damaged 365,015 hectares of cropland, including 283,172 hectares in East and West Hararge Zone of Oromia Region (impacting 499,505 farmers) and 81,843 hectares in Oromo Special Zone, South Wollo, and North Wollo Zones in Amhara Region. In the SNNP Region, about 40,000 hectares of cropland and pastureland were infested which led to loss of 134,420 quintals (13,442MT) of cereal crops. A joint assessment conducted by the Ministry of Agriculture (MoA) and the Food and Agriculture Organization (FAO) indicates that at a national level the desert locusts had caused a cereal loss of over 356,000 tonnes by mid-August 2020.
As of October 2020, large numbers of locust swarms were present in the Afar and Somali Regions, as well as in Western and Eastern parts of the Northern Rift Valley. While some swarms moved into the highlands of Tigray and Amhara, most moved southwards into the Rift Valley, east Harar Highlands, and the Ogaden. A new generation of breeding started in the far Eastern parts of the Somali Region, where hatching and hopper bands have started forming. The presence of desert locusts depends heavily on weather conditions and ongoing surveillance and control operations are needed to protect crops and grazing land. Surveillance and control could be compromised if locusts migrate to insecure or inaccessible areas.

Coupled with the pandemic, floods, and drought, the desert locust infestation has sharply increased food insecurity in Ethiopia, the impact of which will likely be felt into 2021. According to the Integrated Food Security Phase Classification (IPC) (September 2020), 6 million of the 8.5 million people projected to be in severe acute food insecurity through June 2021 are living in areas affected by the desert locust upsurge.

**COVID-19 and other disease outbreaks**

The COVID-19 pandemic, through its health and socioeconomic impact, exacerbated the humanitarian situation in Ethiopia. Since the first case was confirmed on 13 March 2020, COVID-19 has had a pervasive impact on the lives of people across Ethiopia, including by the declaration of a five-month State of Emergency by the Government in April 2020. As of 6 February 2021, there were 141,453 confirmed cases in Ethiopia, with urban areas being most affected. While an anticipated peak seen in other countries has thus far not materialized, the pandemic has had direct and indirect impacts on the population, and on the delivery of goods and services. The pandemic exacerbated pre-existing inequalities, as already marginalized population groups, both socially and economically, were hardest hit.

Poor WASH coverage and limited access to and utilization of health services have led to other disease outbreaks, such as measles and cholera. Low immunization coverage lies behind regular measles outbreaks in Ethiopia, which is among the top causes of mortality amongst children under the age of 5, while cholera continues to have high fatality rates in Ethiopia. This is exacerbated in areas experiencing ongoing fighting and disruption to health services, particularly in Tigray, where there has been a reported drop in routine childhood vaccination putting populations at increased risk of vaccine-preventable diseases.
1.3 Impact of the crisis

The shocks outlined in the previous chapter have had an impact on people, systems, and services, as well as affecting humanitarian access across Ethiopia.

Impact on people

Loss of livelihoods

Ongoing conflict has impacted livelihoods as insecurity prevented communities from engaging in agricultural activities. This, in turn, has increased food insecurity in areas such as Kellem Wollega Zone in Western Oromia, as the population was not able to cultivate their land, or where crops were cultivated unable to harvest these due to insecurity. In these areas, despite average to above-average kiremt rainfall, the total meher production is significantly below average since large amounts of farmland were left uncultivated. Furthermore, agricultural inputs like seeds and fertilizers were not supplied during the last two seasons due to insecurity and road inaccessibility, according to local agricultural experts. Food prices have increased significantly during the last three years due to supply chain scarcity while the purchasing power of communities was depleted by interruption of agriculture and livelihood activities. The conflict in Tigray has resulted in serious damage to infrastructure as well as disrupting livelihoods and markets.

COVID-19 containment measures seriously undermined peoples’ livelihoods, including those of

CHAGNI IDP CAMP/AMHARA REGION, ETHIOPIA

Hayat Ibrahim, 10, warms her hand with fire near her tent in Chagni IDP site. Photo: UNICEF/ Mulugeta Ayene
IDPs, IDP returnees, and returning migrants. According to the UN Socio-Economic Impact of COVID-19 in Ethiopia Report, 10-15 per cent loss of livelihoods is expected, which translates to a cumulative loss of approximately 1.6 – 2.4 million jobs, most notably in urban areas. As a result of increased unemployment, the number of people living below the poverty line is expected to increase from 26 million in 2019 – 2020 to 31 million people in 2020-2021. Consequential protection concerns related to negative coping mechanisms and neglect are likely to increase as are humanitarian needs, particularly for those already marginalized and at risk – including displaced persons, returned migrants, women, children, PWD, and older persons, amongst others.

Remittances, an important source of income for many families in Ethiopia, were estimated to have fallen by around 23 per cent in 2020. This, in turn, jeopardized an essential safety net that keeps thousands out of poverty in the region, undermining the nutrition, education and protection situation.

Women are particularly affected, with the UN Socio-Economic Report noting a “broad-based, substantial and systemic risk to women and girls.” The report observes that women are, “disadvantaged in decision-making at household level on the response to the pandemic, over-represented in the workforce in industrial parks, thus, most impacted, are over-represented in the workforce in the hard-hit tourism and hospitality sector (80 per cent), and likely to bear the brunt of job losses.” Additionally, it notes that women are often the frontline health workers at significant risk of being infected due to a lack of Personal Protective Equipment (PPE).

**Displacement**

Over the last 12 months, approximately 1 million people were newly displaced: 600,000 as a result of conflict, 350,000 due to climate shocks, and 50,000 for other reasons.

A significant number of people fled from their zones of origin into other zones and regions. The map below shows inter-zonal IDP movements to new IDP sites that were established in 2020. Among the biggest movements tracked were 117,000 IDPs from Western to North Western Zone (Tigray Region), 27,000 IDPs from Metekel Zone (Benishangul Gumuz) to Awí Zone (Amhara Region), 22,500 IDPs from Guji Zone (Oromia Region) to Daawa Zone (Somali Region), 12,000 IDPs from Western to Central Zone (Tigray Region), 10,500 IDPs from Konso Zone to Béri Zone (SNNP Region), 9,000 IDPs from Kemashi Zone (Benishangul Gumuz Region) to East Wèllega (Oromia Region), and 8,500 IDPs from Konta Special Zone to Hadiya Zone (SNNP Region).

As of early February 2021, an estimated 2.7 million people are displaced in Ethiopia. These include 2.2 million IDPs whose displacement status has been verified through field assessments. Some 48 per cent of displaced people in sites are female, 5 per cent are older persons, 58 per cent are children, and 192,000 are PWD. The conflict in Northern Ethiopia has resulted in an estimated 496,000 IDPs.

IDPs in Ethiopia predominantly live in sites with collective accommodation or in spontaneous settlements where they lack dignified and safe living conditions, have insufficient access to basic services, and lack necessary resources to sustain their families and communities. COVID-19 has exacerbated the risks faced by IDPs in congested, communal accommodations and has created the need to immediately improve living conditions.

Importantly, IDPs have very limited access to land and cultivation; for example, IOM Displacement Tracking Matrix (DTM) Round 23 found that fewer than 25 per cent of IDPs in 85 sites in Oromia and Somali have access to land. In some cases, IDPs are relocated to areas where host communities already lacked access to natural resources and basic services, generating further tensions.

Conflict displacement has a long-term impact on people following the destruction of homes, lack of safety, and community cohesion. People who are displaced by conflict, along with those displaced by drought, tend to remain displaced for longer periods of time compared to people displaced by floods or landslides. For example, as of October 2020, the
NDRMC reported that 90 per cent of those displaced by kiremt flooding had already returned to their areas of origin. Many IDPs remain in forced displacement situations because of housing, land and property rights violations, including the destruction or secondary occupation of their homes. According to IOM DTM Round 23, the main perceived obstacle for IDPs to return home is damage and destruction to housing or property (as reported in 666 villages), followed by a lack of essential services and infrastructure (reported in 596 villages). Many IDPs therefore remain displaced in their area of displacement or become secondary displaced, with no or little access to humanitarian assistance (as often they are no longer recognized by authorities as IDPs) and with little hope of regaining access to their land, house, or property.

A number of IDPs were returned to areas of origin, locally integrated or resettled, with an estimated 350,000 IDPs returning in 2020. The below map shows the increase in IDP returnees by zone during 2020. Most of the new IDP returnees during 2020 are in West Guji (Oromia Region, 64,000), followed by East Bale (Oromia Region, 37,000), Shabelle Zone (Somali Region, 31,000), Fafan Zone (Somali Region, 29,000), Kemashi Zone (Benishangul Gumuz Region, 28,000), and East Hararge (Oromia Region, 20,000).
Cases of premature return of IDPs to their areas of origin have reportedly created secondary displacement, as well as increased humanitarian needs and conflict within communities. In some areas of relocation/return, the return placed further strain on existing services, increasing tension between those relocated/returned and communities and, in some instances, triggering conflict and violence. HLP issues remain unresolved, delaying durable solutions for those returned or relocated. These issues are particularly pertinent in areas where there is / has been inter-ethnic conflict. IDP returnees may face discrimination and exclusion as they try to reclaim access to their housing, land, and property.

The ongoing clashes between the Ethiopian Federal Government and TPLF forces have driven thousands of Ethiopians across the border into Sudan in search of safety and protection. As of 31 December, it was reported that 55,500 Ethiopians had arrived in the Kassala and Gedaref states in east Sudan since the start of the conflict.

Irregular migration
The health emergency has been far more severe for mobile populations in fragile contexts, creating new challenges while exacerbating their existing vulnerabilities. Even after returning to their home communities, migrants are often stigmatized – if not for failure to establish themselves and provide remittances, then for being perceived as potential COVID-19 carriers.

Furthermore, the rise in barriers to movement, for example, the Government of Ethiopia’s temporary suspension of large-scale migrant return movements, has resulted in increasing stranded migrant populations in transit and destination countries, most often unable to continue their journey or return home. Over the past months, these stranded migrants have faced a reduction in available coping mechanisms among host communities, such as access to informal work to sustain their journey, alongside access to health care and other basic services. Even more concerning, many cases of xenophobia, discrimination, and stigmatization have been reported, whereby migrants were believed to be carriers of the virus. This has led to instances of arrests, detention, and forced relocations and forced returns. In June 2020, IOM estimated that at least 3,000 migrants were stranded across the Horn of Africa Region, with an additional 14,500 East and Horn of Africa migrants in Yemen, and a further 20,000 in need of assistance in KSA by the end of June 2020. Information on the East and Horn of Africa migrants in critical situations were also received from other countries in the GCC and the Middle East. These migrants stranded in formal and informal detention centers face specific risks under COVID-19 due to already inadequate health care services combined with overcrowding, shared ablutions, and poor hygiene and protection standards.

While the size of migratory movements along major migration routes decreased from March to July 2020 (51,919 in February to 12,430 in July), the numbers increased again September onwards. The pandemic affected not only the size of migratory movements but also the proportion for each migration route as well. Strict border closures and increased patrols in Yemen, particularly along the coasts, caused many movements to be restricted to the Horn of Africa Region. Tighter border control on the KSA-Yemen border resulted in significant numbers of Ethiopians stuck in Yemen in deplorable conditions. Contrary to usual trends, the majority of the movements tracked in the first half of 2020 were within the Horn of Africa Region while 45.71 per cent were along the Eastern Corridor.

Despite border closures, the suspension of large-scale forced returns from the KSA, and a mandatory 14-day quarantine period upon arrival to Ethiopia, thousands of returns from the KSA and other countries (e.g. Kuwait, Lebanon) were allowed on a caseload-by-caseload basis, and spontaneous returns and forced returns across the borders mainly from Djibouti, Kenya, Somalia, and Sudan continued. Between April and December 2020, IOM registered 32,498 vulnerable migrants who returned either voluntarily or in a forced manner to Ethiopia through the land border crossing points with Djibouti, Kenya, Somalia, and Sudan, while 11,968 persons were registered as they returned to Ethiopia through Bole International Airport, mainly from KSA but also other countries in the GCC. Return flights from KSA resumed on September 10 at a rate...
of approximately 300 arrivals per week and this rate more than tripled in January 2021, though they are still far from pre-pandemic levels of 10,000 returnees per month. At the same time, arrangements for the repatriation of 1,400 stranded Ethiopian migrants from Yemen are under way and the assisted voluntary return of at least 1,200 Ethiopian migrants are expected in 2021, the majority from transit and destination countries on the Eastern and Southern irregular migration routes. The Ministry of Health (MoH) issued a directive in early October 2020 to define the COVID-19 response after the State of Emergency, resulting in the closure of most quarantine centers across the country. However, hundreds of migrants continue to enter Ethiopia across land borders, many of whom do not arrive with the mandatory negative Polymerase Chain Reaction (PCR) test results.

Migrants on the Eastern route are predominantly young male adults migrating for economic reasons, while the proportion of females migrating shows an upward trend mostly attracted by economic opportunities, mainly as domestic workers. The most commonly reported dangers along the Eastern route are robbery, extortion, travel problems such as exposure to harsh elements, dehydration and hunger, finding accommodation, harassment, crossing countries in crisis, being deliberately delayed, arrest,
detention, forced return, abduction for ransom, rape, and physical assault. Children who migrate without their parents or primary caregivers are especially vulnerable to exploitation, coercion, deception, and violence, particularly when below the minimum age of employment, when they have crossed a border irregularly, and when they do not speak the language of their destination country. Due to their irregular immigration status, migrants very often have no recourse to official protection mechanisms in transit or host countries. Movement along the Northern route has slowed down in recent years; however, it is predominantly driven by economic reasons. The Southern route remains largely understudied, although, in general, migration along this route tends to be young men between 18 and 35 years old. A worrying development over recent years has been the growing number of UASC as well as greater protection risks on the Southern route.

**Increased protection risks**

Climate and conflict-related shocks have resulted in large-scale displacement, loss of civilian lives, persistent and serious human rights violations, increasing protection risks such as GBV and child protection concerns, neglect and deprivation, (SEA), HLP, the inability to exercise HLP rights, and loss of access to essential services, including to education. This affects the ability of crisis-affected people to attain a basic standard of living, exercise their basic rights, and withstand the impacts of new shocks. These factors thus have contributed to the erosion of self-protection capacities - at the community, household and individual levels – further exposing women, men, boys, and girls, to protection risks.

Ethiopia’s gender norms reveal a patriarchal society in which traditional values and ideas about gender roles combined with a lesser social status for women and children have led to widespread violence against...
women and children. Domestic violence directed at women and children within family is often normalized and legitimized by survivors, perpetrators, and communities by reference to cultural and religious norms. GBV impacts survivors’ physical and mental well-being, with survivors reporting suicidal thoughts and self-harm, and has social and economic consequences as it can lead to social isolation and loss of earnings.

The COVID-19 pandemic has adversely impacted the protection situation of already marginalized and at-risk groups and has undermined the advancement of gender equality. Movement restrictions linked to the pandemic, as well as to insecurity, and floods, limit access to basic services for and further exacerbate the needs of at-risk groups, including children, PWD, older persons, pregnant and lactating women, and people living in rural areas.

According to the Ministry of Labour and Social Affairs, 95 per cent of PWD in the country live in poverty, the vast majority in rural areas, where basic services are limited. The ongoing shocks including the pandemic are likely to compound their vulnerability, as access to services becomes even more limited, and movement restriction has made it even more difficult for people to go from rural to urban areas for treatment. PWD are more impacted by COVID-19 and less able to access information or implement the recommended hygiene measures to reduce the risk of contracting the virus. Some 9.9 per cent of adults with disabilities and 16.6 per cent of children with disabilities reported not having access to public information on COVID-19; 20 per cent of adults and 19.7 per cent of children reported that the information provided on COVID-19 was difficult to understand as the messages included too many words, while 6.5 per cent of adults and 8.1 per cent of children reported that the format was inaccessible.

Children in Ethiopia continue to have their rights threatened and be exposed to multiple child protection risks. Some of the most serious risks include abuse and neglect, separation from parents and family members, exposure to harmful coping mechanisms, -- including child marriage and child labour, as well as psychological distress, caused or exacerbated by different, and often converging, shocks (conflict, floods, drought, etc.). Children affected by conflict and displacement, UASC and out of school girls and boys in particular, are more vulnerable to child protection risks and rights violations, with boys being more at risk for harmful child labour and recruitment and use by armed groups and girls at greater risk for child marriage and sexual exploitation. According to DTM, 21,659 IDPs are UASC. UASC are extremely vulnerable, and at greater risk of exposure to child labour, transactional sex, or child trafficking.

Due to the different types of shocks affecting Ethiopia, a serious risk to children is hazardous child labour (i.e. hazardous work), which is widespread in Ethiopia. This, one of the worst forms of child labour, has been prevalent in Ethiopia for decades. Key drivers of child marriage include strict religious and social traditions, is further compounded by shocks affecting families’ livelihoods such as conflict and COVID-19. Over the last year, child marriage has been increasingly used by families as a negative coping mechanism to deal with economic hardship and displacement. As a result of school closures due to COVID-19 and conflict, reports of child marriage have increased in almost every part of the country. Child marriage (most often affecting girls) often crushes girls’ and boys’ development due to early pregnancy and social isolation, interrupts their schooling, increases their risk of mental health problems, and limits their opportunities to grow up and work toward their dreams and full potential. Moreover,
if a girl gets pregnant before the age of 18, it increases the risks of serious health complications.

Several population groups, already at increased risk of GBV will be more gravely impacted. These include:

- **Adolescent girls**, who face particular risks related to their age, gender, and social status, resulting in increased domestic responsibilities keeping them in the home, discouraging school attendance or completion, and early sexual initiation and unintended pregnancy. These combined can result in a lack of understanding information on health, education, rights, and services.

- **Woman and child headed households** have limited access to services and distribution points and many essential facilities are not located in areas that are safe and easily accessible to women and girls.

- **Women, girls, boys, and men with disabilities:** Due to limited mobility, hearing and vision, these persons generally have a greater reliance on assistance and care from others. Isolation, a lack of social support/peer networks and physical, technological, and communication barriers put an extra challenge for people with disabilities in obtaining information and receiving guidance. This exclusion increases the risk of GBV.

- **Women, girls, boys and men who are survivors of violence** face social discrimination and exclusion and are at risk of secondary violence as result of the primary violence. They have a heightened vulnerability to future violence, including sexual violence, intimate partner violence, as well as SEA.

**Impact on systems and services**

**Production losses**
Mixed kiremt rains (which peak from July-September) led to severe production losses, with crop yield reduced by up to 25 per cent in certain areas. Locusts have continued to significantly impact a number of areas in the North-East and South-East of the country, resulting in the loss of between 5 per cent – 30 per cent of the total crop in many areas. These losses come on top of losses affecting the same areas in the belg season. Locusts are also reported to have caused significant damage to pasture in these Northern pastoral areas, resulting in the loss of an estimated 15 per cent – 40 per cent of total pasture in a number of woredas and livelihood zones.

**Impact on economy and markets**
COVID-19 has also contributed to a further increase in inflation and a decrease in purchasing power. The annual inflation rate hit 22.9 per cent in April 2020, the highest since 2012. The Birr has also been devalued over the past year by 23 per cent compared to the US dollar. The pandemic and its related shocks resulted in the disruption of supply chains, impacting industries which have suffered depressed demand and production activity.

Food prices increased by 25.9 per cent while non-food prices increased by 19.2 per cent. Information from FEWS NET and the World Food Programme (WFP) monitored commodities and markets point to an increase in the cost of the food basket in the country. The average percentage price change of staple foods has increased for most commodities in the last year (August 2019-August 2020).

The livestock market system, most notably in the Somali Region, was particularly hit by the shocks, as demand for livestock collapsed due to border closures, transportation challenges, and disrupted religious festivals. The livestock business was further impacted by the desert locust infestation in some areas, where up to 1.3 million hectares of pasture and browse were affected. The livestock business in Ethiopia contributes to approximately 16.5 per cent of the overall GDP, and the impact on the livestock business has had a substantial impact on the households dependent on livestock.

**Disruption of services**
COVID-19 has had a direct and indirect impact on the existing healthcare system and services. The already overstretched healthcare system was not adequately equipped to deal with an influx of COVID-19 patients. While the anticipated peak of the virus stayed out, hospitals and COVID-19 healthcare facilities struggled...
to accommodate COVID-19 admissions and reported a lack of beds and ventilators in intensive care units. A lack of space was also reported in isolation and quarantine centers across the country.

The shifting of resources to COVID-19 resulted in a limitation or total cessation of routine and specialized health services at many facilities. This meant that many patients with other medical needs were unable to receive timely and adequate treatment. Services targeting pregnant women and lactating mothers as well as mental and psychosocial support services, which were already minimal, were further reduced due to the pandemic. Notably, according to the 2016 Ethiopian Demography and Health Survey only 28% of births are assisted by skilled care and pregnancy related mortality ratio was 412 maternal deaths per 100,000 live births.

Routine services such as vaccination campaigns were also affected. The measles and polio vaccination campaigns planned for March and April 2020 were postponed until January 2021, leaving 15 million children at increased risk. Where healthcare facilities were available, lack of water, health workers, and insufficient PPE undermined the functionality of the facilities. Movement restrictions had a serious impact on the availability of medical supplies, particularly given that Ethiopia is the world’s sixth biggest importer of medicinal and pharmaceutical products.

While the functionality of schools throughout the country has been affected by shocks over the past years, COVID-19 is likely to have caused one of the greatest disruptions to educational opportunities for Ethiopian children in a generation. In order to curb the spread of the virus, the Government of Ethiopia announced country-wide school closures on 16 March 2020. The gradual re-opening of schools did not start until October which means that 26 million children were out of school for seven months, of which approximately 77 per cent were primary school pupils. Prolonged closure of schools in turn increased the risk of school dropouts, especially among girls, psychosocial distress, and child protection risks such as child labour, GBV and exploitation, early pregnancies, and early marriages.

With the gradual re-opening of schools, overcrowding of schools remains a major concern in certain regions. Student – classroom ratios are particularly high in SNNP and Somali Regions with 116 and 95 children per classroom, respectively. In addition, the lack of water and status of WASH facilities, particularly severe in SNNP and Oromia, pose a huge challenge as 89 per cent of schools across the country do not have access to handwashing facilities, 75 per cent of schools do not have access to a water source, and 39 per cent of schools have no access to latrines. These factors complicate the return-to-school process and compliance with COVID-19 prevention measures.

In addition to closures, many schools across Oromia, Somali, SNNP and Tigray have been completely or partially destroyed by conflict, while schools in Afar were destroyed by flooding and high winds. In some areas, particularly in Oromia and SNNP, some schools are not functioning as they are serving as shelter for IDPs. Alternative facilities for damaged schools are generally limited, with only 14 per cent of emergency-affected schools having alternative facilities available. This is particularly challenging in Amhara and Benishangul Gumuz, where 0 per cent and 8 per cent of schools have alternative facilities.

As schools struggle with water access and shortages, so do many communities. A lack of safe drinking water often stems from insecurity and a lack of government budget to rehabilitate or maintain water schemes. In Kellem Wollega in Oromia, for example, the non-functioning rate of the existing 1,714 water schemes is 38.8 per cent (based on the ZWMEO 2019/20). These critical water shortages are causing the community to use unprotected water sources for drinking, personal hygiene, and other purposes. As fetching water is predominantly the responsibility of women and girls in Ethiopia, who are having to travel further to collect water, it increases their domestic responsibilities, limits their time for education, vocational training and livelihood opportunities and increases their exposure to violence.

Disruption to social cohesion
One of the key impacts of recent conflicts and economic pressure from the pandemic has been the
deterioration of social cohesion. An assessment from June 2020 in West Wollega, for example, indicated a deterioration in IDP and host community relations and that IDPs in this location faced increased discrimination, stigmatization, and denial of access to services. An internal United Nations International Children’s Emergency Fund (UNICEF) Ethiopia IDP context assessment (2020) also noted the devastating effects of recent conflicts on children, their families, and their communities. Analysis of the social dimensions of conflict revealed the disruption of social institutions and public services that communities had previously shared, putting a strain on or breaking the practical everyday ties between groups.55

In order to better understand the social cohesion prevalence and deficits in IDP contexts, partners constructed social cohesion indexes through an analysis of three relevant dimensions - horizontal social cohesion, vertical social cohesion, and experiences and perceptions of security/safety (see table on page 33). Data has been extracted from both the Site Assessment (SA) (Round 23) and the Village Assessment (VAS) (Round 6) exercises, while acknowledging that a significant number of sites were excluded from the data collection due to access challenges (including 90 Sites and 77 Villages due to insecurity), data for which were extracted from the previous rounds of data collection (DTM 22, and VAS 5). The analysis focused on conflict-displaced across all sites and villages who participated in the relevant rounds. A comparable methodology to develop the Durable Solutions Index was applied to score against the selected relevant dimensions and variables of social cohesion in displacement.56 These dimensions and variables were (re)constructed by identifying questions in the DTM tools that are considered to be ‘proxies’ for social cohesion and analyzing the responses. The questions identified were related to socio-economic activities and civic engagement to help us better understand the quality of these key relationships in determining vulnerabilities in displacement and factors affecting durable solutions. The table below includes the dimensions, key variables, and indexes across the two tools (DTM SA & VAS).57

The DTM SA analysis reveals constrained access to socio-economic opportunities (81.5 per cent in sites have no access to land and 54.3 per cent have no access to a local market, with evidence of markets not selling to IDPs specifically; only 16.7 per cent of respondents have access to income generation and only 10.6 per cent of women), which undermines horizontal social cohesion. Vertical social cohesion is undermined by a lack of access to and poor quality of primary education. ‘Discrimination’ in accessing health services was noted by 4.8 per cent of respondents, with no significant age or gender dimensions; while 2.7 per cent noted ‘unequal’ access to education due to ‘status’, with no significant age dimensions but girls experiencing a greater degree of exclusion (1.2 per cent as opposed to 0.1 per cent of boys overall). Moreover, limited access to complaints and feedback mechanisms (65.8 per cent of respondents said there was no access) indicate that IDPs lack avenues to address their concerns to the authorities further undermining vertical social cohesion. Although the overall security situation on sites appears good (89 per cent of respondents overall indicated that no security incidents took place on their sites), this contrasted with SNNP where 33 per cent of respondents noted that there were security concerns. Of concern, 33.8 per cent of respondents identified distinct risks for women and girls to be harassed or become the targets of violence.

The DTM VAS analysis reveals a similar picture across all dimensions and variables, with access to livelihoods and services and distinct security vulnerabilities of women and girls undermining social cohesion. In terms of horizontal social cohesion, 19.8 per cent of respondents noted conflict around water access/use but 87.50 per cent indicated that no threats of violence or conflict had occurred in the village since IDPs began to return. A very positive trend emerged around civic participation (including peace and confidence building initiatives) providing the highest variable score, which suggests that such interventions do make a difference. In terms of vertical social cohesion, 53.3 per cent respondents highlighted that access to primary school was constrained by unequal status while 13.2 per cent of respondents noted they felt unsafe to
use complaints or feedback mechanisms to raise their concerns.

The analysis found that the biggest differential between contexts is across the horizontal social cohesion dimension, with higher levels in returns context and the lowest index in displacement, signaling a potential and important correlation between return and horizontal social cohesion. Examining the variables that constitute the index for each dimension is important to understanding what aspects of horizontal and vertical social cohesion and security/safety require further attention.

**Impact on access**

In 2020, humanitarian access to people in need in Ethiopia decreased significantly as a result of a surge in hostilities and inter-communal violence, the conflict in Tigray Region, and prolonged social unrest, particularly in the Oromia Region. In addition, slow and rapid onset climate shocks such as floods and drought, and COVID-19 containment measures impacted partners’ operations. Partners’ movements were restricted multiple times by insecurity, violence, and protests, and the safety and security of aid workers was compromised. As a result, relief operations were interrupted, hampering the delivery of humanitarian

<table>
<thead>
<tr>
<th>SOCIAL COHESION DIMENSIONS</th>
<th>VARIABLES</th>
<th>DTM VA SCI (0-10)</th>
<th>DTM SA SCI (0-10)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>HORIZONTAL INTERACTIONS</strong></td>
<td>Focusing on the interaction between host and IDP communities in relation to socio-economic activities and civic participation (e.g. access to markets and livelihoods as a proxy to collaboration and inter-dependence)</td>
<td>• Access to markets (buying and selling) including violence issues in accessing them and access to livelihoods/income generating activities/land, including specifically for women • Discrimination by host communities • Participation in civic life • Conflict over water • Existence of informal/traditional dispute resolution mechanisms</td>
<td>7.7 HIGH</td>
</tr>
<tr>
<td><strong>VERTICAL INTERACTIONS</strong></td>
<td>Focusing on the interactions between local authorities/social service providers and IDP communities</td>
<td>• Discrimination trying to access social services • Access to legal remedy/dispute resolution mechanisms (formal) • Access and trust in using complaint/feedback mechanisms • Voting</td>
<td>6.9 MID</td>
</tr>
<tr>
<td><strong>SECURITY/SAFETY EXPERIENCES &amp; PERCEPTIONS</strong></td>
<td></td>
<td>• Security incidents occurrence • Threats of violence and conflict • Risks of violence against women and girls • Perceptions of safety by women, men, girls, and boys</td>
<td>8 HIGH</td>
</tr>
</tbody>
</table>

*(Scores cut-off points: 0-3.9 LOW / 4-6.9 MID / 7-10 HIGH)*
assistance and delaying non-critical activities and development programmes.

Active hostilities, community violence and social unrest
Insecurity and violence continue to be the primary access impediment to relief operations in Ethiopia. Out of 1,702 humanitarian access incidents reported by partners from January – December 2020, 1,474 were related to “active hostilities, security operations, and inter-communal violence impeding humanitarian operations” (87 per cent), of which 1,002 were reported in Oromia Region (68 per cent), 119 in Amhara (8 per cent), 73 in Somali (5 per cent), 80 in BGR (6 per cent), 69 in Afar (5 per cent), 47 in Gambela (3 per cent), and 45 in Tigray (3 per cent). It must be noted that the lack of humanitarian access to Tigray Region since November impacted the reporting of access incidents, hence, this figure cannot be considered representative of the scale of violence/situation on the ground.

Violence against humanitarian personnel, assets, and facilities
While UN and NGO partners are not directly targeted in the violence in Ethiopia, aid workers in field locations operate in high-risk environments and the likelihood of suffering collateral damage - either during road movements or programme delivery - is significant. Overall in 2020, OCHA counted 91 incidents of "violence (or threat of violence) against humanitarian assets, facilities and personnel".

In Oromia, widespread protests by youth broke out in July (East and West Hararghe, East, West, and North Shewa, Arsi and West Arsi, and Bale Zones), and in cities such as Dire Dawa and Harar. Security forces responded swiftly to re-open roads, however, insecurity remained an issue on secondary roads. The situation impacted partners’ operations, including movements in Addis Ababa and onwards to Benishangul Gumuz, Gambela, SNNP, and parts of the Somali Region. The safety of aid workers was compromised, some compounds were vandalized and vehicles stormed. Protests in Eastern Oromia continued through October and November. In Western Oromia, in April, a vehicle from a religious organization was ambushed by an UAG in Ganji woreda (West Wellega), and two people were killed. In East Wellega, Nekemte Town, increased UAG attacks with explosive devices threatened the safety of the population and aid workers.
On 5 September 2019, two aid workers were killed outside the Nguenyyel camp in Gambela Region. Initially, three suspects were arrested, but were later released in the absence of evidence. At the time of writing, nobody has been held accountable for these killings. While the security situation improved in Gambela in 2020, aid workers continue to operate in a highly volatile environment.

In November 2020, four aid workers were killed in the refugee camps of Hitats and Shimelba in Tigray Region’s North-Western Zone. Humanitarian access to Tigray Region has been heavily restricted since the start of the conflict, impacting the ability of aid partners to report incidents impacting the security of their staff. Reportedly, dozens of aid agencies’ compounds have been looted, and an undetermined number of vehicles, trucks, and other equipment have been taken by parties to the conflict. As of the end of 2020, dozens of relief workers remain unaccounted for and agencies are struggling to establish contact due to the shutdown of communications in the region.

**COVID-19 – Humanitarian access in Ethiopia**

The arrival of COVID-19 added an additional layer of complexity to relief operations in Ethiopia, particularly in areas already affected by violence, where there is limited government presence and access to basic services. This was the case for instance in Western and Southern Oromia or in Metekel Zone (Benishangul Gumuz Region). On the other hand, remote areas with structural deficits in Afar, SNNP or Somali faced similar challenges. COVID-19 related restrictions impacted the ability of partners to sustain relief operations at scale, supporting IDPs or people affected by drought or flooding. The demand for healthcare facilities simultaneously decreased; the reduction in the number of children treated for pneumonia compared to previous periods, for example, suggests that caregivers have been choosing to stay home rather than visit health facilities for fear of contracting the virus.

The humanitarian community and government counterparts stepped up efforts to ensure that partners – and private contractors – could continue movements throughout the country; partners adapted shifting programme implementation modalities. The

UN advocated for international and regional borders to remain open for the import of relief items and movement of staff, and for fast-tracking the issuance of visas for staff involved in COVID-19 response. Partners reported difficulties importing/processing customs of telecommunications equipment such as satellite phones. Overall, from April to June, partners reported 34 incidents linked to COVID-19 restrictions, including movement restrictions and suspension of non-critical activities, plus numerous incidents of violence/intimidation of aid workers (stigmatization).

COVID-19 restrictions have gradually been eased throughout the country, and partners are able to operate without restrictions, on the condition of respecting the mandatory use of masks and social distancing.

**Restrictions on, or obstruction of, conflict affected populations access to services and assistance, including involuntary returns**

Even in areas where humanitarian actors are operational, not all people can equally access the assistance and services they need. Different people face different barriers in accessing basic services, including physical, financial, cultural, and attitudinal barriers.

In Tigray, the conflict has caused a humanitarian and protection crisis, with allegations of serious human rights abuses against the population. Violence prompted the near collapse of public services, with no police on the streets in urban areas, and no water supply or electricity. In addition, hospitals and dozens of health centres and supplies - including ambulances - were looted by parties to the conflict, while hundreds of health workers vacated their posts fleeing in search of safety. At the time of writing, communications remain cut off.

There is particular concern about the 96,000 Eritrean refugees living in Tigray due to the disruption of essential services and restricted humanitarian access to refugee camps, especially Hitsats and Shimelba camps where there has not been any access since the onset of the crisis.
As a result, many refugees are thought to have been displaced within Tigray or into neighbouring regions.

In Guji (Southern Oromia), access to health care remained highly compromised by limited health infrastructure, with service provision to IDPs often interrupted by insecurity rendering many facilities non-operational. Partners reported cases whereby health posts were being used by security forces. At the time of writing, some 80,000 IDPs have not received any emergency food assistance since March.

In West Wellega (Western Oromia), the worsening security situation significantly impacted the population’s access to essential services, with no presence of local officials in rural areas. In addition, insecurity forced partners to suspend critical activities, including assistance to some 58,000 IDPs (39,000 in West, 19,000 East Wellega). In addition, communications were shut down from January - March and November – December, impacting the population’s access to information and hampering partners’ operations. Despite such challenges, partners continued to stay and deliver services to the population, though at a much lesser scale, quality and frequency.

Through 2020, premature returns of IDPs by regional authorities to areas of origin, where tensions or unresolved conflicts remained - and lacking appropriate conditions - created numerous humanitarian and protection challenges. In May, Oromia and Somali administrations returned thousands of IDPs between East Hararge – Fafan. In
June, various incidents and clashes between opposing clans left dozens of IDP returnees killed or injured. In June, Amhara and BGR administrations returned thousands of IDPs to areas of origin in Awi (Amhara) and Metekel (Benishangul Gumuz), which at the time writing remain highly insecure due to attacks by UAGs against ethnic minorities which have forced the population to flee again within Metekel and to Awi. Aid partners expressed regret on the lack of consultation/coordination by regional authorities ahead of such IDP return processes, and on the limited adherence to humanitarian and durable solutions principles given the dire situation returnees faced in areas of return.

Physical access constraints
In May, WFP and the Logistic Cluster launched a system to monitor ‘road movements constraints’ in Ethiopia, and started issuing regular maps displaying the physical condition of roads.

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1.4 **Scope of analysis**

Humanitarian needs have been assessed and analyzed throughout the country at the woreda level, and all 1,042 woredas have been included in the analysis. National, zonal and regional level numbers presented in this document are the aggregates of woreda level results.

The three population groups which have been identified in previous sections as being affected, and for which sufficient evidence on their needs was available – as documented in Annex 4.1 – have been included in the detailed analysis in subsequent sections: IDPs, returned IDPs, and the general population who is not displaced.

Given the limited data availability, the needs of particularly vulnerable sub-groups, notably locally integrated IDPs, relocated or resettled IDPs, returned migrants, and urban poor, have been analysed as part of the general non-displaced population. Also, the analysis does not exclude clients of the Productive Safety Net Programme (PSNP).

Refugees are not included in this document, whose needs continue to be assessed in the Ethiopia Country Refugee Response Plan.

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**Scope of Analysis Matrix**

<table>
<thead>
<tr>
<th>Region</th>
<th>IDPs</th>
<th>IDP Returnees</th>
<th>General non-displaced population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Addis Ababa</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Afar</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Amhara</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Benishangul Gumuz</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Dire Dawa</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Gambela</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Harari</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Oromia</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Sidama</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>SNNP</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Somali</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

* However, no evidence was available on the number of climate induced IDPs in these regions.
1.5 Humanitarian conditions and severity of needs

While the various shocks in Ethiopia have a far-reaching impact on the population, they affect different people in different ways, and to varying degrees. This section analyses the humanitarian conditions of physical and mental well-being, living standards and coping mechanisms for the three main population groups, as well as the problems underlying these humanitarian conditions: severe food insecurity, excess morbidity, acute malnutrition, harmful child roles and relations, physical and psychosocial trauma, lack of hygiene and sanitation, lack of safe water, hindered access to essential goods, hindered access to essential services, unsafe and unhealthy living conditions, and negative coping mechanisms. These problems have been quantified through indicators (see Annex 4.2 for the indicator table) to analyze the severity of needs (this chapter) and the people in need (next chapter 1.6 Number of People in Need).

IDPs

Displacement, especially as a result of conflict and violence, threatens the safety and dignity of those displaced. It can lead to psychosocial trauma, which when unaddressed, can result in longer term anxiety and suffering, undermining individuals’ ability to cope and their future resilience. Up to 15 per cent of conflict IDPs are affected by mental health problems, most of them requiring psychological first aid while others require expert mental health care, according to the Health Cluster. Children who have witnessed violence are particularly affected.

Women, girls and boys, older persons, and persons living with disabilities are disproportionately affected by these shocks that can increase existing vulnerabilities and make them susceptible to GBV, exclusion from and ability to access services (particularly given low literacy rates amongst females), and discrimination. One of the immediate impacts of displacement is a heightened risk of GBV due to poor safety, and weak security measures in place. A lack of structures meant to provide safety, such as adequate lighting in and around communal spaces, increase the risk of GBV in crisis-affected communities. According to the DTM site assessment round 22, in 80 per cent of the woredas, where the IDP and returnees’ sites are located, 83 per cent have no or inadequate lighting in communal spaces.

Displacement increases the risk of family separation, placing children at heightened risk of maltreatment, different forms of violence, abuse and exploitation and increased risk of GBV, especially for girls. Woredas with high levels of conflict-driven displacement have high numbers of children engaged in exploitative and hazardous child labour, indicating an increased vulnerability of conflict displaced IDP boys and girls to child protection risks and rights violations. In addition, out-of-school IDP and mobile adolescent girls are at higher risk of commercial sexual exploitation and child labour, including domestic labour. Despite the growing needs, an estimated 198,909 IDP children are believed to be living in woredas without, or with only very limited access to, core child protection services, including family tracing and reunification (FTR) for unaccompanied and separated children to address growing child protection concerns. As emergencies grow, concerns for children grow exponentially. Child protection risks are further exacerbated by the fact that school-aged children from displaced populations living in host communities, camps, and camp-like settings have inadequate access to pre-primary and secondary education. According to data from DTM round 22, at least 53 per cent of pre-primary aged school children in IDP sites do not have access to learning facilities.
Malnutrition is prevalent among the displaced population as nursing mothers may stop breastfeeding due to psychological distress. Insufficient access to food and water also compromises adequate breastfeeding, as was the case among flood-induced IDPs in Zone 3 of Afar. Low coverage of nutrition screening among conflict-IDPs has made it difficult to determine the accurate level of malnutrition among the displaced population, and actual number of cases are likely to be higher than recorded figures.

IDPs are also disproportionately affected by limited access to water. Only 5 per cent of IDPs use water and soap/ash, and although 39 per cent of IDPs have access to improved water sources, the availability of the water sources within the premises is limited to only 1 per cent. Moreover, only 5 per cent of IDPs have access to 15 litres or more water, which is required for daily use for drinking, cooking, bathing, washing, or other domestic purposes. This lack of access to protected water sources and improved sanitation facilities and hygiene practices increases the risk of COVID-19, disease outbreaks such as cholera, and malnutrition. At the same time, only 31 per cent of IDPs have access to functioning latrines, resulting in widespread open defecation. This not only exacerbates the risk of disease outbreaks, but also adversely affects the water quality in the area, in turn, deteriorating living conditions. IDPs often live in
Many IDP sites do not have any formal site management structure in place. This is particularly concerning given that past experience illustrates a correlation between inadequate Site Management Support (SMS) services and an increase in protection concerns, which are then manifested as negative coping mechanisms. Further, while residence in collective sites is not considered a durable solution, in reality, most people, in particular conflict IDPs, remain in protracted displacement. Thousands of IDPs, as a consequence, lack security of tenure, which in turn prevents them from accessing safe and adequate shelter. The lack of access to safe and adequate housing has led to negative coping mechanisms such as leaving men and boys from 6 years old to sleep outside the shared dwellings. HLP disputes in Ethiopia have been exacerbated by inter-ethnic conflicts resulting in discrimination against certain groups in accessing their HLP rights, leading to more conflict, compounding and protracting displacement, and delaying progress towards durable solutions. IDPs, who have been forced to flee their homes because of violence and human rights violations, have been at heightened risk because of the pandemic, as their social support networks are often fragmented and coping mechanisms already stretched.

**Severity**

In terms of the severity of needs of IDPs, 56 per cent of woredas (220 out of 395) where IDPs reside are identified to be in extreme severity (severity category 4). Most of these woredas are in Oromia (64 woredas), Somali (62 woredas) and Tigray (39 woredas) Regions. This includes 16 woredas in East Hararge Zone (Oromia Region), 11 woredas in Central and 10 woredas in Eastern zones (Tigray Region), and 9 woredas in Afder Zone (Somali Region).

Among the woredas that are classified as extreme severity, the following woredas were of particular concern: Arero (Borena Zone, Oromia Region), Mustahil (Shabelle Zone, Somali Region), Barey (Afder Zone, Somali Region), Doba (West Hararge Zone, Oromia Region), Wajirat (South Eastern Zone, Tigray Region), Moyale (Borena Zone, Oromia Region), Melka Soda (West Guji Zone, Oromia Region) and Lege Hida (East Bale Zone, Oromia Region).
Map of the severity of needs for IDPs

Table of the number of woredas in each severity of needs category by region, for the IDPs

<table>
<thead>
<tr>
<th>Region</th>
<th>None/Minimal</th>
<th>Stress</th>
<th>Severe</th>
<th>Extreme</th>
<th>Catastrophic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Addis Ababa</td>
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<tr>
<td>Afar</td>
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<tr>
<td>Amhara</td>
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<tr>
<td>Benishangul Gumz</td>
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<td>Dire Dawa</td>
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<tr>
<td>Gambela</td>
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<tr>
<td>Harari</td>
<td>1</td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>Oromia</td>
<td>5</td>
<td>49</td>
<td>64</td>
<td></td>
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</tr>
<tr>
<td>Sidama</td>
<td>2</td>
<td>2</td>
<td></td>
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<tr>
<td>SNPP</td>
<td>19</td>
<td></td>
<td>19</td>
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<tr>
<td>Somali</td>
<td>14</td>
<td></td>
<td>62</td>
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<tr>
<td>Tigray</td>
<td>34</td>
<td>39</td>
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</tr>
</tbody>
</table>
**IDP Returnees**

IDP returnees who have returned to their area of origin, often do not have the right documentation required to claim their HLP. Lack of legal identity documents exposes IDP returnees to additional protection risks, including movement restrictions, lack of access to livelihood opportunities, lack of access to safe and adequate shelter, and a lack of access to education, health, and sometimes humanitarian assistance.

Similar to IDPs, IDP returnees have huge problems accessing essential WASH services. While 25 per cent of IDP returnees access water through improved water sources, the availability of water sources in close vicinity is again limited. Only 8 per cent of IDP returnees are able to access 15 litres or more of water, required for drinking, washing, and cooking. In woredas like Siraro and Shalla in Southern Oromia, for example, critical water shortages have led to IDP returnees spending the majority of their incomes on water purchases, leaving them unable to pay for their other basic needs. Similarly, IDP returnees struggle to access latrines; only 53 per cent of IDP returnees reporting access to functioning latrines. As a result, there is a wide practice of open defecation which exacerbates the risk of disease outbreaks and affects the water quality on which the population depends, ultimately negatively impacting their living conditions. Limited sanitation facilities increase the risk of GBV as well as health risks, especially for women and girls who limit water intake to restrict their need to use latrines, may travel longer distances to reach facilities, or defecate in the open. Inequitable access to existing sanitation facilities also increases the vulnerability of older persons and PWD, who may not have barrier-free access to such services.

**Severity**

Of particular concern, Hudet woreda in Daawa Zone of Somali Region has been identified to face catastrophic conditions (severity category 5). In Hudet, basic services have been damaged due to the conflict two years ago, IDP returnees lack livelihoods, most of the IDP returnees have disputes over HLP, and there are no mechanisms available to them to resolve these disputes.

68 per cent of woredas (78 out of 115) where IDP returnees reside are identified to be in extreme severity. Most of these woredas are in Oromia (37 woredas) and Somali (14 woredas) Regions. This includes 7 woredas in East Wellega, 6 woredas in East Hararge, 6 woredas in West Guji, 5 woredas in West Hararge Zone (Oromia Region), 5 woredas in Gedeo Zone (SNNP Region), and 5 woredas in Shabelle Zone (Somali Region).

Among the woredas that are classified as extreme severity, the following woredas were of particular concern: Dawe Ketchen (East Bale Zone, Oromia Region), Boji Dirmeji (West Wellega Zone, Oromia Region), Babile (Fafan Zone, Somali Region), Raya Alamata (Southern Zone, Tigray Region) and Lege Hida (East Bale Zone, Oromia Region).
PART 1: IMPACT OF THE CRISIS AND HUMANITARIAN CONDITIONS

Map of the severity of needs for IDP Returnees

Table of the number of woredas in each severity of needs category by region, for the IDP Returnees

<table>
<thead>
<tr>
<th>Region</th>
<th>None/Minimal</th>
<th>Stress</th>
<th>Severe</th>
<th>Extreme</th>
<th>Catastrophic</th>
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</thead>
<tbody>
<tr>
<td>Addis Ababa</td>
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<tr>
<td>Afar</td>
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<tr>
<td>Amhara</td>
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<tr>
<td>Benishangul Gumz</td>
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<tr>
<td>Dire Dawa</td>
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<tr>
<td>Gambela</td>
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<tr>
<td>Harari</td>
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<tr>
<td>Oromia</td>
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<tr>
<td>Sidama</td>
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<tr>
<td>SNNP</td>
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<tr>
<td>Somali</td>
<td></td>
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</tr>
<tr>
<td>Tigray</td>
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</tr>
</tbody>
</table>
General population

Children are among the hardest hit by the humanitarian situation. Regarding physical wellbeing, numerous forms of malnutrition co-exist in Ethiopia, with a national prevalence of anemia at 56 per cent among children and a very high prevalence of stunting in most regions and especially in Afar, Tigray, and Amhara Regions. While only 7 per cent of children across the country receive a minimum acceptable diet, the highest rates of malnutrition are found among the urban poor and certain rural areas. In particular, UASC, or children living or working on the street are at an increased risk of malnutrition which threatens their physical well-being and their lives. As of the end of November 2020, nationwide, the number of children admitted for severe acute malnutrition (SAM) treatment reached unprecedented levels, with over 37,000 children with SAM admitted per month, for six consecutive months (Figure 1).

Child protection risks are further aggravated by lack of access to education. While the Net Enrolment Ratio (NER) national average has been increasing over the last six years, indicating 94.7 per cent enrolment ratio for the 2018/2019 fiscal year, regional variations remain a concern. In Afar and Somali, the average NER were 46 per cent and 66 per cent respectively and ongoing shocks in these regions and other emergency-affected areas have only worsened the situation. Further, critical WASH situations at schools, including limited access to latrines, increases girls’ risk of drop-outs, which in turn, increases child protection risks.

With prolonged school closures and reduced livelihood opportunities at household level, children have been vulnerable to negative coping mechanism such as child labour, child and forced marriage and transactional sex due to the pandemic.

Women and girls across Ethiopia are also disproportionately affected by the shocks. Gender norms combined with power imbalances increase the risk that men and boys will be prioritized over women and girls in the distribution of and decision-making around food, and that women, children, and older persons who have specific nutrition needs will not receive adequate or appropriate food to meet their unique needs. Women and girls, in particular, may decrease meals (or meal sizes) as a coping mechanism to deal with food insecurity. Security concerns limiting or preventing access to health and nutrition services and /or food distribution sites may also be a challenge for women and girls.

Additionally, the loss of livelihoods and inability to meet basic needs have led to a rise in intimate partner violence (which predominately affects women), as well as increased reliance on negative coping mechanisms, like transactional sex, child labour and early marriage. Adolescent girls were exceptionally vulnerable to child protection risks as they transitioned from childhood to adulthood and began taking on adult roles, but without some of the capabilities and skills they needed.

Irregular migrants who return to Ethiopia with very limited economic resources, and often with psychological and medical issues, are one of the vulnerable groups. Most migrants returning to Ethiopia from neighbouring countries cross the border at relatively remote PoE, where the delivery of food and non-food items, as well as adequate medical and WASH services and facilities, is often challenging. IOM data collected from May to December 2020 also indicates that 73 per cent of returning migrants at quarantine centers, temporary shelters, as well as PoE were in need of improved access to WASH services, including clean water.

Regarding physical and mental wellbeing, many returning migrants suffer from mild to severe psychosocial trauma as they often have experienced physical abuse, sleep deprivation, illegal detention, forced labor, and theft including wage theft before and during their travel. From March to December 2020, IOM identified 877 returning migrants suffering from psychosocial problems including excessive anxiety, addiction, and psychosomatic disorder such as headaches, body pains, flashback and Post Traumatic Stress Disorder (PTSD) symptoms. Child protection is of particular concern at land border points of entry, where protection services, including FTR for UASC, are challenging to provide. The 1,776 UASC registered
Map of the severity of needs for general non-displaced population

Table of the number of woredas in each severity of needs category by region, for general non-displaced population

<table>
<thead>
<tr>
<th>Region</th>
<th>None/Miraa</th>
<th>Stress</th>
<th>Severe</th>
<th>Extreme</th>
<th>Catastrophic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Addis Ababa</td>
<td>2</td>
<td>5</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Afar</td>
<td>3</td>
<td>16</td>
<td>20</td>
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</tr>
<tr>
<td>Amhara</td>
<td>34</td>
<td>68</td>
<td>58</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>Benishangul Gumz</td>
<td>3</td>
<td>11</td>
<td>3</td>
<td>3</td>
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</tr>
<tr>
<td>Dire Dawa</td>
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<td>1</td>
<td>3</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Gambela</td>
<td>2</td>
<td>12</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Harari</td>
<td>2</td>
<td>3</td>
<td>1</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Oromia</td>
<td>100</td>
<td>102</td>
<td>123</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Sidama</td>
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<td>15</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SNNP</td>
<td>15</td>
<td>100</td>
<td>65</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>Somali</td>
<td>43</td>
<td>56</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tigray</td>
<td>9</td>
<td>3</td>
<td>63</td>
<td>8</td>
<td></td>
</tr>
</tbody>
</table>
by IOM between April and December 2020 are at particular risk.

GBV is another protection concern that aggravates the already dire condition of returning migrants. From March to December 2020, IOM identified 196 survivors of GBV among returning migrants. The actual number is likely to be much higher. Many were the victims of rape committed by smugglers, employers, and employers’ family members. Despite the prevalent fear of GBV reporting among the returning migrants due to fear of news spreading to their families and friends back home, the reported cases were brought to attention because the victims became pregnant or sought medical treatment after developing medical complications like fistula.

Irregular migration is particularly prevalent in certain parts of the country, with a few dozen woredas in approximately a dozen zones being of particular concern. According to IOM data collected from March 2017 to August 2020, most popular woredas of origin where many migrants from KSA returned to were identified to be located in: North and South Wello, North Shewa, and Oromia Zones in Amhara Region (9 woredas); East and West Hararghe and East and West Arsi zones in Oromia Region (8 woredas); and Eastern, Southern, South Eastern, North Western and Central Zones in Tigray Region (11 woredas). 61

Severity
In terms of the severity of needs of the general population, 12 per cent of woredas (118 out of the 1,010 for which data was available) are identified to be in extreme severity (. Most of these woredas are in Somali (56 woredas) and Afar (20 woredas) Regions. This includes 8 woredas in Korahe, 7 woredas in Jarar, 7 woredas in Shabelle, 6 woredas in Afder, 6 woredas in Liban, and 6 woredas in Siti Zones (Somali Region), and 6 woredas in Awsi/Zone 1 and 6 woredas in Gabi/Zone 3 (Afar Region). Outside Somali and Afar Regions, most woredas with extreme severity are found in Wag Hamra (Amhara Region), Metekel (Benishangul Gumuz Region), West Arsi (Oromia Region) Sheka (SNNP Region) and Eastern (Tigray Region) Zones.
## 1.6 Number of people in need

The number of people in need has been analyzed for each quarter of 2021. The number of people in need was determined through an intersectoral analysis and involved the review of both primary and secondary data, followed by consultations and verifications of outcomes with field colleagues (see Annex 4.2 for the Methodology and the indicator table).

In the first three months of 2021, an estimated 23.5 million people have been identified to have humanitarian needs. This includes 2.7 million IDPs, 1.3 million IDP returnees, and 19.5 million people among the general non-displaced population. The highest number of people in need are in Oromia Region (6.7 million), followed by Tigray Region (4.5 million), Somali Region (3.8 million) and Amhara Region (3.4 million). Risk analysis (section 2.1) and corresponding projections of needs indicate that this number is expected to rise slightly in the second and third quarters (23.8 million) before it reduces to 21.7 million in the last quarter of 2021.

<table>
<thead>
<tr>
<th>AREA</th>
<th>CURRENT PIN (JAN-MAR)</th>
<th>BY GENDER WOMEN / MEN (%)</th>
<th>BY AGE CHILDREN / ADULTS / OLDER PERSONS (%)</th>
<th>WITH DISABILITY (%)</th>
<th>[IDPs]</th>
<th>IDP RETURNEEs</th>
<th>[GENERAL POPULATION]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Addis Ababa</td>
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<td>52</td>
<td>48</td>
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<td>58</td>
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<tr>
<td>Afar</td>
<td>1.0M</td>
<td>46</td>
<td>54</td>
<td></td>
<td>56</td>
<td>40</td>
<td>4</td>
</tr>
<tr>
<td>Amhara</td>
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<td>50</td>
<td></td>
<td>49</td>
<td>44</td>
<td>8</td>
</tr>
<tr>
<td>Benishangul Gumuz</td>
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<td>49</td>
<td>51</td>
<td></td>
<td>48</td>
<td>47</td>
<td>4</td>
</tr>
<tr>
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<td>65K</td>
<td>50</td>
<td>50</td>
<td></td>
<td>55</td>
<td>41</td>
<td>4</td>
</tr>
<tr>
<td>Gambela</td>
<td>90k</td>
<td>49</td>
<td>51</td>
<td></td>
<td>57</td>
<td>40</td>
<td>3</td>
</tr>
<tr>
<td>Harari</td>
<td>41k</td>
<td>50</td>
<td>50</td>
<td></td>
<td>48</td>
<td>47</td>
<td>5</td>
</tr>
<tr>
<td>Oromia</td>
<td>6.7M</td>
<td>50</td>
<td>50</td>
<td></td>
<td>54</td>
<td>41</td>
<td>5</td>
</tr>
<tr>
<td>Sidama</td>
<td>741k</td>
<td>50</td>
<td>50</td>
<td></td>
<td>55</td>
<td>41</td>
<td>4</td>
</tr>
<tr>
<td>SNNP</td>
<td>2.8M</td>
<td>51</td>
<td>49</td>
<td></td>
<td>53</td>
<td>43</td>
<td>5</td>
</tr>
<tr>
<td>Somali</td>
<td>3.8M</td>
<td>49</td>
<td>51</td>
<td></td>
<td>59</td>
<td>36</td>
<td>5</td>
</tr>
<tr>
<td>Tigray</td>
<td>4.5M</td>
<td>52</td>
<td>48</td>
<td></td>
<td>48</td>
<td>46</td>
<td>6</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>23.5M</strong></td>
<td>**50</td>
<td>50</td>
<td></td>
<td>**53</td>
<td>42</td>
<td>6</td>
</tr>
</tbody>
</table>
Similarly to 2020, there are likely to be new displacements in 2021 due to climate shocks and conflict. However, some of the current IDPs - those who indicated a preference for returning back to their area of origin - are expected to return. This would therefore increase the number of IDP returnees in need throughout 2021 since they require humanitarian assistance in the first few months of their return.

The people in need among the general non-displaced population is expected to reduce gradually throughout 2021, factoring in a resolution to the conflict in Tigray, eventual reduced impact of COVID-19 and an improvement in the overall food security situation. There will, however, be new needs arising in the next quarters among this population group, including pockets of deteriorating food insecurity, anticipated cases of acute malnutrition, people facing water and sanitation needs, and people infected by disease outbreaks.

In terms of returning migrants, it is difficult to provide quarterly projections due to the changing nature of movements. Assuming that the COVID-19 pandemic abates and travel along irregular migration routes becomes progressively easier in 2021, returns are expected to increase substantially and move towards pre-pandemic levels. In total, 181,679 returning migrants are forecasted to be in need of assistance, including 120,825 returnees from KSA, 47,254 returning migrants from neighbouring countries, 10,300 voluntary returnees, and 3,300 returning migrants who may be registered at IOM Emergency Migration Response Centers (EMRCs).
Part 2:
Risk Analysis and Monitoring of Situation and Needs

CHAGNI IDP CAMP/AMHARA REGION, ETHIOPIA
Bosena Wube brings her son Salleamlak for nutritional assessment. Photo: UNICEF/Mulugeta Ayene
2.1 Risk Analysis

Ethiopia is categorized as a high-risk country for humanitarian crises, ranking second in the International Crisis Group’s list of conflicts to monitor in 2021\textsuperscript{12}, and ranking 18th out of 191 countries when considering levels of exposure to hazards, vulnerability, and lack of coping capacity, according to the 2021 INFORM index for Risk Management.\textsuperscript{63} The trends over the last three years compared to the ten-year average show that the risk in Ethiopia is increasing.

The conflict in Tigray which started on 4 November 2020 poses a huge risk to the country’s vulnerability. The longer this conflict continues, the more likely it is to have a knock-on effect to other hotspot areas throughout the country, resulting in ethnic violence including massacres as seen recently in Mai-Kadra in Tigray, West-Wollega Zone in Oromia, and Metekel Zone in Benishangul Gumuz.

There is a high likelihood of an increase in social unrest and localized conflict before, during, and after the re-scheduled national elections – preliminary due to take place on 5 June 2021 – which may result in new displacements and rising humanitarian needs.

Besides the risk of ongoing and future conflicts, the combination and recurrence of other shocks such as COVID-19, drought, floods, and the desert locust infestation is expected to continue placing people at risk.

COVID-19 in particular has drastically changed the humanitarian context in Ethiopia. The pandemic has disproportionately affected crisis-affected communities as well as created new significant humanitarian and socio-economic needs in densely populated areas such as urban and IDP settings. The economic impact and increased unemployment as a result of the pandemic is likely to continue affecting already vulnerable families and communities into 2021.

Coupled with the pandemic, the desert locust infestation has also sharply contributed to increased food insecurity in the country and the impact of the locust infestation of 2020 will continue to affect agricultural outputs in 2021 as swarms continue to breed. Projections indicate that the upsurge is likely to persist at least until the end of the belg season 2021. Moreover, given the prevailing northerly winds, the locusts will most likely continue moving southwards towards Southern areas of Somali, Oromia, and SNNP.

\begin{table}[h]
\centering
\begin{tabular}{|c|c|c|}
\hline
\textbf{INFORM RISK} & 2011 & 2021 \\
\hline
\textbf{HAZARD} & \textbf{6.3} & \\
\hline
\textbf{EXPOSURE} & \textbf{5.7} & \\
\hline
\textbf{VULNERABILITY} & \textbf{6.5} & \\
\hline
\textbf{LACK OF COPING} & \textbf{6.8} & \\
\hline
\end{tabular}
\caption{INFORM – is a way to understand and measure the risk of humanitarian crises. It is an open-source methodology for quantitatively assessing crisis and disaster risk. The INFORM model is based on risk concepts published in scientific literature and envisages three dimensions of risk: hazards & exposure, vulnerability and lack of coping capacity dimensions. The results are a risk profile for every country, which consists of a value between 0-10 for the INFORM Risk Index and all of its underlying dimensions, categories, components and indicators. At all levels of the INFORM model, a lower value (closer to 0) always represents a lower risk and a higher value (closer to 10) always represents a higher risk.}
\end{table}

For more information, visit: www.inform-index.org
According to IPC (September 2020), damage from desert locusts coupled with below-average rainfall will lead to significant losses of crop and pasture in bimodal areas despite large-scale control measures. FAO projects that approximately 2.5 million additional people will be at risk of food insecurity because of desert locust impacts in Ethiopia in 2021.

According to the World Meteorological Organization (WMO), La Niña conditions that started in the last quarter of 2020 will likely continue into 2021. Having already led to drier than usual conditions during the October-December rainy season in Southern and South-Eastern Ethiopia and will likely have a negative impact on the spring rains in 2021. The expected below-average gu/genna/belg rains (April – June 2021) will adversely affect belg 2021 crop performance, livestock body conditions, and productivity. Water sources and pasture are also expected to be below-average, and cross-border migration with livestock in search of water and pasture may spark resource-based conflicts.

The nutrition situation in Southern and Southeastern areas will most likely deteriorate through July 2021, the typical belg lean period, due to limited access to food (including milk) and income. Meher production is also expected to be below average in some Southern, Central, and Eastern parts of the country due to limited supply of inputs, flood-induced damages and localized crop losses associated with desert locusts. Although grain supply across the country remains low, IPC analysis (September 2020) indicates that a further reduction in grain supply is likely due to the below-average meher harvest. As such, prices of locally produced staple cereals, such as sorghum, maize, barley, and teff, are likely to increase. The situation is likely to be exacerbated by the combined effects of the desert locust invasion and COVID-19.
In an attempt to mitigate the humanitarian impact of these shocks, the OCHA Ethiopia Country Team, together with the Inter-Cluster Coordination Group (ICCG), developed an anticipatory action pilot for drought. This pilot consists of pre-agreed triggers, pre-agreed financing, and pre-agreed multi-sectoral interventions to be implemented before the impact of the drought is felt. Following recent projections indicating that the triggers have been met for the zones listed above, the anticipatory action pilot was activated on 7 December 2020 and for which USD 20 million has been made available by Central Emergency Response Fund (CERF). The pre-agreed interventions will be implemented as a package in these prioritized areas and aim to limit human suffering and future humanitarian needs as a result of drought.

Anticipatory actions can be implemented to mitigate the impact of the expected decline in food security. As of the beginning of 2021, the following support is required ahead of planting for the belg and gu seasons:

- Support vulnerable households ahead of planting for the long-rains season in belg and gu seasons in Ethiopia, through provision of agricultural inputs and cash (cash+).
- Intensify monitoring and control of desert locusts to prevent further spread and related damages.
- Conduct disease surveillance, vaccinations and treatment of core breeding stocks.
- Support vulnerable households in pastoral areas with animal supplementary feed before animal conditions start deteriorating.

**Displacement**

To complement the risk analysis, the Humanitarian Needs Overview (HNO) analysis team consulted humanitarian colleagues in different regions of the country to understand how the situation in 2021 could evolve in terms of displacement. The three main drivers that were discussed were conflict, drought and flood. The regional experts were tasked to identify the most likely scenario in their region and their impact on displacement.
<table>
<thead>
<tr>
<th>REGION</th>
<th>SCENARIO AND IMPACT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Afar</td>
<td>In Zone 3, bordering the Somali Region, regional experts estimate that it is likely that the current conflicts/tension will continue into 2021, resulting in new displacement within the zone. In terms of flooding, it is very likely that currently displaced people will return to their area of origin. In most of the zones, drought in 2021 will likely cause new displacement in the region.</td>
</tr>
<tr>
<td>Amhara</td>
<td>A number of woredas in Central Gondar, North Gondar, South Gondar, East Gojam, Waghamira, North Wollo and South Wollo are prone to drought. It is likely that they will be affected in 2021 leading to shortage of food, malnutrition and shortage of water. With the situation in Tigray, areas near the border with Tigray-especially Central Gondar will continue to receive/host IDPs fleeing from the border areas. The situation in the neighboring Metekel Zone in Benishangul Gumuz Region will continue to escalate in 2021 leading to more IDP influx into Awii Zone in Amhara Region.</td>
</tr>
<tr>
<td>Tigray</td>
<td>Experts are of the view that the crisis in Tigray will be protracted in 2021. The current IDPs in the region will continue to live in displacement, while there is high likelihood of new displacement as a result of the fragile security situation in the region. The situation in Tigray will continue to impact the overall living conditions of the resident population in all the zones with high likelihood of increased levels of food insecurity, malnutrition, disease outbreak and economic hardship. Displaced people in particular will be at greater risk.</td>
</tr>
<tr>
<td>Benishangul</td>
<td>In all the zones in the region, regional experts estimate that it is very likely that conflicts/tensions will increase throughout the year and also specifically around the national election period. This could result in a major increase in new displacements in the region and neighboring regions.</td>
</tr>
<tr>
<td>Gumuz</td>
<td>Regional experts estimate that it is very likely that conflict / tension will increase during 2021 in all zones within the region. They also indicated that it is very likely that the region will be affected by floods during the rainy season in 2021. Both scenarios could result in a major increase in displacements in the region.</td>
</tr>
<tr>
<td>Gambela</td>
<td>In the South-East part of the region (Konso, Alle, Derashe, Amaro Zones) as well as the Western part (Ben Sheko, Sheka Zones), regional experts estimate that current conflict/tension will likely continue in 2021 and could lead to new displacements. In most of the other Zones in the region (Gedeo, South Omo, Siltie, Gamo, Yem), it is estimated that currently displaced people (due to conflict or floods) should be able to return to their area of origin or integrate into the host community as conflicts/tensions are expected decrease in 2021.</td>
</tr>
<tr>
<td>SNNP</td>
<td>The regional experts estimate that it is likely that current conflict/tension will decrease in this newly created region. As a result, IDPs should be able to return to their area of origin or integrate into host communities.</td>
</tr>
<tr>
<td>Sidama</td>
<td>Regional experts think that the likelihood of conflict / tension around the national election period in zones bordering Oromia as well as in zones where new administrative levels have been created is very high. As a result, new displacements are likely. The Southern and Eastern parts of the region are expected to receive below-average rainfall, which could trigger new displacements. In terms of IDPs currently displaced due to floods in 2020, regional experts believe they should be able to return to their area of origin.</td>
</tr>
<tr>
<td>Somali</td>
<td>In Oromia, current conflicts between UAGs and the Government in several Zones in Western Oromia (East, West, and Kelem Wellegas), and Southern part (Gugi and West-Gugi) are very likely to continue in 2021. This could result in new displacements within these zones. In Borena Zone (Southern Oromia), it is expected that existing IDPs will integrate into host communities. There is also a chance of below-average rainfall in the Southern and Eastern parts of the region which could result in new displacements. In East and West Hararge, and especially in woredas bordering the Somali Region, regional experts estimate that it is very likely that conflicts/tensions will increase around the national election period.</td>
</tr>
<tr>
<td>Dire Dawa</td>
<td>Regional experts estimate that it is likely that conflicts/tensions will arise around the national election period which may result in new displacements. Ongoing tensions regarding IDPs currently in Dire Dawa are likely to continue in 2021.</td>
</tr>
<tr>
<td>Harari</td>
<td>Regional experts estimate that it is very likely that conflicts/tensions will arise around the national election period which could result in new displacements.</td>
</tr>
</tbody>
</table>
Protection

These shocks have serious protection consequences, especially for already at-risk groups such as women, girls, IDPs, IDP returnees / relocated IDPs, returning migrants, PWD, older persons, and people living in poverty. With partners increasingly characterizing the situation in Ethiopia as a “protection crisis”, in 2021, the protection situation may evolve as below:

1. Predicted below-average spring rains will negatively affect pastoralist and agro-pastoralist households in many lowland areas of the country. This, coupled with the consequences of conflict and compounded poverty, may contribute to further depletion of agricultural assets, resulting in households resorting to negative coping mechanisms. The use of negative coping mechanisms to bridge the food gap not only leads to distressed selling of assets, but also has major protection threats, including child labour and GBV. Households headed by at-risk population groups including PWD, children, women, and chronically ill persons are particularly disadvantaged as they have limited or constrained ability to access agricultural inputs from their own production and / or market sources. Their social networks may become further threatened or broken by the recurrent conflicts across the country.

2. In areas at high risk of conflict, farmers fear cultivating their land due to risk of confiscation of their harvests by fighting groups or of displacement before the harvesting season. This recently happened in Tigray following the onset of the conflict when many farmers became displaced within Tigray, to neighbouring regions, or to Sudan, leaving their lands unattended during the peak harvesting season. This loss of annual food and income will further exacerbate the dire food security situation for people living in the region. In turn, an increase in the number of households adopting negative coping mechanisms and protection risks is expected.

3. Recent assessments indicate that the number of displaced persons is expected to increase due to heightened insecurity as a result of ethnic and political tension. An increase in displacement can severely disrupt livelihood systems and add pressure on already-limited viable land, assets, and livelihood opportunities. This, along with limited agriculture-based support to IDPs, can increase tensions between them and host communities.

4. Limited access to water is a key concern for all population groups across the country. For IDPs and IDP returnees, the majority of water sources is reported to be more than 20 minutes away from IDP sites and returnee villages. Predicted La Niña conditions and below-average rainfall particularly in the South and South-Eastern parts of the country increase protection risks, particularly for women and girls who are most often responsible for collecting water. Water shortages in school are of particular concern as this leads to increased school drop-outs, especially among adolescent girls as they are kept out of school to support with domestic chores or income-generating activities, which in turn increases child protection risks.

5. The recurrence of climatic shocks in some areas of the country, which impacts livelihood opportunities and the food security situation, reduces the coping capacities and resilience to future shocks of affected communities. Zones 1, 2, 3, and 4 in Afar, South Omo Zone in SNNP, and Afder and Liban Zones in Somali Region, for example, experienced a recent drought and, based on current projections, are at risk of below-normal 2021 spring rains. Two consecutive failed rains can have a devastating protection impact on communities living in these areas.
2.2 Monitoring of Situation and Needs

The Government of Ethiopia and humanitarian partners have put in place the following systems and tools to regularly monitor the humanitarian situation and needs:

1. **Early Warning and Response Directorate (EWRD):**
   The NDRMC, in collaboration with relevant line ministries, collects weekly and monthly woreda-level monitoring data on weather conditions, crop performance, livestock conditions, market conditions, labour, water for humans, education, health, nutrition, flood and landslides.

2. **Household Economy Approach (HEA):** NDRMC adopts the HEA as a key analysis tool to determine the number of beneficiaries and the duration of assistance in food and agriculture sectors, as well as the economic decisions at the household-level. It uses the Livelihood Impact Analysis Sheet tool (LIAS), the Livelihoods, Early Assessment and Protection system (LEAP), and the government-led seasonal spot check assessments, as well as the IPC analysis. In 2021, the IPC TWG plans to update the food security situation for Tigray by March/April, should data collection be possible, to account for the effects of the conflict on the food security situation. Similar to 2020, the IPC TWG will produce two reports to coincide with belg and meher seasons.
3. **Food Security Monitoring Systems (FSMS):** FSMS data collection and market analysis will be conducted through two household food security surveys and market monitoring assessments.

4. **FEWS NET:** To estimate projected food insecurity, FEWS NET develops detailed scenarios at least three times per year. FEWSNET analyses will be used as a general input to understand the current situation as well as to predict future food outcomes.

5. **WFP Market Monitoring** collects retail prices of staple cereals, other key food items and livestock markets from over 60 markets across the country.

6. **DTM:** DTM, through Site Assessments and Village Assessment Surveys (VAS), will regularly collect data to monitor the number of displaced people and their multi-sectoral needs throughout the country. Both Site Assessments and VAS are conducted on a quarterly basis, and the findings are combined in DTM’s quarterly National Displacement Report. In response to the Northern Ethiopia Crisis, DTM deployed its new Emergency Site Assessment (ESA) in Tigray and in neighbouring zones in Afar and Amhara in December 2020. The ESA will be conducted on a monthly basis in 2021 in response to the Northern Ethiopia Crisis.

7. **Seasonal assessments:** The Government of Ethiopia leads a multi-sector and multi-agency national needs assessment are twice a year, closely linked to the agricultural cycle.

8. **Humanitarian Situation Monitoring (HSM):** REACH is currently implementing a HSM pilot focusing on the populations affected by the Tigray crisis. REACH will collect HSM data twice a month and produce one factsheet for each round of data collection. These factsheets will provide data on the humanitarian situation, needs, and displacement trends of the assessed areas. REACH will also produce two quarterly Situation Overviews for each quarter, providing an overview of both qualitative and quantitative data to summarize changing trends and triangulate REACH HSM data with secondary sources.

9. **ACAPS** will provide targeted analysis to humanitarian decision-makers to promote a shared understanding of the crisis including support to needs assessments (including via secondary data reviews and other areas of work) and on-demand analytical products.

For more details regarding these tools and systems, please see Annex 4.1 and respective Cluster sections.
Part 3: 
**Sectoral Analysis**
### 3.1 Agriculture

**People in Need:** 13.0M

- **Trend (2018-2020):**
- **Severity of Needs:**
  - None/Minimal: 0%
  - Stress: 42%
  - Severe: 58%
  - Extreme: 0%

### 3.2 Education

**People in Need:** 8.5M

- **Trend (2018-2020):**
- **Severity of Needs:**
  - None/Minimal: 15%
  - Stress: 33%
  - Severe: 41%
  - Extreme: 11%
### 3.3 ES/NFI

**People In Need**

**Trend (2018-20210)**

**Severity of Needs**

<table>
<thead>
<tr>
<th>None/Minimal</th>
<th>Stress</th>
<th>Severe</th>
<th>Extreme</th>
<th>Catastrophic</th>
</tr>
</thead>
<tbody>
<tr>
<td>0%</td>
<td>1%</td>
<td>10%</td>
<td>70%</td>
<td>19%</td>
</tr>
</tbody>
</table>

**Number of people in need**

- **Addis Ababa**: 100K
- **Others**: 4.5M

### 3.4 Food

**People In Need**

**Trend (2018-2020)**

**Severity of Needs**

<table>
<thead>
<tr>
<th>None/Minimal</th>
<th>Stress</th>
<th>Severe</th>
<th>Extreme</th>
<th>Catastrophic</th>
</tr>
</thead>
<tbody>
<tr>
<td>48%</td>
<td>32%</td>
<td>17%</td>
<td>4%</td>
<td>0%</td>
</tr>
</tbody>
</table>

**Number of people in need**

- **Addis Ababa**: 1M
- **Others**: 13.7M
3.5 Health

<table>
<thead>
<tr>
<th>PEOPLE IN NEED</th>
<th>TREND (2018-2021)</th>
<th>SEVERITY OF NEEDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.8M</td>
<td></td>
<td>None/Minimal 0%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Stress 97%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Severe 3%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Extreme 0%</td>
</tr>
</tbody>
</table>

3.6 Nutrition

<table>
<thead>
<tr>
<th>PEOPLE IN NEED</th>
<th>TREND (2018-2021)</th>
<th>SEVERITY OF NEEDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>7.1M</td>
<td></td>
<td>None/Minimal 32%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Stress 51%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Severe 16%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Extreme 2%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Catastrophic 0%</td>
</tr>
</tbody>
</table>
### 3.7 Protection

**PEOPLE IN NEED**

5.3M

**TREND (2018-2020)**

**SEVERITY OF NEEDS**

- 24% None/Minimal
- 34% Stress
- 27% Severe
- 11% Extreme

### Child Protection (CP)

**PEOPLE IN NEED**

3.2M

**TREND (2018-2020)**

**SEVERITY OF NEEDS**

- 24% None/Minimal
- 34% Stress
- 27% Severe
- 11% Extreme
Gender Based Violence (GBV)

**PEOPLE IN NEED**

2.5M

**TREND (2018-2021)**

**SEVERITY OF NEEDS**

- 24% None/Minimal
- 33% Stress
- 31% Severe
- 9% Extreme

Housing, Land and Property (HLP)

**PEOPLE IN NEED**

1.9M

**TREND (2018-2020)**

**SEVERITY OF NEEDS**

- 30% None/Minimal
- 34% Stress
- 21% Severe
- 8% Extreme

**HUMANITARIAN NEEDS OVERVIEW 2021**

1.9M PEOPLE IN NEED

PEOPLE IN NEED

SEVERITY OF NEEDS

Addis Ababa

Number of people in need

100k
50k
10k

SEVERITY OF NEEDS

Addis Ababa

SEVERITY OF NEEDS

Addis Ababa

Number of people in need

100k
50k
10k

SEVERITY OF NEEDS

Addis Ababa

SEVERITY OF NEEDS
Site Management Support (SMS) Services

**PEOPLE IN NEED**

- **TREND (2018-20210)**
- **SEVERITY OF NEEDS**
  - 14% None/Minimal
  - 22% Stress
  - 35% Severe
  - 18% Extreme

**PEOPLE IN NEED**

**SEVERITY OF NEEDS**

![Map of people in need](image)

**WASH**

**PEOPLE IN NEED**

- **TREND (2018-2020)**
- **SEVERITY OF NEEDS**
  - 0% None/Minimal
  - 1% Stress
  - 60% Severe
  - 40% Extreme

**PEOPLE IN NEED**

**SEVERITY OF NEEDS**

![Map of people in need](image)
3.1 Agriculture

The increasing frequency and magnitude of climatic shocks and pests over the recent years have left many rain-dependent farming and herding communities of Ethiopia particularly vulnerable to food insecurity. Over 16 million people living in desert locust infested locations are adversely affected and their livelihoods threatened. Consecutive seasons of poor rainfall in Southern and South-Eastern pastoral areas have severely limited feed and water availability, resulting in significant livestock losses, which have contributed to rising food insecurity and malnutrition rates. The condition will be exacerbated by the combined effect of COVID-19, recent floods, conflict, and predicted La Niña conditions; below average harvests in some Southern, Central, and Eastern parts of the country. Overall, desert locust, conflict and climate-induced shocks have undermined households’ capacity to sustain their productive assets, protect their livelihoods and access nutritious food.

The 2.4 million farming and herding households will therefore be unable to meet basic household food requirements during 2021 and their livelihood assets will be at risk following likely negative coping mechanisms.

Affected Population

More than 80 per cent of people in rural Ethiopia rely on agriculture for their livelihoods. Thus, any pest or climate-induced shock adversely affects the livelihoods and food security of crop and or livestock dependent vulnerable households.

Households in over 170 woredas are experiencing or experienced desert locust upsurge (e.g. Afar, SNNP, Somali, Oromia, Amhara, Tigray), and will likely yield poor crop harvests and reduced pastures. While low-land drought-prone areas are likely to have below-average rainfall, pastoral and agro-pastoral households in flood-prone areas of Afar, Oromia and SNNP are threatened by seasonal floods. Returnees to these areas facing already critical needs are likely to face serious food security gaps. Female-headed households, children, older persons and single men are projected to face more significant agricultural needs.

Analysis Of Humanitarian Needs

Food security analysis for rural populations in meher and belg dependent areas shows that about 12.9 million people will be in crisis or worse condition (at least through June 2021) and will need urgent action to reduce food consumption gaps, and to restore and protect livelihoods. Despite the planned humanitarian interventions, an additional 4 million people (especially from meher production areas) are expected to be in crisis through September 2021. This is largely attributed to the prevailing and projected climate scenarios: dry bega season and below-normal "deyr/ hagaya" rains in South and South-Eastern parts of the country. Bega 2020/21 is expected to be drier than the previous two years.

The forecasted drier than usual seasons poses risks to crops and livestock in these parts of the country. For pastoralist communities, poor rains could lead to shortage of pastures and water, consequently leading to reduced milk and meat, low livestock prices (due to poor body condition) and negative coping mechanisms for livestock dependent households. Moreover, cross-border livestock migrations in search of water and
pasture may spark resource-based conflicts and contribute to the spread of COVID-19 pandemic. Rift Valley Fever (RFV), which predominantly affects animals but can also infect humans, has been reported in Northern and North Eastern pastoralist areas of Kenya and could potentially cross the border into Ethiopia and lead to economic losses. Poor rains in farming communities could lead to poorer than usual harvests. This can reverse the gains made from the past two favorable rainy seasons; lead to high cereal market prices and deepen food insecurity in affected parts of the country.

The impact of these shocks will be significant in areas where agro-pastoral and pastoral households suffered crop and pasture losses due to floods and desert locust. The reports of new desert locust generation in Somali and SNPP Regions coupled with the projected favorable breeding conditions in Central, Southern, South-Eastern pastoral areas is a strong indication that the pest will continue destructive activities throughout 2021, hence the related support to the farming and pastoral households should be sustained.

In the Tigray Region and all conflict-ridden areas, farmers and herders will be displaced, productive assets saved from the climate shocks will be lost, market functionalities, agricultural activities, and labour opportunities will be disrupted. Following the planned elections and political activities in the year, belg-receiving areas are likely to experience disruptions in cultivation activities. Internally displaced people (and returnees) will add pressure to the meagre agricultural resources, unless support is availed. Though over 1.4 million IDPs have returned to their original areas (according to the Government of Ethiopia), their access to livestock recovery inputs remains constrained.

Overall, the pastoral and agro-pastoral communities across the country are still facing the impacts of desert locust, floods, conflicts, and COVID-19 and have very little means and time to adapt to climate shocks without the necessary support in 2021.

Projection Of Needs
IPC analysis indicates that the food security situation is expected to worsen, at least through June 2021, with about 11.1 million people projected to be in crisis or worse conditions. Below-average gu/genna/belg rainfall will adversely affect belg 2021 crops performance, livestock body conditions and

Indicators

<table>
<thead>
<tr>
<th>#</th>
<th>INDICATORS</th>
<th>SOURCE</th>
<th>FREQUENCY OF DATA COLLECTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>x01</td>
<td>Number of food insecure people (in areas affected by erratic rainfall in meher or belg season) - IPC phase 3 and above</td>
<td>IPC/NDRMC</td>
<td>Twice a year</td>
</tr>
<tr>
<td>x02</td>
<td>Number of people living under livelihood protection deficit (in areas affected by erratic rainfall in the previous meher or belg season)</td>
<td>HEA</td>
<td>Twice a year</td>
</tr>
<tr>
<td>x03</td>
<td>Number or per centage of farming returnees/IDPs with access to land for cultivation/farming</td>
<td>VAS/DTM</td>
<td>Quarterly</td>
</tr>
<tr>
<td>x04</td>
<td>Number or per centage of pastoral returnees/IDPs with livestock assets</td>
<td>VAS/DTM</td>
<td>Quarterly</td>
</tr>
<tr>
<td>x05</td>
<td>Livelihoods Coping Strategies Index</td>
<td>FSNMS</td>
<td>Twice a year</td>
</tr>
<tr>
<td>x06</td>
<td>Reduced coping strategy index</td>
<td>FSNMS</td>
<td>Twice a year</td>
</tr>
</tbody>
</table>
productivity; water sources and pasture are expected to be below average. Desert locusts will lead to significant losses of crop and pasture in bimodal areas despite large-scale control measures; projections indicate that the upsurge is likely to persist (at least) to the end of the belg 2021 and will spread southwards aided by northerly winds. Meher production is also expected to be below average in some Southern, Central, and Eastern parts of the country due to limited supply of inputs following conflict, flood-induced damages, and localized crop losses associated with desert locusts’ upsurge. Military operations in Tigray and any civil unrest during or after the planned elections are likely to disturb livelihoods activities, which could affect agricultural activities for the belg receiving areas through displacement of people and disruption of market functionalities.

**Monitoring**

Six indicators will inform sectoral monitoring of needs. The indicators will be monitored using the Food Security and Nutrition Monitoring System (FSNMS), which is conducted twice a year during lean and harvesting season. The outcome of FSNMS, along with other contributing factors, will be used as evidence that will be considered in classifying severity of food insecurity to further inform humanitarian and development responses in the country. In addition, the DTM and regional reports on population displacement and effects of natural hazards will provide information on agricultural needs in areas affected by conflict and natural hazards.

Limitations: The Agriculture Sector was not able to use food production losses as a standalone indicator due to insufficient available data.

<table>
<thead>
<tr>
<th>Period</th>
<th>Projected People in Need</th>
<th>Most Vulnerable Groups</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current situation (or Q1 2021)</td>
<td>8,005,723</td>
<td>Pastoralists and Agro-pastoralists</td>
</tr>
<tr>
<td>Q2 2021</td>
<td>6,004,292</td>
<td>Pastoralists and Agro-pastoralists</td>
</tr>
<tr>
<td>Q3 2021</td>
<td>9,206,581</td>
<td>Pastoralists and Agro-pastoralists</td>
</tr>
<tr>
<td>Q4 2021</td>
<td>8,406,009</td>
<td>Pastoralists and Agro-pastoralists</td>
</tr>
</tbody>
</table>
3.2 Education

Displacement caused by recurrent man-made and natural disasters has disproportionately affected school aged children. In the last three years, the number of people in need of emergency education services has remained consistently above two million. In 2020, following the COVID-19 outbreak, all children were out of school, and less than 10 per cent of them were able to access education through remote learning. With the gradual school reopening in October 2020, on average, only an estimated 50-60 per cent have resumed learning. The critical barriers to access include inadequate learning spaces, lack of WASH facilities, lack of access due to insecurity, inability to meet COVID-19 protocols for school reopening and movement of displaced populations. Education Information Management System (2018/19) data shows that approximately 75 per cent of schools in the outside cities do not have access to water. The conflict that erupted in Tigray has increased the severity of needs across Amhara, Afar and Tigray Regions with possible flow over of the displaced population.

Affected Population

School aged children from IDP and returnee communities form a significant part of the most affected population segment by the various emergencies in Ethiopia. The communities hosting IDPs also have great needs due to the pressure on resources exerted on them. At least 50 per cent of pre-primary school age and an estimated 70 per cent of secondary school age students in IDP camps and camp-like settings have no access to school. This is a critical gap, with the consequential impact of few children transitioning into primary and into secondary schools. Ministry of Education data (Education Statistics Annual Abstract 2018/19) indicates that the Afar and Somali Regions had a Gross Enrolment Rate of 10.8 per cent and 16.9 per cent respectively compared to a national average of 32 per cent. Further, records show that primary school aged girls and children with disabilities in the emergency affected regions and especially in IDP and returnee communities are disadvantaged compared to the rest of the population. Primary school completion rate nationally in 2018/19 was 59.7 per cent for girls and 64.4 per cent for boys.

However, more concerning is the sustained gradual reduction of girls retained in school through the grades. At grade 5 level 80 per cent of girls are still enrolled in school since grade 1, but this drops to less than 60 per cent enrollment at grade 8 level. The statistics in DTM Round 23 of 2020 demonstrate a grim situation where 70 per cent of secondary school aged children have no access to school, and more than a half are girls. Girls in schools and learning centres face further risks of being exploited or abused physically, emotionally, and sexually.

The effects of COVID-19, including deprived livelihoods in households, have exacerbated the vulnerability of children who have been denied education to work in order to supplement income for household needs. There is a real risk of school aged girls getting married, while others will get pregnant as schools continue with long periods of closure denying children the protective environment they offered. Teachers are considered as a small part of the people in need (0.5 per cent) for the education sector, since they need psychosocial support skills for themselves and the learners, support in teaching supplies, technical support to equip
them with instructional skills and conflict sensitive approaches in learning environments.

Analysis Of Humanitarian Needs

At least 1.2 million children are in need of emergency education services in Ethiopia across emergency affected areas in the country. Conflict incidences remain the major driver of displacement in Ethiopia accounting for more than 60 per cent of the displaced population comprising an estimated 1 million school aged children -- the majority of whom have no access to education and learning opportunities. Lack of learning spaces have resulted from school closures due to insecurity (in Oromia, Benishangul Gumuz, and SNNP more than 100 schools).

Seasonal and flash floods have also extensively damaged schools across regions. In the Afar Region alone, as of November 2020, more than 200 schools were damaged by floods, of which at least 62 were totally destroyed while others still remained occupied by IDPs.

Learners who are due to join school in 2020 at pre-primary level and those resuming school after COVID-19 closures risk missing joining school completely due to the critical gaps in learning spaces created by the increased need for space from physical distancing, school closures due to conflict, increased displacements and schools destroyed by floods. School aged children affected by emergencies more than ever face a great risk of never joining school, dropping out of school and experiencing protection risks.

The lack of water availability in schools and sanitation facilities presents a critical barrier to education access. Data on access to latrines in schools in emergency affected areas (Joint Education Needs Assessment, 2019) show that on average only 61 per cent of schools had adequate latrines while 75 per cent of schools did not have access to water. Lack of teaching and learning materials is a significant barrier to learning and parents inability to provide for them is a factor contributing to children being out of school.

There is an overarching conflict sensitivity and protection centered approach. Through enhancement of awareness of actors involved in implementing Education in Emergencies (EiE) activities, in a conflict sensitivity programming approach including protection dimension, these challenges could be addressed adequately.

Projection Of Needs

Prior to COVID-19, education assessments showed higher enrolment and retention (JENA, 2019) where school meals were offered. It is projected that decreased purchasing power of communities due to the pandemic will increase food insecurity and consequently lead to more children being engaged in income generating activities thereby staying out of school. School closures during COVID-19 will continue to affect children and their families in multiple negative ways. Academically, learners will need to recover lost

<table>
<thead>
<tr>
<th>#</th>
<th>INDICATORS</th>
<th>SECTORS</th>
<th>SOURCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>x01</td>
<td>Number of school aged boys and girls provided with learning spaces with gender segregated WASH facilities</td>
<td>4Ws, photos</td>
<td>Monthly</td>
</tr>
<tr>
<td>x02</td>
<td>Number of school aged boys and girls benefiting from respiratory and hand hygiene supplies</td>
<td>4Ws, photos</td>
<td>Monthly</td>
</tr>
<tr>
<td>x03</td>
<td>Number of teachers trained: MH/PSS, Emergency code of Conduct for teachers, Instructional skills</td>
<td>4Ws, photos, attendance records</td>
<td>Monthly</td>
</tr>
</tbody>
</table>
time and at the same time move to the next grades. Children have experienced psychosocial challenges associated with grief for loss of loved ones and many have also encountered economic effects where their parents lost livelihoods. Other children have been orphaned in the course of pandemic and are uncertain about their future.

FEWSNET alerts in the last quarter of 2020 report a high likelihood of drought in the South and Southern areas of Ethiopia. Increased food and water stress will affect school operations and learners as water for drinking becomes scarce. Inadequate water for sanitation could force closure of schools based on nonadherence to the COVID-19 health protocols for safe school operation.

Additionally, political activities related to national elections planned for May 2020 and the political crisis in Tigray are projected to cause population displacements and possible access restrictions in some regions.

The projections for the upcoming quarters will be revisited during the mid-year review.
3.3

**ESNFI**

### Affected Population

Population in need of ES/NFI support can be divided into two main groups: those internally displaced and returned throughout the country and those living in insecure areas. The internally displaced can also be categorized between the newly displaced and those living in protracted crises. Returning migrants including forced returns, spontaneous returns, assisted voluntary returns, and voluntary humanitarian returns also require ES/NFI assistance upon arrival.

The two broad groups could further be divided into sub-groups of vulnerability based on gender, age, physical, and socioeconomic conditions. Multisectoral assessment reports in some locations indicate that communities living in insecure areas and flood-prone areas face repeated displacements, increasing their vulnerability and delaying the recovery process. While IDP sites were intended to only serve as a temporary solution for the most vulnerable IDPs who had no other choice of a place to settle, as of DTM 23, there are about 1,846,551 IDPs still residing in around 1,346 IDP sites. These IDPs face overcrowding, substandard living conditions, lack of NFIs, and low access to basic services.

The IDP population includes older persons, children, and other vulnerable community members. Women and children remain especially vulnerable to protection risks due to lack of shelter. According to DTM data, vulnerable members of the displaced communities include single parents, female-headed households, older persons and physically disabled; women represent 50 per cent, 19 per cent are children under five), and older persons 20 per cent. Those groups are more prone to domestic violence and exploitation and COVID-19 primary and secondary consequences. Furthermore, PWD and other vulnerable groups in the community experience problems accessing services due to physical access challenges, economic barriers, socio-cultural barriers, discrimination, lack of information and services, and inability to travel.

Ethiopia is exposed to multiple, predictable, and recurrent natural hazards marked by climate variability. This is aggravated by conflict-induced displacement. By the end of 2020, 51 per cent of outstanding humanitarian shelter needs could not be addressed due to the low level of funding the cluster partners face, exacerbating the displaced population’s vulnerability and protection risks.

The displacement patterns vary across the country and affect semi-urban, rural, informal settlement, collective centers, host community settings, new, secondary displacements, and returnee populations. Of the 4.5 million IDPs in need, 2.8 million have various critical ES/NFI needs. Like the previous two years, Oromia still has the largest number of IDPs and IDP returnees, followed by the Somali Region, where a large number of IDP sites are registered; DTM report indicates that most live without shelters or with self-made/makeshift shelters. Similarly, IDPs who settled in the host community will still require NFI in-kind or cash assistance and/or cash for rent as the soaring prices and the impact of the COVID-19 have eroded their coping mechanisms. ES/NFI needs among returnees are also urgent. From the VAS6, nearly 45 per cent of them live in fully damaged or inadequate shelters.

### People in Need

<table>
<thead>
<tr>
<th>PEOPLE IN NEED</th>
<th>WOMEN</th>
<th>CHILDREN</th>
<th>WITH DISABILITY</th>
<th>OTHER FIGURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.5M</td>
<td>25%</td>
<td>49%</td>
<td>2%</td>
<td>16%</td>
</tr>
</tbody>
</table>

![Figure: People in Need](image)
Returning migrants seek assistance at transit centres, Migration Response Centres and temporary shelters at/close to PoE. Most returning migrants have been exposed to abuse and violence by human smugglers and traffickers during their journeys. Many are in extremely vulnerable conditions requiring urgent life-saving assistance and lack financial resources to return home. Without ES/NFI assistance, the returning migrants are under great risk of becoming stranded in an unfamiliar city with little recourse to official or unofficial safety networks.

**Analysis Of Humanitarian Needs**

Climate and conflict continue to drive ES/NFI needs across the displacement affected population in Ethiopia. The scale, severity, and complexity of emergency and transitional shelter needs remain high, particularly among newly displaced people, existing IDPs, and IDP returnees who require life-savings, as well as longer-term support to rebuild their resilience. Often having fled with nothing more than personal possessions, hundreds of thousands of IDPs require basic shelter to maintain their well-being/survival.

According to DTM’s most recent data and severity analysis, 84 per cent of affected households do not have adequate shelter protection, whereas 89 per cent of the households lack adequate essential items to ensure their health and well-being are protected. Each settlement type of the displaced affected population poses a specific set of challenges for IDPs and IDP returnees. For those living in informal sites, overcrowding, and lack of protection from physical and environmental elements expose them to health and protection risks. In return areas, thousands of people live in damaged or unfinished buildings and houses, and others face HLP and security of tenures issues upon their return. These living conditions make people more vulnerable and in need of appropriate shelter support.

Displaced persons living in substandard living conditions are particularly exposed to a series of protection and environmental threats. Overcrowding and untenable conditions in IDP hosting sites will enhance the risk of gender-based violence and exposure to health risks such as COVID-19. Women, older persons, PWD, and other vulnerable community members spend a disproportionate amount of time indoors in shelters, which means that they will be more exposed to physical and protection risks.

**Projection Of Needs**

In December 2020, the Government announced that Ethiopia would hold a parliamentary election in June 2021. Against the backdrop of past and current

<table>
<thead>
<tr>
<th>#</th>
<th>INDICATORS</th>
<th>SECTORS</th>
<th>SOURCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>x01</td>
<td>% of HH whose dwelling enclosure provides adequate security, privacy, and maintains possessions</td>
<td>Multisectoral and Interagency assessments, The ES/NFI lead assessments. DTMDTM</td>
<td>Quarterly</td>
</tr>
<tr>
<td>x02</td>
<td>% of HHs who are currently living in unsafe/unhealthy areas affected by community hazards</td>
<td>Multisectoral and Interagency assessments, The ES/NFI lead assessments. DTM</td>
<td>Quarterly</td>
</tr>
<tr>
<td>x03</td>
<td>% of HHs without clear security of tenure within their community</td>
<td>Multisectoral and Interagency assessments, The ES/NFI lead assessments. HLP assessment, VAS</td>
<td>Quarterly</td>
</tr>
<tr>
<td>x04</td>
<td>% of HHs without sufficient and appropriate emergency shelter and non-food items</td>
<td>DTM</td>
<td>Quarterly-1</td>
</tr>
</tbody>
</table>
conflicts and inter-regional tensions whose root causes remain largely unaddressed, events leading up to and after the June 2021 elections could result in displacements in most regions where there are already a large number of IDPs and returnees.

IDPs and IDP returnees are expected to increase in 2021, according to projections based on the 2019 and 2020 trends. In Tigray and Benishangul Gumuz Regions, DRM and other sources show that most IDPs were displaced within the same regions. Additionally, returnees need support in understanding their rights for housing, land, and property in cases where their land has been given away or reused.

While the number of returning migrants saw a drastic decrease in 2020 due to COVID-19, this is expected to increase in the coming months. Returning migrants require temporary shelter assistance upon arrival as well as NFIs to reduce health and protection risks.

Monitoring
The ES/NFI Cluster will employ DTM to monitor population movements, needs, vulnerabilities and cross-sectoral concerns, in addition to building on efforts of 2019 and 2020 to deepen the understanding of vulnerabilities and living conditions through multisectoral and cluster-lead monitoring assessments. The cluster also encourages partners to conduct the market assessment and monitoring to ensure that appropriate response is provided to the displacement affected communities.

<table>
<thead>
<tr>
<th>Period</th>
<th>Projected People in Need</th>
<th>Most Vulnerable Groups</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current situation (or Q1 2021)</td>
<td>410,000</td>
<td>Secondary IDPs, IDPs living in overcrowded conditions</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Vulnerable members of the community such as Female-Headed Houses, Child-Headed Households and older persons, people living with physical and mental disability.</td>
</tr>
<tr>
<td>Returning migrants, UASC</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q2 2021</td>
<td>530,000</td>
<td>Same as above</td>
</tr>
<tr>
<td>Q3 2021</td>
<td>703,000</td>
<td>Same as above</td>
</tr>
<tr>
<td>Q4 2021</td>
<td>690,000</td>
<td>Same as above</td>
</tr>
</tbody>
</table>
PART 3: SECTORAL ANALYSIS

3.4 Food

Food security has been undermined by multiple hazards in 2020, and these are likely to continue in 2021. Desert locusts have damaged both the cropland and pastures in various regions in the country, increasing the negative impact of the previous drought years.

The Southern and Eastern parts of the country are expected to have an increase in the number of acutely food-insecure people in 2021 due to below-normal rains. Crisis (IPC Phase 3) continues in woredas in the Afar, Oromia, Somali Regions and parts of SNNPR.

**Affected Population**

Food-insecure people are among the conflict and climate-affected communities in the Southern parts of the country, households facing COVID-19 related food needs, and those communities affected by the desert locust infestation in Afar, Amhara, Oromia, Somali and Tigray Regions. In addition, 3.64 million internally displaced people and returnees will likely face food consumption gaps across the country, with a particular focus on the Amhara, Oromia, Somali, and Tigray Regions.

Woredas in the Afar, Oromia, Somali Regions, and parts of SNNP remain high priority areas due to projected below normal rains and its negative impacts on crop harvests. Food security will be of particular concern for vulnerable population groups, including households with high dependency rate, households headed by women, households with disabled and chronically ill members, and those with limited or no livelihood sources. Of the 13.74 million people estimated to be in need of food assistance for the first quarter 2021, 55 per cent are projected to be children, 20 per cent women and 18 per cent persons with a disability. The mid-year review of the Humanitarian Response Plan (HRP) will provide an update to the food needs in the country, based on evidence from the DTM, HEA and IPC analysis.

Protection risks, including access, gender-based violence and negative coping mechanisms exist among the food insecure population, in particular women and children displaced by conflict.

**Analysis Of Humanitarian Needs**

Food insecurity remains a critical issue in Ethiopia, with the combined shocks of desert locust, COVID-19, conflict-related displacement and climatic events creating complex impacts across the country.

Analysis from various assessments demonstrate that continued high inflation, the prolonged impact of the COVID-19 pandemic, and impacts of flooding, drought, and desert locusts are expected to continue to negatively affect food access from own crops, livestock production, and markets. According to FEWS NET, most poor and very poor households in the Eastern half of the country will most likely continue facing crisis (IPC Phase 3) outcomes through 2021.66

Conflict and insecurity continue to displace households in Ethiopia. During the latter half of 2020, conflict most notably increased in the Benishangul Gumuz (Metekel Zone), Oromia, and Tigray Regions. Conflict-affected populations in Tigray are of considerable concern, with additional food requirements anticipated for 2.1 million beneficiaries (including bordering areas in Afar...
More than half a million food insecure people are projected to be in urban communities, predominantly in Tigray.

**Projection Of Needs**

Based on the IPC, HEA, estimated flows of internally displaced people, returnees, and other natural hazards both in rural and urban areas, the overall people in need of emergency food assistance for first quarter 2021 is estimated to be 13.74 million. While the provisional estimate for additional acutely food insecure people from rural areas in Tigray and bordering Afar and Amhara is 2.1 million, this will likely increase in the coming period.

Projected and ongoing climate related impacts, along with conflict-related displacement, continues to drive food insecurity in Ethiopia. This includes desert locust impacts, persistent and projected drought and flood impacts and COVID-19 related shocks. Of particular concern are conflicts across the country, which have impacted livelihoods and food security in previous years. Projections of need include these factors, and take into account changes in context and sudden onset emergency needs.

The IPC analysis provides an indication that 12.9 million people in analysed areas will face acute food insecurity from January to July 2021. This analysis will be updated for the second half of the year, with evidence from the belg season. HEA indicates an increase in people facing survival deficits in the Southern parts of the country, mainly in areas affected by desert locusts and the same areas are projected to receive below normal rains.

The projections for quarters 3 and 4 be revisited during the mid-year review once new analyses become available.
Monitoring

A food security outcome monitoring is conducted on a quarterly basis in six regions, providing an analysis of key changes in the food security situation.

The food cluster also utilizes analysis from the HEA and IPC to determine changes in the food security situation in Ethiopia. Market monitoring by food cluster partners, notably WFP, will also provide evidence on changes in the cost of the food basket, to inform cash transfers in targeted woredas. Data sources also include VAS and DTM. The World Bank-led phone interviews for the Living Standards Measurement Study also provides an indication on the changes in incomes, livelihoods and coping strategies in monitored areas.

Inter-agency monitoring, rapid food security assessments and the NDRMC poverty analysis are the key modalities for cross-checking and alignment of data sets. Rapid needs assessments of climate and conflict affected IDPs are used along with the above.

Indicators

<table>
<thead>
<tr>
<th>#</th>
<th>INDICATORS</th>
<th>SECTORS</th>
<th>SOURCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>x01</td>
<td>Number of people in phase 3 and above according to IPC analysis</td>
<td>IPC analysis</td>
<td>Once</td>
</tr>
<tr>
<td>x02</td>
<td>Number of people facing survival deficit</td>
<td>HEA survey</td>
<td>Once</td>
</tr>
</tbody>
</table>
### Health

The number of people in need of emergency health services in 2021 is estimated at 8.8M, 2.5M more than 2020. This increase is due to an expected rise in the number of people affected by disease outbreaks, especially COVID-19, and the consequences of the Tigray crisis. While the number of IDPs is expected to decline in other regions, the situation in Tigray has led to major displacement. On the other hand, projected drought and food insecurity in the Southern parts of the country could increase incidence of malnutrition and associated medical complications as well as cholera and skin diseases. Of the overall people in need, 97 per cent are in severity 3 and 3 per cent in severity 4.

#### Analysis Of Humanitarian Needs

People affected by displacement, climate shocks, and disease outbreaks, including COVID-19, face particularly high needs. Disruption of health services due to conflict and lack of access to services, as well as an alarming level of disease outbreaks among displaced populations, have severe impacts on the health situation.

#### Projection Of Needs

A total of 8.8 million people are projected to be in need of health assistance.

Projection of health needs for 2021 were informed by the following findings and reasonings:

1. The 2020 national cholera elimination plan was disrupted by the COVID-19 pandemic, and will likely not occur until mid-2021. The likelihood of cholera outbreaks is therefore much higher than in other years.

2. Based on a recent risk assessment, measles outbreaks are likely to occur in several zones of the country.

3. Supply chain disruptions contributed to malaria outbreaks in several regions in 2020. While this is expected to improve in 2021, it is likely that some woredas will report more cases than the epidemic threshold.

4. Increased incidences of SAM with complications are anticipated due to a projected drought in the Southern areas.

#### Affected Population

Health needs are most prominent among at-risk groups in affected communities. Children under five are most affected by SAM with medical complications as well as malaria, which is prevalent in 70 per cent of the country, while people living in areas with poor WASH coverage and practices, are at a higher risk of cholera. Women and girls, particularly those affected by conflict, are also in need of the Minimum Initial Service Package for life-saving sexual and reproductive health services and interventions.

IDPs, returning IDPs and returning migrants often struggle to access healthcare services, including reproductive health and Mental Health and Psychosocial Support (MHPSS) services. In woredas that are covered by a community health insurance scheme, returning IDPs may face access challenges due to their inability to pay premiums.

#### People In Need

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<tr>
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<tbody>
<tr>
<td><strong>People In Need</strong></td>
<td><strong>Women</strong></td>
<td><strong>Children</strong></td>
<td><strong>With Disability</strong></td>
<td></td>
</tr>
<tr>
<td><strong>8.8M</strong></td>
<td><strong>22%</strong></td>
<td><strong>56%</strong></td>
<td><strong>14%</strong></td>
<td></td>
</tr>
</tbody>
</table>
5. Conflicts can lead to casualties and increase the demand for emergency surgical care.

6. The demand for MHPSS services increases during conflict. In addition, the COVID-19 pandemic has led to an increase in the need for MHPSS by the general population, infected persons and health workers providing care for them. This is compounded by poor capacity to provide community level services such as psychological first aid.

7. Continued disruption of sexual and reproductive services for women in the reproductive age group and girls during crisis will likely result in unwanted pregnancy, complication during pregnancy and delivering, physical and psychosocial complications of rape survivals; this may result in excessive maternal and perinatal morbidity and mortality.

7. Health needs are expected to decline in the latter half of 2021 due to the impact of planned anticipatory interventions. Gradual improvement in the COVID-19 situation is likely to have a similar impact.

**Monitoring**

The Health Cluster will monitor and capture the changing needs using reports by the MOH (for immunization) and the Ethiopian Public Health Institute (EPHI).

**Limitations:** Data for certain indicators, namely the reported number of COVID-19 cases and risk of measles, are not available at the woreda-level. The Cluster plans to work with the MOH and EPHI to address these gaps in the coming year.

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Projected People in Need</th>
<th>Most Vulnerable Groups</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>3,000,000</td>
<td>Displaced populations and people affected by disease outbreaks</td>
</tr>
<tr>
<td>Q2 2021</td>
<td>3,000,000</td>
<td>Displaced populations and people affected by disease outbreaks</td>
</tr>
<tr>
<td>Q3 2021</td>
<td>1,378,441</td>
<td>Displaced populations and people affected by disease outbreaks</td>
</tr>
<tr>
<td>Q4 2021</td>
<td>1,378,441</td>
<td>Displaced populations and people affected by disease outbreaks</td>
</tr>
</tbody>
</table>

**Indicators**

<table>
<thead>
<tr>
<th>#</th>
<th>Indicators</th>
<th>Sectors</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>x01</td>
<td>Number of children &lt;15 who received immunization for measles</td>
<td>MOH/EPHI</td>
<td>Quarterly</td>
</tr>
<tr>
<td>x02</td>
<td>Number of woredas that reported at least one case of cholera</td>
<td>EPHI</td>
<td>Monthly</td>
</tr>
</tbody>
</table>
3.6 Nutrition

Ethiopia continues to face an extremely high risk of malnutrition due to food insecurity, recurrent disease outbreaks, limited access to health services, floods, conflict, and population displacements.

Of particular concern, SAM admissions reached unprecedented levels in 2020. The admissions increased in all regions compared to 2019: 5 per cent in Gambela, 7 per cent in Somali and Oromia, 9 per cent in SNNP, 23 per cent in Afar, 28 per cent in Benishangul Gumuz, 51 per cent in Tigray, and 57 per cent in Amhara. In addition, over 2.4 million children, pregnant women, and nursing mothers affected by Moderate Acute Malnutrition (MAM) benefited from Targeted Supplementary Feeding programming.

Affected Population

Most of the acute malnutrition caseload continues to be observed among the general population in rural areas. Particularly vulnerable are infants, young children, and pregnant and nursing women from households facing recurrent shocks and whose assets, livestock, and livelihoods have already been depleted.

In times of crisis, population displacements exacerbate infant morbidity and mortality risks and associated acute malnutrition as nursing mothers may stop breastfeeding. Moreover, when population displacements occur, children and women become more vulnerable to disease, undernutrition, and exploitation and violence, especially in locations where nutrition services delivery points are difficult to access or unsafe due to their distance from villages. In some instances, IDPs are at risk of discrimination in accessing health and nutrition services and children under five may not benefit from free treatment for SAM in some areas. Currently, 5 per cent of MAM beneficiaries are IDPs.

Analysis Of Humanitarian Needs

The most pressing and acute needs are found in rural and hard to reach areas as well as areas where access to essential services is compromised, provision of humanitarian response is limited, and where high numbers of malnourished individuals exceed the health system’s capacity to deliver quality services. This is particularly the case in the Oromia Region, which continues to bear the highest number of acutely malnourished cases (40 per cent of the annual SAM caseload is in Oromia), specifically in West Arsi and East Hararge Zones. In Somali Region, the highest numbers of SAM children are found in Korahe and Shabelle Zones. In SNNP and Amhara Regions, Gedeo and Wag Hamira Zones respectively are areas with SAM admissions. In Tigray, the ongoing crisis is likely to cause a rapid deterioration of the nutritional status of the affected population.

In times of crisis, adequate Maternal, Infant and Young Child Feeding (MIYCF) practices tend to be undermined and unsolicited donations of breast milk substitute and milk products continue to take place. Therefore, a large-scale nutrition response continues to be required to provide life-saving management of acute malnutrition in children under five and pregnant and nursing women, and to protect, promote and support adequate MIYCF practices.
**Projection Of Needs**

With the continued negative consequences of COVID-19, desert locust infestation, increased conflict-induced population displacements, and a looming drought due to La Niña, acute malnutrition is expected to increase by 25 per cent in 2021.

It is estimated that in 2021 over 7.1 million children under five, pregnant women, and nursing mothers will present symptoms of acute malnutrition. In particular, it is estimated that about 1 million children will suffer from SAM, over 3.2 million children aged 6-59 months will suffer from MAM, and 2.9 million pregnant and lactating women (PLW) will suffer from acute malnutrition in high risk woredas.

**Monitoring**

The Emergency Nutrition Coordination Unit (ENCU), with the NDRMC, MoH, and EPHI, will assess and monitor the nutrition situation through rapid nutrition assessments, nutrition surveys (using the SMART methodology), and CMAM program coverage evaluations. The nutrition situation will also be closely monitored through routine nutrition program data including Mid Upper Arm Circumference (MUAC) screening results using different sources (CHD campaigns, weekly EPHI bulletins, monthly SAM and MAM admissions reports, UNICEF end user monitoring tool, NGO program data). The ENCU/Nutrition Cluster will also continue to use the the NDRMC hotspot woreda classification post seasonal assessments (twice a year) and will resume its efforts towards piloting the use of the Acute Malnutrition IPC tool in 2021.

### Indicators

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<thead>
<tr>
<th>#</th>
<th>INDICATORS</th>
<th>SECTORS</th>
<th>SOURCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>x01</td>
<td>Prevalence of wasting (acute malnutrition)</td>
<td>SMART surveys (conducted upon signs of a deteriorating situation by Regional ENCU and NGO partners)</td>
<td>Ad-hoc / selected woredas</td>
</tr>
<tr>
<td>x02</td>
<td>Proportion of acutely malnourished individuals among affected population (based on MUAC)</td>
<td>Rapid Nutrition Assessment (conducted upon signs of a deteriorating situation by Regional ENCU)</td>
<td>Ad-hoc / during acute crisis in most affected kebele in selected woredas</td>
</tr>
<tr>
<td>x03</td>
<td>CMAM program coverage</td>
<td>SQUEAC evaluation (and equivalent methodologies used by NGO partners to evaluate coverage)</td>
<td>Ad-hoc / selected woredas</td>
</tr>
<tr>
<td>x04</td>
<td>Number of cases with SAM newly admitted for treatment (children)</td>
<td>Regional Health Burea (RHB)/UNICEF/ENCU</td>
<td>monthly</td>
</tr>
<tr>
<td>x05</td>
<td>Number of cases with MAM newly admitted for treatment (children)</td>
<td>DRMB/RHB/Implementing partners/WFP</td>
<td>monthly</td>
</tr>
<tr>
<td>x06</td>
<td>Number of cases with MAM newly admitted for treatment (PLW)</td>
<td>DRMB/RHB/Implementing partners/WFP</td>
<td>monthly</td>
</tr>
</tbody>
</table>
### Protection

<table>
<thead>
<tr>
<th>People in Need</th>
<th>Women</th>
<th>Children</th>
<th>With Disability</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.3M</td>
<td>24%</td>
<td>53%</td>
<td>8%</td>
</tr>
</tbody>
</table>

Displacements due to conflicts in Tigray, SNNP, Somalia, Oromia and natural disasters, coupled with the socioeconomic impact of COVID-19, have led to a serious deterioration of the protection situation in Tigray, with partners depicting the situation in Ethiopia as a protection crisis. As livelihoods opportunities become scarce, women, children, older persons, and persons with reduced mobilities face particularly high risks, while IDPs and returnees suffer from a wide spectrum of protection risks, across various age and sex groups.

Since the outbreak of the pandemic, an increase in GBV against women and children has been reported, and negative coping mechanisms, including early marriage and transactional sex are also on the rise. Meanwhile, protection services have not been able to adequately meet these needs due to the limited number of actors, underfunded activities, and overall access constraints caused by security conditions, exacerbating these needs.

**Affected Population**

The number of people in need for protection services is estimated at 5.3 million across Ethiopia. Oromia, Somalia, SNNP, and Benishangul Gumuz currently face the most critical needs, while the unfolding situation in Tigray suggests that needs are rapidly increasing in Tigray, as well as in Amhara and Afar, which are witnessing an influx of IDPs.

The main groups at risk, in both new and pre-existing emergency situations of displacement, remain women, children and persons with reduced mobility, including older persons and PWD. Protection risks are markedly more complex when the affected population have multiple vulnerability characteristics; these groups include women facing HLP access challenges and girls with disabilities. There are particular risks to women and girls when accessing a range of basic humanitarian services with sexual assaults reported by women on their way to humanitarian distribution points. Poorly designed services and inaccessible services also increase risks of GBV, especially for women and girls. Similarly, lack of effective complaint and feedback mechanisms, and protection risk analysis with age and gender breakdown, exposes the aforementioned at-risk groups to greater protection risks and subsequent adoption of negative coping mechanisms.

Children account for 53 per cent of the people in need, with displaced children who are living in unsafe and overcrowded conditions facing particularly high risk. An estimated 652,281 children have very limited or no access to services, 30 per cent of whom are living in very high or high severity woredas without core child protection services. Ongoing conflicts and other shocks are further straining an already overstretched child protection system, while exposure to conflict, trauma, and violence drives the number of children, young people and their caregivers requiring MHPSS support.

Children with a disability, according to partners, are among those who face the most severe protection risks. An estimated 447,790 children with disabilities need protection, as they are extremely vulnerable due to stigma which often keeps them out of schools and unreachable by services and aid workers, depriving them of even the most basic rights.
Also of particular concern, an estimated 21,659 UASC among displaced populations frequently face discrimination and are at heightened risk of violence and SEA in displacement sites, sometimes even by providers with a duty to protect them, causing an enduring impact on their psychosocial health. Oromia, SNNP, and Somali have the highest concentration of very high and high severity woredas, hosting 90 per cent of the total UASC. Adolescent girls face particular risks related to their age, gender, and restricted social status. This results in increased domestic responsibilities which keep girls in the home, discourage school attendance, and school completion, which can result in a lack of understanding of information on health, rights, and services. Additionally, displaced girls continue to face high levels of GBV, including domestic and sexual violence and child marriage, while boys face heightened risks of physical abuse, exploitative child labour, and recruitment by armed groups. Although data is scarce, rumors of recruitment by armed groups of boys (i.e. in East Guji) are increasing.

Female-headed and child-headed households face limitations in accessing services and distribution points, as well as when attempting to assert their housing land and property rights and/or documentation, given the lack of clarity regarding their ability to assert land rights in the constitution and their vulnerability to GBV during disputes over access to HLP.

Analysis Of Humanitarian Needs

People in need face a variety, and at times more than one, protection risks. Detailed analysis of such needs and vulnerabilities are elaborated under the following sections: Child Protection; GBV; HLP; SMS.

Projection Of Needs

In Ethiopia, the humanitarian landscape continues to be marked by conflict and climate-induced displacement, and disease outbreaks. In addition, the upcoming national elections in June 2021 may result in a further deterioration of the security situation, as well as an increased presence of various UAG. These events may result in additional displacement during post-election violence, resulting also in family separation. Protracted fighting, rising instability and displacement are likely to lead to a deterioration of the protection situation across all Areas of Responsibility (AoRs).

The number of people in need of protection has therefore increased from 3.9 million in 2020 to 5.3 million in 2021. The factors behind this projected increase, in other words the protection consequences of the various shocks expected in 2021, are outlined in greater detail in the 2.1 ‘Risk Analysis’ Chapter.
Child Protection (CP)

Child protection remains a paramount concern as various emergencies and resulting displacement continue to fuel and exacerbate children's exposure to protection risks, including abuse, exploitation, GBV, family separation, and harmful coping mechanisms. A key child protection concern involves children separated from their families, who are exposed to heightened risk of violence, abuse, and exploitation, and psychosocial distress with enduring impact on their mental health.

More generally, as a result of school closures due to COVID-19 and ongoing conflicts, child marriage, female genital mutilation, and sexual violence have become more common, with families increasingly resorting to negative coping strategies. Protracted and repeated displacements and lack of economic options put an estimated 481,882 children at risk of exploitation and child labour, with Tigray and SNNP having the highest number of woredas with very high/ high severity of hazardous child labor, 65 per cent and 14 per cent, respectively. Children's vulnerability is further exacerbated by lack of access to core CP services, including case management, FTR of UASC, and MHPSS.

The number of children in need therefore increased by 23 per cent from 2.6 million in 2020 to 3.2 million in 2021.

Gender Based Violence (GBV)

Various shocks, including conflict and climate-related pressures, have contributed to a marked increase of GBV across Ethiopia. In 2020, compared to 2019, woredas with severe needs for GBV prevention and response almost doubled, as women and girls face multiple protection risks related to conflict, displacement and return, including inadequate shelter, and inability to meet their basic needs leading to negative coping mechanisms, such as transactional sex or child marriage, and increased risks of domestic violence.

Following the outbreak of the COVID-19 pandemic, in particular, partners reported a concerning increase in intimate partner violence and exposure of girls and young women to sexual exploitation, harassment and other types of GBV. The disruption of social norms and existing community protection mechanisms further exacerbated the needs of all populations, making groups prone to risk more vulnerable to protection risks, including risk of SEA.
Accessing humanitarian aid poses additional GBV risks for women and girls, with 54 per cent of DTM respondents specifying two or more safety concerns when accessing aid. Also of concern, GBV remains seriously underreported due to community stigma and fear of retaliation. In West Wollega, for example, a GBV assessment found that only 20 per cent of respondents’ families would support their daughter to report a case to the Government and accompany her to receive medical services.

**Housing, Land and Property (HLP)**

<table>
<thead>
<tr>
<th>PEOPLE IN NEED</th>
<th>WOMEN</th>
<th>CHILDREN</th>
<th>WITH DISABILITY</th>
<th>TREND (2018-2021)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.9M</td>
<td>50%</td>
<td>0%</td>
<td>7%</td>
<td></td>
</tr>
</tbody>
</table>

In 2020, IDP returns to Oromia, SNNP, Somali, Amhara, and Benishangul Gumuz Regions and displacements related to the conflicts in Gambela, SNNP, and Tigray are the key drivers of people in need. An estimated 1,874,175 people are in need of HLP and civil documentation services in 2021.

The main needs associated with HLP concern the lack of HLP documentation, secondary occupation of land, land swapping, destruction of property, and insecurity of land tenure. The lack of land tenure documentation, in particular, is a prevalent need in both conflict and climate-affected areas for varying reasons, including land owners not having documentation prior to displacement, IDPs leaving the documents behind as they flee their area of origin, documents being purposely destroyed or confiscated by armed groups, or the offices where land records were stored being destroyed. This was noted particularly in the Somali Region. Also of concern, HLP disputes often result in secondary occupation of land and property, and multiple and overlapping claims of use. Undocumented transactions, including the illegal sale of land and land swapping, observed in West Guji and Gedeo Zones, also risk loss of security of tenure and other civil rights, such as the right to vote.

In regions where inter-communal conflicts are the cause of displacement, access to HLP rights and fertile lands becomes a particularly sensitive issue that can even trigger further violence. In such cases, insecurity, discrimination and denial of HLP rights lead to secondary displacement, further undermining durable solutions.

Regarding IDP returnees, their challenges include insecurity of land and housing tenure, lack of access to HLP dispute resolution mechanisms, and replacement of land tenure documentation to fully achieve a durable solution. Unresolved HLP disputes such as secondary occupation and destruction of HLP assets continue to be significant obstacles to a safe and durable solutions process for populations returned in 2019 and 2020. Statutory and customary land administration and management systems can lead to an overlap and duplication of systems, hindering effective access to HLP rights. Meanwhile, COVID-19 has increased the risk of eviction due to the pandemic’s economic impact on one’s ability to pay rent.

On the other hand, displaced persons often do not have access to safe and adequate housing and gather in collective shelters in sites where no or poor services are available. Temporary or long term access to land for housing or livelihood is scarce, increasing the overall vulnerability and protection threats of the IDPs.
Tangible risks for 2021 include the situation in West Wollega Zone in Oromia where secondary displaced persons face landlessness. Additionally, customary land tenure remains common in the Somali Region and will likely come into conflict with the planned relocation of IDPs from Qologi IDP site to elsewhere in the region.

While HLP concerns affect all population groups, women face particular challenges due to documentation and existing arbitration mechanisms that often exclude women from claiming their rights to property and land. Female-headed households in IDP returnee areas are particularly vulnerable to denial of land tenure, sometimes due to divorce or death of their spouse, but also because women's lack of access to legal documentation in general. Further, women often do not appear on the land tenure documentation for land they share with their husbands. Women’s lack of access to HLP rights reduces their participation in household decision making, undermines their coping capacities and often deprives them of basic security and protection.

### Site Management Support (SMS) Services

<table>
<thead>
<tr>
<th>PEOPLE IN NEED</th>
<th>WOMEN</th>
<th>CHILDREN</th>
<th>WITH DISABILITY</th>
<th>TREND (2018-2021)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.3M</td>
<td>22%</td>
<td>55%</td>
<td>4%</td>
<td></td>
</tr>
</tbody>
</table>

Child protection remains a paramount concern as various emergencies and resulting displacement continue to fuel and exacerbate children's exposure to protection risks, including abuse, exploitation, GBV, family separation, and harmful coping mechanisms. A key child protection concern involves children separated from their families, who are exposed to heightened risk of violence, abuse, and exploitation, and psychosocial distress with enduring impact on their mental health.

More generally, as a result of school closures due to COVID-19 and ongoing conflicts, child marriage, female genital mutilation, and sexual violence have become more common, with families increasingly resorting to negative coping strategies. Protracted and repeated displacements and lack of economic options put an estimated 481,882 children at risk of exploitation and child labour, with Tigray and SNNP having the highest number of woredas with very high/ high severity of hazardous child labor, 65 per cent and 14 per cent, respectively. Children’s vulnerability is further exacerbated by lack of access to core CP services, including case management, FTR of UASC, and MHPSS.

The number of children in need therefore increased by 23 per cent from 2.6 million in 2020 to 3.2 million in 2021.
**Monitoring**

The Protection Cluster and its sub-Clusters will regularly monitor the evolving protection situation using the below indicators.

**Indicators**

<table>
<thead>
<tr>
<th>#</th>
<th>INDICATORS</th>
<th>SECTORS</th>
<th>SOURCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>x01</td>
<td>Who provides security?</td>
<td>DTM</td>
<td>Quarterly</td>
</tr>
<tr>
<td>x02</td>
<td>Level of social cohesion reported</td>
<td>DTM and VAS</td>
<td>Quarterly</td>
</tr>
<tr>
<td>x03</td>
<td>Fatalities per 100,000</td>
<td>ACLED</td>
<td>Constantly updated but it makes sense to follow the same update frequency as DTM and VAS</td>
</tr>
<tr>
<td>x04</td>
<td>% of girls / boys that have been separated from their parents or other typical adult caregivers</td>
<td>DTM and VAS</td>
<td>Quarterly</td>
</tr>
<tr>
<td>x05</td>
<td>Number of girls and boys living in an area without access to core CP services</td>
<td>DTM and VAS</td>
<td>Quarterly</td>
</tr>
<tr>
<td>x06</td>
<td>Number of GBV related services available</td>
<td>DTM</td>
<td>Quarterly</td>
</tr>
<tr>
<td>x07</td>
<td>Number of risk factors where IDPs and returnees reported safety concerns and risk factors related to GBV reported in accessing humanitarian assistance</td>
<td>DTM</td>
<td>Quarterly</td>
</tr>
<tr>
<td>x08</td>
<td>% of households accessing their housing/shelter with security of tenure</td>
<td>MSNA / Protection Monitoring DTM VAS</td>
<td></td>
</tr>
<tr>
<td>x09</td>
<td>% of HHs with housing / shelter damaged or destroyed due to violence, conflict or natural hazards</td>
<td>UNOSAT / SDR VAS DTM</td>
<td></td>
</tr>
<tr>
<td>x10</td>
<td>% of HH reporting incidents of threats of eviction</td>
<td>MSNA / Protection Monitoring</td>
<td></td>
</tr>
<tr>
<td>x11</td>
<td>Site Management Committee (SMS) at the site</td>
<td>DTM</td>
<td>Quarterly</td>
</tr>
<tr>
<td>x12</td>
<td>Registration activity at the site</td>
<td>DTM</td>
<td>Quarterly</td>
</tr>
</tbody>
</table>
3.8 WASH

Due to limited access to improved water supply and safely managed sanitation, (JMP, 2019, UNICEF and WHO) major shocks such as drought, floods, disease outbreaks, and conflict-induced displacement significantly increase WASH needs among affected populations, especially in lowland and rural areas.

The total people in need has increased from 7 million to 10.1 million due to multiple and complex emergencies. The number of IDPs in need increased from 1.7 million to 2.6 million as a result of floods and conflict, including the ongoing conflict in Northern Ethiopia. The number of IDP returnees in need increased from 810,000 to 1.3 million while the non-displaced but affected population increased from 4.4 million to 6.3 million as a result of floods, drought, and disease outbreaks including COVID-19.

Affected Population

IDPs, IDP returnees, the non-displaced population, and returned migrants have significant WASH needs. According to DTM 23, 51 per cent of IDPs do not have access to minimum WASH services, while IDP returnees have limited access to WASH services in their areas of origin as a result of damage caused by conflict and natural disasters. Returned migrants who stay in temporary shelters at / close to PoEs also face challenges in accessing WASH facilities and services.

Seventy-two per cent of the total people in need are in Oromia (32 per cent), Somali (21 per cent) and SNNP (17 per cent) Regions, attributed to conflict-induced displacement as well as seasonal displacement due to floods and drought.

Fifty-three per cent of the people in need are children and their limited access to minimum WASH services increases their protection risks and deteriorates their health and nutrition status. Moreover, lack of WASH services in schools further exacerbates these risks and increases school drop-outs, especially during the COVID-19 pandemic. Ensuring availability of and access to handwashing facilities with water and soap are required for all population groups identified to mitigate the risk of COVID-19.

Lack of access to adequate and safe WASH facilities increases protection risks, particularly among women, girls, and PWD (11.2 per cent of the total people in need). Sub-standard WASH facilities such as latrines without locks or disability access, and remote and unsafe locations of WASH facilities increase GBV and SEA risks. Moreover, inadequate access to dignity kits also increases protection risks for women and girls.

Analysis Of Humanitarian Needs

Humanitarian WASH needs are centred around 1) supply of safe drinking water; 2) access to basic latrines; and 3) access to essential WASH NFIs. In addition, access to hygiene facilities and hygiene items, including RCCE and WASH infection prevention and control at institutions, are acute needs during the COVID-19 pandemic. It is important to consider the different needs of various at risk groups such as PWD, older persons, and women, and children.

Apart from WASH sector people in need, humanitarian WASH response needs are expected at institutions, though such data is not considered in HNO. For instance, reliable WASH facilities at health centres...
and healthcare facilities are imperative to deliver quality health and nutrition services. In locations with outbreaks of infectious diseases, where malnutrition is high and WASH conditions are poor, there are critical needs for an integrated approach to reduce morbidities and mortality.

WASH facilities in school are a prerequisite for a safe school environment, especially in times of COVID-19. Data on access to latrines in schools in emergency affected areas shows that on average 61 per cent of schools had adequate latrines while 75 per cent of schools did not have access to water. WASH in schools is especially critical as a first line response because children are important transformation agents in passing on good hygiene practices to their communities.

**Projection Of Needs**

<table>
<thead>
<tr>
<th>PROJECTED PEOPLE IN NEED</th>
<th>MOST VULNERABLE GROUPS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current situation (or Q1 2021)</td>
<td>2,827,840</td>
</tr>
<tr>
<td>Q2 2021</td>
<td>2,908,978</td>
</tr>
<tr>
<td>Q3 2021</td>
<td>2,393,489</td>
</tr>
<tr>
<td>Q4 2021</td>
<td>2,017,115</td>
</tr>
</tbody>
</table>

**Indicators**

<table>
<thead>
<tr>
<th>#</th>
<th>INDICATORS</th>
<th>SECTORS</th>
<th>SOURCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>x01</td>
<td>% of HHs/people have access to sufficient handwashing facilities</td>
<td>DTM &amp; VAS for IDPs and IDP returnees and Rapid assessments (sectoral and multi-sectoral)</td>
<td>Quarterly or during the onset of any crisis</td>
</tr>
<tr>
<td>x02</td>
<td>% of HHs/people have sufficient access to a functional sanitation facility</td>
<td>DTM &amp; VAS for IDPs and IDP returnees and Rapid assessments (sectoral and multi-sectoral)</td>
<td>Quarterly or during the onset of any crisis</td>
</tr>
<tr>
<td>x03</td>
<td>% of HHs have access to water sources of sufficient quality and availability</td>
<td>DTM &amp; VAS for IDPs and IDP returnees and Rapid assessments (sectoral and multi-sectoral)</td>
<td>Quarterly or during the onset of any crisis</td>
</tr>
</tbody>
</table>

**Monitoring**

Monitoring data will be collected from DTM, VAS, WASH 4W, and other assessment reports. Although there is no specific monitoring system in place to assess sectoral needs, the WASH cluster conducts a quarterly water trucking needs assessment in six regions and has an assessment registry which it updates with each assessment conducted by its partners. The WASH cluster also uses health monitoring systems to monitor WASH needs that may arise due to limited availability or accessibility of WASH facilities. The cluster is unable to collect data on two important indicators: 1) access to sufficient hand-washing facilities; and 2) access to sufficient sanitation facilities for the general non-displaced population. The key indicators for monitoring WASH needs are listed in the table below. Projection of Needs
Part 4
Annexes

SHABELLE ZONE/SOMALI REGION, ETHIOPIA
IDPs displaced by flood in Kalafo woreda. Photo: OCHA/Hamidu Jalloh
4.1 Data Sources

The following section describes some of the main needs monitoring systems that were used as part of the analysis for the humanitarian needs overview.

**Early Warning and Response Directorate (EWRD)**

The NDRMC, through the EWRD, collects weekly and monthly woreda level monitoring data in collaboration with line ministries, primarily the MoA. Data on weather conditions, crop performance, livestock conditions, market conditions, labour, water for humans, education, health, nutrition, flood and landslides are collected. The EWRD uses this data for analysis and produces bi-weekly and monthly bulletins on the current situation and the prediction for the following month. The data and analysis were used as an input to the seasonal assessment process.

**Household Economy Approach (HEA)**

Since 2018, NDRMC has used the HEA as a key analysis tool to determine the number of beneficiaries and the duration of assistance in food and agriculture sectors. The HEA is a unique approach to understanding household economy i.e. the economic decisions households make. Understanding how households live helps us determine how they will respond and cope in the event of a shock, such as a drought.

In Ethiopia, the approach uses baseline information in 158 livelihood zones in 6 regions of the country and overlays it with any specific hazard or intervention during the period covered by the assessment to determine the food gap. During the seasonal assessment, data is collected using the HEA to determine the food needs.

The HEA uses the Livelihood Impact Analysis Sheet (LIAS) tool developed in 2008 by the Government of Ethiopia and USAID. LIAS allows the storing of household economy baseline data and running household economy outcome analysis. It allows the analyst to carry out complex livelihoods-based analysis simply and quickly, making the best use of available hazard data, and generating information that feeds directly into early warning.

**Livelihood Early Assessment and Protection (LEAP)**

World Food Programme (WFP), with the Government of Ethiopia, developed a model-based tool called LEAP that permits a timely recognition of impending droughts. The tool was developed in 2008 with financial support from the World Bank.

Designed specifically for the local Ethiopian context, LEAP uses satellite-based rainfall data to calculate a range of weather-based indexes. For current purposes, the most important indicators are the Water Requirement Satisfaction Index (WRSI) and yield reduction (derived from WRSI), Normalized Difference Vegetation Index (NDVI) and rainfall performance. As WRSI is an indicator of crop performance based on the availability of water to the crop during a growing season, LEAP tool uses this index to detect yield reduction.

The results of the combination of LEAP and LIAS (above) were used as an initial prediction of food beneficiaries for 2021 in Ethiopia.

**The Integrated Food Security Phase Classification (IPC)**

IPC aims to inform food-related emergency response and longer-term policy and programming decisions by providing rigorous, evidence- and consensus-based analysis that is comparable over time, and within and across countries. The IPC acute food
insecurity analysis classifies areas and population groups according to the severity and magnitude of food insecurity, in both current and future timeframes. Using a convergence of evidence approach, areas are classified in one of five phases, each with predetermined thresholds and cut-offs for the food security outcome indicators used in IPC analysis.

The IPC is also a forum for food security technical dialogue that results in joint analysis and consensus of the food security situation, which is fundamental in designing coordinated and coherent interventions. In Ethiopia, the NDRMC chairs the IPC TWG, through its Early Warning Early Response directorate. There are 15 partner organizations at a federal level, comprised of government partners, Non-Governmental Organizations (NGOs) and United Nations agencies (FAO, WFP, OCHA and UNICEF) are members of the TWG. The other government institutions involved in IPC include the MoA, the CSA, the National Meteorology Agency (NMA). Participating NGOs include Action Against Hunger, CARE International, Catholic Relief Services / Joint Emergency Operation Program, FEWS NET, GOAL, OXFAM, World Vision, and Save the Children.

The November 2020 IPC report covered seven regions of Tigray, Amhara, SNNP, Sidama, Oromia, Afar and Somali. In these six regions, the IPC analysis was conducted for the areas where it was unlikely for the households to meet their food needs for the whole year. The priority for the November IPC analysis was in areas that are regarded as meher and belg rainfall dependent, pastoral and agro-pastoral areas. Of the 53 million people were assessed, the analysis shows that 21.9 million people would face severe food insecurity between January and June 2021 unless appropriate interventions are implemented. The IPC information will be updated with new information – especially in the wake of the Tigray crisis for Tigray and surrounding areas of Amhara and Afar. The analysis includes all food insecure households irrespective of whether they benefit from PSNP or not, as well as current IDPs and returnees. Currently the IPC does not cover Addis Ababa, Harari, Dire Dawa, Gambela and Benishaghul-Gumuz. The IPC focuses its analysis on rural populations, therefore populations in major cities and towns are not included in the analysis.

**Food Security Monitoring Systems (FSMS)**

In 2020, two phone-based household food security surveys were conducted, one in July and the other in October. The results were primarily used for IPC analysis and reporting, which in turn fed into the HNO and HRP.

For the belg FSMS survey in July, a total of 7177 households from the 39 belg zones located in the Regions of Afar, Amhara, Oromia, SNNP, Somali and Tigray were interviewed during the month of July 2020. Sample size per zone is proportional to population size.

Meher FSMS covered a total of 33 clusters of woredas in the meher season benefiting areas as follows in Amhara, Oromia, SNNP and Tigray. For each stratum, 150 HHs were randomly selected for interviews. All clusters of woredas in the meher producing areas were included for the survey. Each cluster of woredas has a set of independent enumerators with local language abilities and are responsible for the overall data collection process.

**The Famine Early Warning Systems Network (FEWS NET)**

FEWS NET provides a range of information products and software tools that are currently operational in Ethiopia and provides early warning and analysis on food insecurity. Through network development activities, FEWS NET builds national and regional capacity to provide sound early warnings and food security analysis. To ensure that food security projections are comparable across and within countries, and over time, FEWS NET uses IPC as a common language for describing the severity and magnitude of food insecurity.

FEWSNET analyses are used as a general input to understand the current situation as well as to predict future food outcomes.

**WFP Market Monitoring**

WFP market monitoring collects retail prices of staple cereals, other key food items and livestock markets
from over 60 markets across the country. Ratings on food availability in the market as well as livestock market conditions are also qualitatively reported. This information is analyzed and combined with inflation data from the CSA as well as wholesale food prices from Ethiopian Trading Business Corporation, and a monthly bulletin is produced on selected markets. WFP also conducts detailed market functionality assessments in selected areas for CBT design.

Displacement Tracking Matrix (DTM)

The major source for displacement data used in the HNO is the DTM, which collects information through Site Assessments and Village Assessment Surveys (VAS). Through the Site Assessment which was conducted from 15 Augustus until 20 September 2020, DTM captured 1,846,551 IDPs (344,782 households) in 1,346 sites across the 11 regions of Ethiopia. The Village Assessment Survey (VAS) was carried out during the same period and covered 1,294 villages across 8 regions. A total of 1,210,053 returning IDPs, 35,409 IDPs, 9,940 returned migrants and 1,326,717 host community members were tracked through VAS.

In response to the Northern Ethiopia Crisis, DTM deployed its new Emergency Site Assessment (ESA) in Tigray and in neighbouring zones in Afar and Amhara in December 2020. The ESA will be conducted on a monthly basis in 2021 in response to the Northern Ethiopia Crisis, and this tool can also be deployed for any other significant displacements in 2021 where needed. This shows DTM’s ability to adapt to rapidly changing mobility contexts and its commitment to collecting displacement related data for humanitarian and development partners alike.

Global Information Management, Assessment and Analysis Cell (GIMAC)

The Global Information Management, Assessment and Analysis Cell (GIMAC) on COVID-19 is a multi-stakeholder initiative, co-lead by OCHA, UNHCR, WHO, Global Health Cluster, and IOM, with the support from donors, UN and NGO partners. The GIMAC partners developed the GIMAC Analysis Framework adapted from the JIAF. The cell uses Data Entry and Exploratory Platform (DEEP) to structure secondary qualitative data and have established a cloud-based database to store quantitative data sets.

The ICCG requested field support end of May 2020 and received support from GIMAC until September 2020. The support focused on structuring, collating, managing and analysing secondary data, focusing on COVID-19 direct and secondary impacts combined with ongoing humanitarian shocks and consequences in Ethiopia. Close to a hundred secondary data sources were collected, and over one thousand data entries were tagged as part of the secondary data review process. A comprehensive situation analysis report was developed for the Analysis Team, which was used when developing the HNO.

Seasonal assessments

The Government leads a multi-sector and multi-agency national needs assessment are twice a year, closely linked to the agricultural cycle. They are conducted after the short (February - May) and long (July - September) rainy seasons. In 2020, for the meher assessment, the Government with humanitarian partners, integrated early warning data collected on a regular basis as well as predictions generated by early warning systems such as LEAP and LIAS into the process of the assessment (see following paragraphs for details on these tools).

The Multi-Cluster/Sector Initial Rapid Assessment (MIRA)

The MIRA approach was developed by the Inter-Agency Standing Committee Needs Assessment Task Force (IASC NATF) based on a review of 10 years of best practice in assessments and was provisionally endorsed by the IASC in November 2011. MIRA Guidance revision was endorsed by the IASC in August 2015 which provides more structured guidance to needs assessment after natural disasters.

The MIRA is a joint needs assessment tool that can be used in sudden-onset emergencies. It is a precursor to cluster/sectoral needs assessments and provides a process for collecting and analyzing information on
affected people and their needs to inform strategic response planning. When a sudden onset disaster strikes, a joint needs assessment process, the MIRA is one of the first steps in the EHCT’s emergency response. The MIRA is an inter-agency process enabling actors to reach, from the outset, a common understanding of the situation and its likely evolution. Based on its findings, humanitarian actors can develop a joint response plan, mobilize resources and monitor the situation.

The Ethiopia Rapid Assessment Working Group, which reports to the ICCG, has developed a common inter-sector/agency assessment tool in line with the MIRA methodology. At the end of 2020, the first assessments using the MIRA methodology and tools were conducted in Afar and Tigray to collect information on the needs of the population affected by the Tigray crisis. A workable version of the key informant questionnaire is available and additional tools are in development.

National Meteorological Agency (NMA)

NMA has Early Warning Systems through which the agency monitors weather conditions of the country and related hazards that threaten the lives and livelihoods of vulnerable communities so as to minimize the effect of severe weather impacts on life and property by providing reliable and timely weather information from the station network. NMA has a well-defined set of early warning indicators to monitor each type of hazard. The main types of monitoring indicators for flood and drought are rainfall and temperature, which are directly taken from the observing station and calculated based on WMO standards and procedures. NMA data and analysis are the main weather-related inputs for NDRMC Early warning analysis.
4.2 Methodology

**HNO kick-off workshop**
To kick start the HPC 2021, OCHA organized a virtual workshop on 26 and 27 August 2020, which was attended by more than 60 participants representing UN agencies, INGOs, NGOs, and donors. The aim of this workshop was to agree on a joint process and collective approach to enhance an evidence-based identification of needs and vulnerabilities. During this workshop, participants were briefed on the Joint Inter-Sectoral Analysis Framework (JIAF), which formed the structure for the HNO analysis. As a first step in the prescribed process, participants agreed to form an analysis team bringing together sectoral experts and exports on cross-cutting issues from different humanitarian organizations to start working on the HNO.

**Joint Inter-Sectoral Analysis Framework (JIAF)**
The main objective of the JIAF is to ensure consistency in analysis and calculation approaches across global responses, with a robust, step-by-step process for jointly calculating need. This fulfils a Grand Bargain...
commitment on needs assessments where the humanitarian community agreed to provide “a single, comprehensive, cross-sectoral, methodologically sound and impartial overall assessment of needs for each crisis to inform strategic decisions on how to respond and fund…” Donors, agencies and other humanitarian actors also committed to improve performance through a coordinated approach on needs assessments which are the backbone of the JIAF analysis. The JIAF takes an intersectoral analysis approach, recognising that while understanding sectoral needs and severity is important, so too is identifying the inter-linkages and compounding effects across the sectors. This is particularly true in terms of sequencing - when some needs will not be resolved unless others are addressed first, in the ideal sequence.

Analysis Team

Following the kick-off workshop, an analysis team was formed. The analysis team aimed to improve the intersectoral analysis for the HNO and reach a technical consensus whereby the results are jointly owned by the analysis team participants. The analysis team was made up of cluster representatives as well as those representing cross-cutting issues, such as gender, Accountability to Affected Populations (AAP)/Protection of Sexual Exploitation and Abuse (PSEA), disability, and protection mainstreaming, and was chaired by OCHA.

The analysis team had its first meeting on 9 September 2020. The team subsequently met on a weekly basis and conducted a total of 17 meetings. The analysis team agreed on a work plan which outlined different roles and responsibilities, milestones, required inputs, tasks, and timings etc. The work plan followed the four phases highlighted in the JIAF guidance for the HNO process:

- Plan and design phase: Defined the scope of HNO and develop an analysis plan.
- Data collection phase: Looked at available secondary data. Analysis team members requested to identify all sectoral and multi-sectoral assessments that took place in 2020 to ensure the assessment registry is updated and useful for our analysis. They also identified information gaps and discussed ways forward.
- Joint analysis phase: Analyzed all the available evidence, discussed discrepancies in the data and involved other stakeholders outside of the analysis team for their feedback.
- Validation phase

While working on the analysis plan, analysis team members drafted the first chapters of the HNO (Context, Shock, and Impact). In parallel, the analysis team conducted a quantitative analysis of the shocks and impact of the shocks, which resulted in a joint understanding by the analysis team of the affected areas and the number of people affected. This subsequently formed the basis of the analysis for the the analysis of humanitarian conditions, people in need, and severity of needs.

Analysis of humanitarian conditions

The analysis team identified 41 sectoral and multi-sectoral needs indicators from multiple sources (see indicator table in this annex), which were assessed to provide the best overall picture of needs. Severity thresholds were set for each indicator in line with the JIAF severity scale (see scale in this annex) but contextualized to the Ethiopian context. These indicators were analysed using the “Data Scenario B” from the JIAF guidance.

The intersectoral severity of needs was determined as follows:

- The severity of needs was determined for each of the three population groups separately;
- For each indicator, and each population group in each woreda, the percentage of people per severity class was calculated;
- The severity phase for each indicator (in each woreda and for each population group) was then determined by applying the 25 per cent rule: the highest severity phase with at least 25 per cent of the affected population;
- The overall severity phase for each population group in each woreda was then determined by
taking the mean of the 50 per cent of indicators which scored highest;
• The result of the overall severity phase was then compared to the results of the critical indicators (IPC phase, SAM under 5 burden, and exposure to violent incidents with reported fatalities), to avoid overlooking potential pockets of severe needs. If a critical indicator would score higher than the overall severity phase, then the critical indicator value would override the overall severity phase.

The intersectoral people in need was determined as follows:

• The people in need was determined for each of the three population groups separately;
• For each indicator, and each population group in each woreda, the number of people disaggregated by sex and age was categorized in each severity class;
• Then, the number of people in need was calculated by sex and age for each indicator: everybody falling in severity 3, 4 or 5 was determined to be in need. This resulted in boys in need, girls in need, adult men in need, adult women in need, older men in need, and older women in need for each indicator in each woreda and for each population group;
• The overall PIN for each population group in each woreda was then determined by taking the maximum number of boys in need, girls in need, adult men in need, adult women in need, older men in need, and older women in need across all the indicators.

### Sectoral needs
Clusters followed global cluster guidance to calculate their own sectoral PINs for 2021, and following the new severity scale methodology. Where possible and relevant, clusters used data and indicators that had also been incorporated into the JIAF analysis described above.

### Field consultations (Joint needs analysis workshops)
A series of field consultations were conducted, during which field experts in the regions confirmed key findings, including the draft severity of needs and people in need, or readjusted discrepancies identified key underlying factors, and anticipated future conditions. They paid particular attention to confirming or revising the needs in high-severity woredas. Field consultations were carried out as below:

• Gambela: 1 December 2020
• Benishangul Gumuz: 1 December 2020
• Somali: 3 December 2020
• Southern Oromia: 4 December 2020
• SNNP: 4 December 2020
• Sidama: 4 December 2020
• Western Oromia: 8 December 2020
• East and West Hararge (Oromia): 9 December 2020
• Dire Dawa: 9 December 2020
• Harari: 9 December 2020

Due to the ongoing conflict in Northern Ethiopia, Amhara, Afar, and Tigray regions were not included in the field consultations.
The Joint Intersectoral Analysis Framework (JIAF)

**Context**

<table>
<thead>
<tr>
<th>Political</th>
<th>Economy</th>
<th>Socio-cultural</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legal and policy</td>
<td>Technological</td>
<td>Demography</td>
</tr>
<tr>
<td>Environment</td>
<td>Security</td>
<td>Infrastructure</td>
</tr>
</tbody>
</table>

**People living in the affected area**

**Event / Shock**

<table>
<thead>
<tr>
<th>Drivers</th>
<th>Underlying factors / Pre-existing vulnerabilities</th>
</tr>
</thead>
</table>

**People affected**

**Impact**

| Impact on humanitarian access | Impact on systems & services | Impact on people |

**Humanitarian conditions**

**People in need**

Living Standards  
Coping Mechanisms  
Physical and Mental Wellbeing

**Severity of needs**

Current and forecasted priority needs/concerns
By relevant age, gender and diversity characteristics
## The JIAF Severity Scale

<table>
<thead>
<tr>
<th>SEVERITY PHASE</th>
<th>KEY REFERENCE OUTCOME</th>
<th>POTENTIAL RESPONSE OBJECTIVES</th>
</tr>
</thead>
</table>
| 1 None/Minimal | Living Standards are acceptable (taking into account the context): possibility of having some signs of deterioration and/or inadequate social basic services, possible needs for strengthening the legal framework. Ability to afford/meet all essential basic needs without adopting unsustainable Coping Mechanisms (such as erosion/depletion of assets). No or minimal/low risk of impact on Physical and Mental Wellbeing. | Building Resilience  
Supporting Disaster Risk Reduction |
| 2 Stress | Living Standards under stress, leading to adoption of coping strategies (that reduce ability to protect or invest in livelihoods). Inability to afford/meet some basic needs without adopting stressed, unsustainable and/or short-term reversible Coping Mechanisms. Minimal impact on Physical and Mental Wellbeing (stressed Physical and Mental Wellbeing) overall. Possibility of having some localized/targeted incidents of violence (including human rights violations). | Supporting Disaster Risk Reduction  
Protecting Livelihoods |
| 3 Severe | Degrading Living Standards (from usual/typical), leading to adoption of negative Coping Mechanisms with threat of irreversible harm (such as accelerated erosion/depletion of assets). Reduced access/availability of social/basic goods and services. Inability to meet some basic needs without adopting crisis/emergency - short/medium term irreversible - Coping Mechanisms. Degrading Physical and Mental Wellbeing. Physical and mental harm resulting in a loss of dignity. | Protecting Livelihoods  
Preventing & Mitigating Risk of extreme deterioration of Humanitarian conditions |
| 4 Extreme | Collapse of Living Standards, with survival based on humanitarian assistance and/or long term irreversible extreme coping strategies. Extreme loss/liquidation of livelihood assets that will lead to large gaps/needs in the short term. Widespread grave violations of human rights. Presence of irreversible harm and heightened mortality. | Saving Lives and Livelihoods |
| 5 Catastrophic | Total collapse of Living Standards  
Near/Full exhaustion of coping options.  
Last resort Coping Mechanisms/exhausted.  
Widespread mortality (CDR, USDR) and/or irreversible harm.  
Widespread physical and mental irreversible harm leading to excess mortality.  
Widespread grave violations of human rights. | Reverting/Preventing Widespread death and/or Total collapse of livelihoods |
## Humanitarian conditions - indicator table

<table>
<thead>
<tr>
<th>Humanitarian Condition and Problem</th>
<th>Indicator</th>
<th>Source</th>
<th>Population group</th>
<th>Severity of Needs and People in Need</th>
<th>Used for Severity of Needs and/or People in Need</th>
<th>None / Minimal (1)</th>
<th>Stress (2)</th>
<th>Severe (3)</th>
<th>Extreme (4)</th>
<th>Catastrophic (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Severe food insecurity</td>
<td>Number of people in phase 3 and above according to IPC analysis</td>
<td>IPC</td>
<td>General population, IDPs, IDP Returnees</td>
<td>Severity of Needs and People in Need</td>
<td>IPC Phase 1, IPC Phase 2, IPC Phase 3, IPC Phase 4, IPC Phase 5</td>
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<td></td>
<td>Number of people facing survival deficit and livelihood protection deficit</td>
<td>HEA</td>
<td>General population</td>
<td>No livelihood protection deficit</td>
<td>Small or moderate livelihood protection deficit (&lt;=80%)</td>
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<td>Substantial livelihood protection deficit (&gt;80%) or small survival deficit (&lt;20%)</td>
<td>Survival deficit ≤20% but &lt;50% with reversible coping considered</td>
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<td>Survival deficit ≥50% with reversible coping considered</td>
<td>Survival deficit ≤50% with reversible coping considered</td>
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<tr>
<td>Relief needs based on Regional Government targeting</td>
<td>Regional Governments of Gambela and Benishangul Gumuz</td>
<td>General population</td>
<td>People in Need</td>
<td>People targeted for relief food assistance</td>
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<tr>
<td>Excess morbidity</td>
<td>Cholera Incidence Rate (severity) and cases in past 12 months (PIN)</td>
<td>EPHI</td>
<td>General population</td>
<td>&lt;=50</td>
<td>&gt;=51&lt;=100</td>
<td>&gt;=101&lt;=150</td>
<td>&gt;=151&lt;=200</td>
<td>&gt; 200</td>
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<tr>
<td></td>
<td>Measles Incidence Rate (severity) and cases in past 12 months (PIN)</td>
<td>EPHI</td>
<td>General population</td>
<td>&lt;=50</td>
<td>&gt;=51&lt;=100</td>
<td>&gt;=101&lt;=150</td>
<td>&gt;=151&lt;=200</td>
<td>&gt; 200</td>
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<tr>
<td>COVID-19 medium attack rate (10%)</td>
<td>Health Cluster</td>
<td>General population</td>
<td>People in Need</td>
<td>&gt;=95%</td>
<td>&gt;=80%&lt;=95%</td>
<td>&lt;80%&lt;=65%</td>
<td>&lt;64%&lt;=50%</td>
<td>&lt;50%</td>
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<tr>
<td>% of children aged six months to 15 years who have received routine measles vaccination</td>
<td>EPHI</td>
<td>General population</td>
<td>Severity of Needs</td>
<td>&gt;95%</td>
<td>&gt;=80%&lt;=95%</td>
<td>&lt;80%&lt;=65%</td>
<td>&lt;64%&lt;=50%</td>
<td>&lt;50%</td>
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<tr>
<td>Acute malnutrition</td>
<td>Severe Acute Malnutrition under 5 burden (severity) and admissions in the past 12 months (PIN)</td>
<td>MoH and ENCU</td>
<td>General population</td>
<td>Severity of Needs and People in Need</td>
<td>PIN</td>
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<tr>
<td>Moderate Acute Malnutrition under 5 burden (severity) and admissions in the past 12 months (PIN)</td>
<td>WFP</td>
<td>General population</td>
<td>Severity of Needs and People in Need</td>
<td>PIN</td>
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<tr>
<td>Moderate Acute Malnutrition pregnant and lactating women burden (severity) and admissions in the past 12 months (PIN)</td>
<td>WFP</td>
<td>General population</td>
<td>Severity of Needs and People in Need</td>
<td>PIN</td>
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<tr>
<td>Harmful child roles and relations</td>
<td>% of girls / boys that have been separated from their parents or other typical adult caregivers</td>
<td>DTM and VAS, IDPs, IDP Returnees</td>
<td>Severity of Needs and People in Need</td>
<td>PIN</td>
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<tr>
<td>Number of girls / boys living in an area with high severity to engaged in hazardous child labour</td>
<td>DTM</td>
<td>IDPs</td>
<td>Severity of Needs and People in Need</td>
<td>PIN</td>
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<tr>
<td>Prevalence of child marriage</td>
<td>DTM and VAS, IDPs, IDP Returnees</td>
<td>Severity of Needs and People in Need</td>
<td>PIN</td>
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<tr>
<td>Physical and % of the population in communities exposed to possible effects of violent incidents with reported fatalities</td>
<td>ACLED</td>
<td>General population</td>
<td>Severity of Needs and People in Need</td>
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<tr>
<td>Women, girls and boys feel safe</td>
<td>DTM</td>
<td>IDPs</td>
<td>Severity of Needs and People in Need</td>
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<tr>
<td>Number of risk factors where IDPs reported safety concerns and risk factors related to GBV reported in accessing humanitarian assistance</td>
<td>DTM</td>
<td>IDPs</td>
<td>Severity of Needs and People in Need</td>
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<tr>
<td>% of individuals experiencing violence or conflict in the village since IDPs began to return</td>
<td>VAS</td>
<td>IDP Returnees</td>
<td>Severity of Needs and People in Need</td>
<td></td>
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<tr>
<td>% of HHs/people having access to sufficient handwashing facilities</td>
<td>DTM and VAS</td>
<td>IDPs</td>
<td>Severity of Needs and People in Need</td>
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<tr>
<td>Lack of hygiene and sanitation Access to improved sanitation facilities, not shared with other households</td>
<td>DTM and VAS</td>
<td>IDPs, IDP Returnees</td>
<td>Severity of Needs and People in Need</td>
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<thead>
<tr>
<th>No conflict incidents which caused fatalities</th>
<th>1 conflict incident which caused &lt;= 20 fatalities per 100,000 population</th>
<th>Multiple conflict incidents which caused &lt;= 20 fatalities per 100,000 population</th>
<th>Multiple conflict incidents which caused &gt; 20 fatalities per 100,000 population</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>&gt;0%</td>
<td>&gt;10%</td>
<td>&gt;75%</td>
</tr>
<tr>
<td>Soap is available at home AND handwashing facility is on premises with soap and water available</td>
<td>Soap is available at home BUT no handwashing facility on premises with soap and water</td>
<td>Soap is not available at home</td>
<td></td>
</tr>
<tr>
<td>Access to improved sanitation facilities, shared with less than 20 people</td>
<td>Access to improved sanitation facilities, shared with more than 20 people</td>
<td>Access to unimproved facilities OR access to improved facilities shared with more than 50 people</td>
<td>Disposal of human faeces in open spaces or with solid waste</td>
</tr>
<tr>
<td>Lack of safe water</td>
<td>% of HHs/ people having access to a sufficient quantity of water for drinking, cooking, bathing, washing or other domestic use</td>
<td>DTM, VAS, FSMS, WASH Assessments</td>
<td>General population, IDPs, IDP Returnees</td>
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<table>
<thead>
<tr>
<th>% of HHs having access to water sources of sufficient quality and availability</th>
<th>DTM, VAS, FSMS, WASH Assessments</th>
<th>General population, IDPs, IDP Returnees</th>
<th>Severity of Needs and People in Need</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td>Water comes from an improved water source, provided collection time is not more than 30 minutes for a roundtrip, including queuing</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>Water comes from an improved source for which collection time exceeds 30 minutes for a roundtrip, including queuing</td>
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<td></td>
<td>Water comes from an unimproved water source</td>
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<td></td>
<td>Water comes directly from rivers, lakes, ponds, etc.</td>
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<td>There is no any type of water source and dependant on water trucking</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Hindered access to essential goods</th>
<th>% of households without sufficient and appropriate non-food items</th>
<th>DTM</th>
<th>IDPs</th>
<th>Severity of Needs and People in Need</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td>IDPs Access to 4 or 5 essential NFI kits (emergency shelter NFIs, cooking sets, bedding sets, hygiene kits and mosquito nets)</td>
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<td></td>
<td></td>
<td>IDPs Access to 3 out of 5 essential NFI kits (emergency shelter NFIs, cooking sets, bedding sets, hygiene kits and mosquito nets)</td>
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<tr>
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<td></td>
<td></td>
<td></td>
<td>IDPs Access to 2 out of 5 essential NFI kits (emergency shelter NFIs, cooking sets, bedding sets, hygiene kits and mosquito nets)</td>
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<td></td>
<td></td>
<td>IDPs Access to 1 out of 5 essential NFI kits (emergency shelter NFIs, cooking sets, bedding sets, hygiene kits and mosquito nets)</td>
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<td></td>
<td>IDPS Access to no essential NFI kits (emergency shelter NFIs, cooking sets, bedding sets, hygiene kits and mosquito nets)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>% of population facing shortage of essential items due to COVID-19 pandemic</th>
<th>DTM and VAS</th>
<th>IDPs, IDP Returnees</th>
<th>Severity of Needs and People in Need</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Lack at most 1 item</td>
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<tr>
<td></td>
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<td>&gt;20% lack 2 items</td>
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<td>&gt;20% lack 3 items</td>
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<td></td>
<td>&gt;20% lack 4 items</td>
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<td></td>
<td>&gt;20% lack 5 items</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Women of reproductive age have access to dignity items</th>
<th>DTM</th>
<th>IDPs</th>
<th>Severity of Needs and People in Need</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>YES</td>
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<td></td>
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<td>NO</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Hindered access to essential services</th>
<th>% IDP children not attending school by sex and school-level (pre-COVID-19)</th>
<th>DTM</th>
<th>IDPs</th>
<th>Severity of Needs</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td></td>
<td>&gt;75% of school-aged children attended school pre-COVID-19</td>
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<td>&gt;50% of school-aged children attended school pre-COVID-19</td>
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<td>&gt;25% of school-aged children attended school pre-COVID-19</td>
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<td></td>
<td>0.25% of school-aged children attended school pre-COVID-19</td>
</tr>
<tr>
<td>% of potentially vulnerable individuals reporting protection issues when accessing humanitarian assistance</td>
<td>DTM and VAS</td>
<td>IDPs, IDP Returnees</td>
<td>Severity of Needs and People in Need</td>
<td>&lt;5%</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Number of potentially vulnerable groups having obstacles accessing health care services</td>
<td>VAS</td>
<td>IDP Returnees</td>
<td>Severity of Needs and People in Need</td>
<td>No obstacles</td>
</tr>
<tr>
<td>Access to health facility: What is preventing most people from accessing healthcare services?</td>
<td>DTM</td>
<td>IDPs</td>
<td>Severity of Needs and People in Need</td>
<td>Nothing is preventing people; Health service are only accessible during part of the day or some days</td>
</tr>
<tr>
<td>% of IDPs in sites where camp management and/or registration services are missing</td>
<td>DTM</td>
<td>IDPs</td>
<td>Severity of Needs and People in Need</td>
<td>Both camp management and registration service present to all</td>
</tr>
<tr>
<td>Security provision in IDP sites</td>
<td>DTM</td>
<td>IDPs</td>
<td>Severity of Needs and People in Need</td>
<td>Police/Militia = 100%</td>
</tr>
<tr>
<td>Number of GBV related services available</td>
<td>DTM</td>
<td>IDPs</td>
<td>Severity of Needs and People in Need</td>
<td>4 and more services available</td>
</tr>
<tr>
<td>Number of girls and boys living in an area without access to core CP services</td>
<td>DTM</td>
<td>IDPs</td>
<td>Severity of Needs and People in Need</td>
<td></td>
</tr>
<tr>
<td>% of individuals with easily accessible actors mandated to resolve housing and property disputes</td>
<td>VAS</td>
<td>IDP Returnees</td>
<td>Severity of Needs and People in Need</td>
<td>&gt;90%</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>% of returning IDPs that have access to a support system for lost personal identification documents</td>
<td>VAS</td>
<td>IDP Returnees</td>
<td>Severity of Needs and People in Need</td>
<td>1</td>
</tr>
<tr>
<td>% of returning IDPs that have access to a support system for reclaiming land a property</td>
<td>VAS</td>
<td>IDP Returnees</td>
<td>Severity of Needs and People in Need</td>
<td>1</td>
</tr>
<tr>
<td>Unsafe and unhealthy living conditions</td>
<td>HLP</td>
<td>IDPs</td>
<td>Severity of Needs and People in Need</td>
<td>Less than 10% of HH are settled in Severe or worse (fully damaged houses) conditions Household: HH has tenure security with no HLP issues (clear ownership, rental agreements, rights are enforced, etc.)</td>
</tr>
<tr>
<td>% of HH whose dwelling enclosure provides adequate security, privacy, and maintains possessions</td>
<td>Shelter Cluster</td>
<td>IDP Returnees</td>
<td>Severity of Needs and People in Need</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>Household: Occupants are fully secure. Dwelling enclosure closes the occupants and their property so that they are fully secure and private. Little or no intervention required.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Household: Occupants are mostly secure. Dwelling enclosure shows minor privacy deficiencies but maintains security for most household possessions with possible minor repairable deficiencies.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Occupants have moderate insecurity. Household is moderately exposed to external observation and possessions are not lockable, however they may be able to be concealed. Repairs are required.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Household: Dwelling occupants are fully insecure. Dwelling provides no security to possessions with possible theft/loss and no external privacy.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th># People living in area where there is no adequate lighting in the majority of communal spaces</th>
<th>DTM</th>
<th>IDPs</th>
<th>Severity of Needs and People in Need</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adequate lighting</td>
<td>Inadequate lighting</td>
<td>Inadequate lighting for majority of IDP the locations in the woreda</td>
<td>No lighting</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>% of individuals reporting HLP disputes</th>
<th>VAS</th>
<th>IDP Returnees</th>
<th>Severity of Needs and People in Need</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>&gt;0%</td>
<td>&gt;30%</td>
<td>&gt;60% &gt; 20,000 individuals</td>
</tr>
<tr>
<td>&gt;20% live at a place where &gt;75% have access to official</td>
<td>&gt;20% live at a place where 50-75% have access to official</td>
<td>1 conflict incident which caused &gt; 20 fatalities per 100,000 population</td>
<td>&gt;40% live at a place where &lt;25% have access to official documentation</td>
</tr>
<tr>
<td>&gt;50% live at a place where no one has access to official documentation</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>% of returnees with access to official</th>
<th>VAS</th>
<th>IDP Returnees</th>
<th>Severity of Needs and People in Need</th>
</tr>
</thead>
<tbody>
<tr>
<td>None or one harmful mechanisms</td>
<td>&gt;20% Two harmful mechanisms</td>
<td>&gt;20% Three harmful mechanisms</td>
<td>&gt;20% Four harmful mechanisms</td>
</tr>
<tr>
<td>&gt;20% harmful mechanisms</td>
<td></td>
<td></td>
<td>&gt;20% Five harmful mechanisms</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Negative coping mechanisms</th>
<th>Number of harmful coping mechanisms being practiced</th>
<th>VAS</th>
<th>IDP Returnees</th>
<th>Severity of Needs and People in Need</th>
</tr>
</thead>
<tbody>
<tr>
<td>None or one harmful mechanisms</td>
<td>&gt;20% Two harmful mechanisms</td>
<td>&gt;20% Three harmful mechanisms</td>
<td>&gt;20% Four harmful mechanisms</td>
<td></td>
</tr>
<tr>
<td>&gt;20% harmful mechanisms</td>
<td></td>
<td></td>
<td>&gt;20% Five harmful mechanisms</td>
<td></td>
</tr>
</tbody>
</table>
4.3 Information Gaps and Limitations

It is acknowledged that there may be additional humanitarian needs and challenges beyond the analysis included in this HNO. The reason for these omissions is largely due to information gaps and limitations in the methodology which are outlined below. The aim is to take note of these and collect more comprehensive data to ensure better inclusion in next year’s HNO.

Information Gaps

The population data relies on the last census which was conducted in 2007 and includes projections until 2017.

Insufficient data on relocated IDPs, locally integrated IDPs, and returning migrants prevented their inclusion in the quantitative analysis as distinct groups. Although the geographic locations of returned migrants are available as can be seen from the affected population table, there are limitations in comparing the severity of specific needs among the returned migrants located in different woredas. Humanitarian needs of the returning migrants elaborated in this report therefore reflect the needs identified at PoE, quarantine centers, temporary shelters, and Emergency Migration Response Centers. Since analysis is conducted with data available to be disaggregated by sex and age at woreda level, there is a slight discrepancy between the raw data and the captured number of returning migrants after data cleaning. Furthermore, there is always a possibility that migrants return to the country on their own through irregular or less ventured routes and are not by IOM or at PoE. Therefore, the reported number may underestimate the size of the population and the severity of needs.

For DTM, sites and villages which were not assessed in the last two rounds have not been included in the analysis. This may have resulted in the undercounting of IDPs and IDP returnees.

Indicators for living standards focus on conditions that relate to IDPs or IDP returnees due to limited data on the general non-displaced population’s access to essential services. Similarly, due to very limited indicator data on ‘coping mechanisms’, this has been approached more qualitatively.

Nutrition data, no nutritional assessments have been conducted in areas with limited or no access which impacts our understanding of the full extent / gravity of the nutrition situation and needs in these areas.

On flood data, NDRMC’s early warning and responsive division’s data was only available for woredas which were affected by floods in the kiremt season.

For COVID-19, no woreda-level data was available.

There is very limited data available on PWD in Ethiopia. The HNO uses the only available figure of 17.6 per cent, which was estimated from a WHO and World Bank report in 2011, to estimate the number of PWD among the general population. For IDPs and IDP returnees, a lower percentage was used based on data collected during the latest rounds of DTM and VAS.

There is insufficient quantitative data at woreda level in order to include violations of human rights as an indicator. This was instead analyzed in the qualitative analysis.

On mental health, there is very limited local data available and is not enough for an in-depth analysis. According to the Health Cluster, 15 per cent of conflict induced IDPs are affected by mental health problems, with children particularly affected. While there are
high MHPSS needs, limited MHPSS services are available in the country, especially in areas affected by conflict. COVID-19 has also increased mental health needs and impacted MHPSS service availability due to a shift of healthcare resources. This information has been included in the HNO, but detailed analysis was not possible.

Trafficking in persons, while mentioned on several occasions in the document linked to displacement, in-depth analysis was not possible due to limited available information.

On AAP, a concept note was developed to improve AAP throughout the HNO process. The plan was to engage some members from crisis-affected communities in the validation of the draft analysis of initial findings and collect additional data using IASC questions. While non-exhaustive, this would have enabled affected populations to inform and validate key needs analysis findings, people’s preferences and priorities, as well as provide feedback on the process. Unfortunately, this was never materialized due to time, resource, and access constraints in the face of responding to multiple and complex crises, including the conflict in Northern Ethiopia. Therefore affected people’s own expression of their priority needs and perceptions are not adequately reflected in this HNO.

Limitations in Methodology

Due to the fluid situation in and limited information from the Tigray Region, the estimated people in need related to the Tigray crisis was calculated through a different methodology as the other people in need calculations. Plans to enhance AAP through community engagement were also disrupted by the conflict in Northern Ethiopia.

Estimating the number of people affected in each woreda has proven challenging. Therefore, the impact on access, systems and services, and people was combined to estimate at woreda level if the combined impact seemed high, medium, or low.

The JIAF guidance suggests validating key analysis findings for each woreda and each population group.

As this is not possible, the analysis team used sample woredas for each region and focused the discussions on areas where there is a high severity of needs. The guidance also advises that the team identify the underlying factors for the problems each population group is facing in each woreda (unit of analysis). As there are over a 1,000 woredas in Ethiopia, this was not possible. Instead, certain high-severity woredas in each region were discussed with regional experts identifying the underlying factors for those selected woredas and each population group within them.

The final needs validation workshop with a wide range of stakeholders did not take place as intended due to limited time and capacity (as a result of responding to the conflict in Northern Ethiopia) and instead key quantitative findings were presented to the Ethiopian Humanitarian Country Team.
### 4.4 Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>AAP</td>
<td>Accountability to Affected Populations</td>
</tr>
<tr>
<td>AoR</td>
<td>Area of Responsibility</td>
</tr>
<tr>
<td>CERF</td>
<td>Central Emergency Response Fund</td>
</tr>
<tr>
<td>CSA</td>
<td>Central Statistics Agency</td>
</tr>
<tr>
<td>DEEP</td>
<td>Data Entry and Exploratory Platform</td>
</tr>
<tr>
<td>DTM</td>
<td>Displacement Tracking Matrix</td>
</tr>
<tr>
<td>EiE</td>
<td>Education in Emergencies</td>
</tr>
<tr>
<td>EHRC</td>
<td>Ethiopian Human Rights Commission</td>
</tr>
<tr>
<td>EMRC</td>
<td>Emergency Migration Response Centers</td>
</tr>
<tr>
<td>ENCU</td>
<td>Emergency Nutrition Coordination Unit</td>
</tr>
<tr>
<td>ENDF</td>
<td>Ethiopian National Defense Forces</td>
</tr>
<tr>
<td>EPHI</td>
<td>Ethiopian Public Health Institute</td>
</tr>
<tr>
<td>EPRDF</td>
<td>Ethiopian People’s Revolutionary Democratic Front</td>
</tr>
<tr>
<td>ESA</td>
<td>Emergency Site Assessment</td>
</tr>
<tr>
<td>ES/NFI</td>
<td>Emergency Shelter And Non Food Items</td>
</tr>
<tr>
<td>EWRD</td>
<td>Early Warning and Response Directorate</td>
</tr>
<tr>
<td>FAO</td>
<td>Food and Agriculture Organization</td>
</tr>
<tr>
<td>FEWS NET</td>
<td>Famine Early Warning Systems Network</td>
</tr>
<tr>
<td>FGM</td>
<td>Female Genital Mutilation</td>
</tr>
<tr>
<td>FSMS</td>
<td>Food Security Monitoring Systems</td>
</tr>
<tr>
<td>FSNMS</td>
<td>Food Security And Nutrition Monitoring System</td>
</tr>
<tr>
<td>FTR</td>
<td>Family Tracing and Reunification</td>
</tr>
<tr>
<td>GBV</td>
<td>Gender Based Violence</td>
</tr>
<tr>
<td>GCC</td>
<td>Gulf Cooperation Council</td>
</tr>
<tr>
<td>GDP</td>
<td>Gross Domestic Product</td>
</tr>
<tr>
<td>GERD</td>
<td>Grand Ethiopian Renaissance Dam</td>
</tr>
<tr>
<td>GIMAC</td>
<td>Global Information Management, Assessment and Analysis Cell ()</td>
</tr>
<tr>
<td>GNI</td>
<td>Gender Inequality Index</td>
</tr>
<tr>
<td>GPI</td>
<td>Gender Parity Index</td>
</tr>
<tr>
<td>HEA</td>
<td>Household Economy Approach</td>
</tr>
<tr>
<td>HLP</td>
<td>Housing, Land and Property</td>
</tr>
<tr>
<td>HNO</td>
<td>Humanitarian Needs Overview</td>
</tr>
<tr>
<td>HRP</td>
<td>Humanitarian Response Plan</td>
</tr>
<tr>
<td>HSM</td>
<td>Humanitarian Situation Monitoring</td>
</tr>
<tr>
<td>IASC</td>
<td>Inter-Agency Standing Committee</td>
</tr>
<tr>
<td>ICCG</td>
<td>Inter-Cluster Coordination Group</td>
</tr>
<tr>
<td>IDP</td>
<td>Internally Displaced People</td>
</tr>
<tr>
<td>IMF</td>
<td>International Monetary Fund</td>
</tr>
<tr>
<td>INFORM</td>
<td>Index for Risk Management</td>
</tr>
<tr>
<td>IOM</td>
<td>International Organization for Migration</td>
</tr>
<tr>
<td>IPC</td>
<td>Integrated Food Security Phase Classification</td>
</tr>
<tr>
<td>JIAF</td>
<td>Joint Inter-Sectoral Analysis Framework</td>
</tr>
<tr>
<td>KSA</td>
<td>Kingdom of Saudi Arabia</td>
</tr>
<tr>
<td>LEAP</td>
<td>Livelihoods, Early Assessment and Protection</td>
</tr>
<tr>
<td>LIAS</td>
<td>Livelihood Impact Analysis Sheet</td>
</tr>
<tr>
<td>MAM</td>
<td>Moderate Acute Malnutrition</td>
</tr>
<tr>
<td>MGD</td>
<td>Millennium Development Goals</td>
</tr>
<tr>
<td>MHPSS</td>
<td>Mental Health and Psychosocial Support</td>
</tr>
<tr>
<td>MIRA</td>
<td>Multi-Cluster/Sector Initial Rapid Assessment</td>
</tr>
<tr>
<td>Acronym</td>
<td>Description</td>
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<tr>
<td>---------</td>
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</tr>
<tr>
<td>MIYCF</td>
<td>Maternal, Infant and Young Child Feeding</td>
</tr>
<tr>
<td>MOA</td>
<td>Ministry of Agriculture</td>
</tr>
<tr>
<td>MOH</td>
<td>Ministry of Health</td>
</tr>
<tr>
<td>MUAC</td>
<td>Mid Upper-Arm Circumference</td>
</tr>
<tr>
<td>NDRMC</td>
<td>National Disaster Risk Management Commission</td>
</tr>
<tr>
<td>NER</td>
<td>Net Enrolment Ratio</td>
</tr>
<tr>
<td>NFI</td>
<td>Non-Food Item</td>
</tr>
<tr>
<td>NGO</td>
<td>Non Governmental Organization</td>
</tr>
<tr>
<td>NMA</td>
<td>National Meteorological Agency</td>
</tr>
<tr>
<td>OCHA</td>
<td>Office for the Coordination of Humanitarian Affairs</td>
</tr>
<tr>
<td>PCR</td>
<td>Polymerase Chain Reaction</td>
</tr>
<tr>
<td>PIN</td>
<td>People In Need</td>
</tr>
<tr>
<td>PLW</td>
<td>pregnant and lactating women</td>
</tr>
<tr>
<td>PoE</td>
<td>Point of Entry</td>
</tr>
<tr>
<td>PP</td>
<td>Prosperity Party</td>
</tr>
<tr>
<td>PPE</td>
<td>Personal Protective Equipment</td>
</tr>
<tr>
<td>PSEA</td>
<td>Prevention of Sexual Exploitation and Abuse</td>
</tr>
<tr>
<td>PSNP</td>
<td>Productive Safety Net Programme</td>
</tr>
<tr>
<td>PTSD</td>
<td>Post Traumatic Stress Disorder</td>
</tr>
<tr>
<td>PWD</td>
<td>Persons with Disabilities</td>
</tr>
<tr>
<td>RHB</td>
<td>Regional Health Bureau</td>
</tr>
<tr>
<td>RVF</td>
<td>Rift Valley Fever</td>
</tr>
<tr>
<td>SA</td>
<td>Site Assessment</td>
</tr>
<tr>
<td>SAM</td>
<td>Severe Acute Malnutrition</td>
</tr>
<tr>
<td>SDG</td>
<td>Sustainable Development Goals</td>
</tr>
<tr>
<td>SEA</td>
<td>Sexual Exploitation and Abuse</td>
</tr>
<tr>
<td>SMS</td>
<td>Site Management Support</td>
</tr>
<tr>
<td>SNNP</td>
<td>Southern Nations Nationalities And People</td>
</tr>
<tr>
<td>TPLF</td>
<td>Tigray People's Liberation Front</td>
</tr>
<tr>
<td>TSF</td>
<td>Tigray Security Forces</td>
</tr>
<tr>
<td>UAG</td>
<td>Unidentified Armed Groups</td>
</tr>
<tr>
<td>UASC</td>
<td>Unaccompanied and Separated Children</td>
</tr>
<tr>
<td>UNHCHR</td>
<td>United Nations High Commissioner for Human Rights</td>
</tr>
<tr>
<td>UNHCR</td>
<td>United Nations High Commissioner for Refugees</td>
</tr>
<tr>
<td>UME</td>
<td>Unidentified Military Elements</td>
</tr>
<tr>
<td>UN</td>
<td>United Nations</td>
</tr>
<tr>
<td>UNICEF</td>
<td>United Nations International Children's Emergency Fund</td>
</tr>
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<td>VAS</td>
<td>Village Assessment Survey</td>
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<td>WASH</td>
<td>Water, Sanitation and Hygiene</td>
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<td>WFP</td>
<td>World Food Programme</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
</tr>
<tr>
<td>WMO</td>
<td>World Meteorological Organization</td>
</tr>
</tbody>
</table>
4.5 End Notes

1. The census scheduled for 2019 was postponed; population data is therefore based on growth projections by the Central Statistics Agency (CSA).
3. Household Consumption and Expenditure Survey (CSA, 2015-2016)
7. Ethiopian nationals made up 97.9 per cent of the movements along the Eastern corridor in 2020.
10. 'Ethiopia Demographic Health Survey 2016 – Table 4.3, pg. 72. %age of women aged 20 to 24 who were first married or in union before age 18', CSA, 2017
11. 'Concluding Observations. Ethiopia, 2011 (File no. CEDAW/C/ETH/CO/6-7), para. 18. In general recommendation No. 31 of the CEDAW Committee and general comment No. 18 of the CRC Committee on harmful practices, 2014, (File no. CEDAW/C/GC/31-CRC/C/GC/18), para. 7', CEDAW Committee.
12. 'Ethiopia Demographic Health Survey 2016 – Table 15.1, pg. 299', CSA, 2017
14. EHRC Investigation Report
22. Since November, humanitarian access to Tigray Region is heavily restricted, meaning that available 2020 data cannot be considered representative of the scale of violence/situation in the conflict in that region.
23. These IDP returnees had been displaced by inter-communal
violence in April 2019 and were returned by both regional administrations (Benishangul Gumuz – Amhara) in May 2020.

24 Link to full report: https://drive.google.com/file/d/1oqIUiartYwDyAv4Z0J3Ox7C0p3k3RyG/view

25 Link to full report: https://drive.google.com/file/d/1X9iK4jPttdgRECF51U1MrkvWWhmNjI/view


33 These are the new displacements that have been verified through field assessments. This number is calculated by summing up all increments in IDP population at site level from DTM round 20 to DTM round 23.

34 Source: IOM-DTM

35 DTM captures the origin of the major group of the IDP population at each IDP site. However, it is not specified how big this major group is. For this analysis, it was assumed that the entire site population originates from where the major group is indicated to originate from.

36 By IOM-DTM

37 Access Working Group, OCHA, 26 January 2021


41 Internal sources from the RO – no specific data product available for reference yet


44 IOM Regional Office for the East and Horn of Africa.

45 ‘RMMS Briefing Paper 3, Smuggled South’, Mixed Migration Center, 2017


48 Based on IOM DTM 22 and 23 and VAS 5 and 6

49 The most recent Child Labour Survey conducted in 2015 (CSA of Ethiopia & International Labour Organization, 2018) revealed an overall child labour incidence of 43 per cent, (50.2 per cent among boys, 34.5 per cent among girls) with 23 per cent of children found to be in hazardous work.

50 IOM DTM Ethiopia Site Assessment Round 22.

51 While there has been no systematic study assessing the impact of COVID-19 on the magnitude of child marriage in the country, CP and GBV AoR partners have documented an increasing number of reports of child marriage.


56 The purpose of the DTM Ethiopia Durable Solutions Index is to determine a benchmark and implement subsequent monitoring to explore and measure the progress of IDP populations towards overcoming displacement-related vulnerabilities by examining specific criteria outlined within the IASC Framework on Durable Solutions for Internally Displaced people. The index matches data collected by the DTM Site Assessment against the 5 core criteria of the IASC Framework on Durable Solutions for Internally Displaced People to determine the extent to which a durable solution has been achieved; https://displacement.iom.int/reports/ethiopia-%E2%80%94-thematic-paper-site-assessment-durable-solutions-index-report-5

57 The index builds around a selection of proxy variables whose inclusion has been considered important for providing insights on building a baseline and better understanding those elements of social cohesion that may need attention for future conflict-sensitive and resilient programming. For the horizontal dimension, from DTM, 7 variables were included and from VA 8 were included. For the vertical dimension, from both DTM and VA, 8 variables were included and for the third dimension focusing around safety and security, 6 and 3 variables from DTM and VA were included respectively. The scoring of the variables ranged between 0-5 (ranking) weights and the indices from 0-10 following the Durable Solutions Index methodology. The scoring applied the sum and averaging approach.

58 The low/medium/high range was determined subjectively but proportionally, based on the type of scores at hand to underscore the relative differences of the various scores.

59 Logistics Cluster Ethiopia, https://logcluster.org/countries/ETH

61 Woredas with more than 3,000 returning migrants are considered “hotspot” and 28 hotspot woredas were identified across three regions.


64 FAO Desert Locust Crisis revised Appeal through June 2021
67 AAH safety audit assessment in W. Wollega and Kemashi June 2020,

68 DTM reports


71 http://www.gimac.info/
72 https://www.gimac.info/partners/
73 https://www.gimac.info/about-gimac/af/
74 https://www.thedeep.io/

75 The number of returning migrants is a collated figure based on the data collected from IOM DTM VAS Round 6, IOM Assisted Voluntary Return and Reintegration (AVRR) and Voluntary Humanitarian Returns (VHR), KSA Returnees data, and data recorded from the Quarantine Centers, temporary shelters and PoE under COVID-19 Registration.