

Northern Ethiopia crisis: The humanitarian situation one year into the conflict

Conflict broke out in November 2020 in Tigray region, northern Ethiopia, between Tigrayan forces and Ethiopian National Defense Forces (ENDF) and its allies. One year later, the humanitarian situation is **extremely dire and continues to deteriorate**. The complex circumstances have made humanitarian response very difficult, and the needs of the population continue to increase. **Access constraints have changed in nature but have persisted throughout the conflict**, with varying levels of fighting, insecurity, bureaucratic, and logistical issues impacting the ability to deliver aid. The crisis has resulted in widespread displacement, civilian casualties and alarming reports of atrocities against civilians, and critical levels of food insecurity across the region.

Although gaps in data exist, **humanitarian needs across northern Ethiopia are high**, with an estimated 5.2 million people expected to be in need of humanitarian assistance (equivalent to 91% of the 5.7 million estimated total pre-conflict population of Tigray). As at June, estimates indicated that around two million people have been displaced across Tigray, with high numbers located in Adigrat, Adwa, Axum, Mekele, Sheraro, and Shire. **The spread of the conflict beyond Tigray** has led to increasing needs and internal displacements in Amhara and Afar regions, although the total IDP figure is challenging to establish. Nearly 50,000 Ethiopians have fled the conflict to eastern Sudan.

Intermittent and absent communications (telephone and internet), electricity, and banking services throughout much of the conflict, as well as **the lack of fuel and cash**, have hindered the ability to adequately respond to people in need and collect data on those in need, creating significant information gaps. Simultaneously, the information landscape has been tightly controlled, politicised, and limited by all parties to the conflict. The lack of up-to-date information continues to prevent a comprehensive understanding of the situation and has serious repercussions on humanitarian response.

On 2 November, the Government of Ethiopia (GoE) declared a national state of emergency to be in place for the next six months. The implications for the needs of the population, humanitarian operations, and the conflict are unknown.



Disclaimer: The events portrayed on the map are based on available information at the time of publication. The boundaries, names, and designations used on this map do not imply official endorsement or acceptance by ACAPS.

About this report

Aim: This report aims to provide an overview of the humanitarian impact of the Tigray crisis a year after the start of the conflict. For further information about the pre-crisis situation in Tigray, please access the ACAPS secondary data review report published on 23 February 2021.

Methodology: Secondary data review of public sources.

Limitations: Information regarding the situation in the region remains difficult to verify because of continued communication constraints and conflict in certain areas.

HUMANITARIAN ACCESS CONSTRAINTS

Who has been fighting in Tigray?

On one side, the Ethiopian National Defense Forces (ENDF), allied with Eritrean Defense Forces (EDF) and Amhara forces, including the Amhara Special Forces (ASF). On the other side are the Tigrayan forces, which mainly include Tigray People's Liberation Front (TPLF) that has now broadened and refer to themselves as Tigrayan Defense Forces (TDF). Other regional forces, militias, and armed groups have joined one side or the other throughout the year.

Sources: OCHA 13/04/2021; ICG 02/04/2021; OCHA 31/03/2021; Reuters 29/03/2021.

Humanitarian access constraints

Since the start of the conflict in November 2020, responders have faced varying degrees of access challenges into and within Tigray. Access has been unpredictable throughout the crisis and responders have had to constantly adapt to changes in the operational environment. The only areas that have been fully or partially accessible consistently since November 2020 are the capital Mekele, and areas along main roads. Access to rural areas, Western zone, and areas along the border with Eritrea have been particularly challenging. Looting of aid supplies and facilities posed an additional challenge to operations.

Security of aid workers

Security of aid workers has been a concern throughout the crisis. According to OCHA, at least 23 aid workers were killed in Tigray between November 2020 and 30 September 2021 (OCHA 12/10/2021). In addition to direct violence against responders, security incidents have included threats, intimidation, and harassment, detention of aid workers, and the confiscation of aid items and equipment. National aid workers, especially those from Tigray, face particularly high safety risks (OCHA 13/08/2021). Humanitarian assistance in northern Ethiopia is increasingly politicised, resulting in concerns over expulsion and suspension of responders.

Please see a timeline of key events related to the crisis on page 8.

November 2020 to February 2021: Insecurity and active conflict in all zones heavily restricted access across the region, despite the government's official declaration of the end of the military response in December. Communications, electricity, and banking services were cut off. Humanitarian operations were limited to Mekele and areas along the main road from Alamata to Mekele, and via Adigrat (Eastern zone) to Shire (North Western zone).

March to mid-June 2021: Access within Tigray improved beyond main roads, and movement of staff and cargo into the region increased, partly because eased processes. However, sporadic fighting continued, and many areas remained inaccessible due to the presence of armed groups. Insecurity, changes in administration of certain areas, and the frequent blockage of responders' movement at checkpoints resulted in an unstable operational environment.

Mid to late June 2021: Re-escalation of fighting in Tigray and increased insecurity lead to temporary suspension of field missions, especially in Central zone, where three MSF staff were killed. Telecommunication equipment of humanitarian responders was confiscated in several locations.

July to September 2021: Access within the region improved and most of Tigray became accessible for humanitarians, except in Western zone and border areas. However, a blockade prevented road access into Tigray and led to a lack of commercial and humanitarian supplies including fuel (see section below for more details on the blockade). Communication blackout greatly impacted the ability to provide aid. Fighting spread to Afar and Amhara and limited humanitarian access to people in need, including to people newly displaced by active conflict.

October 2021 and onward: Airstrikes in Tigray and fighting in Afar and Amhara regions have made the operational environment unpredictable. UNHAS flights into Tigray were suspended on 22 October. Operations in Tigray are largely halted, and the UN has started relocating staff out of Tigray.

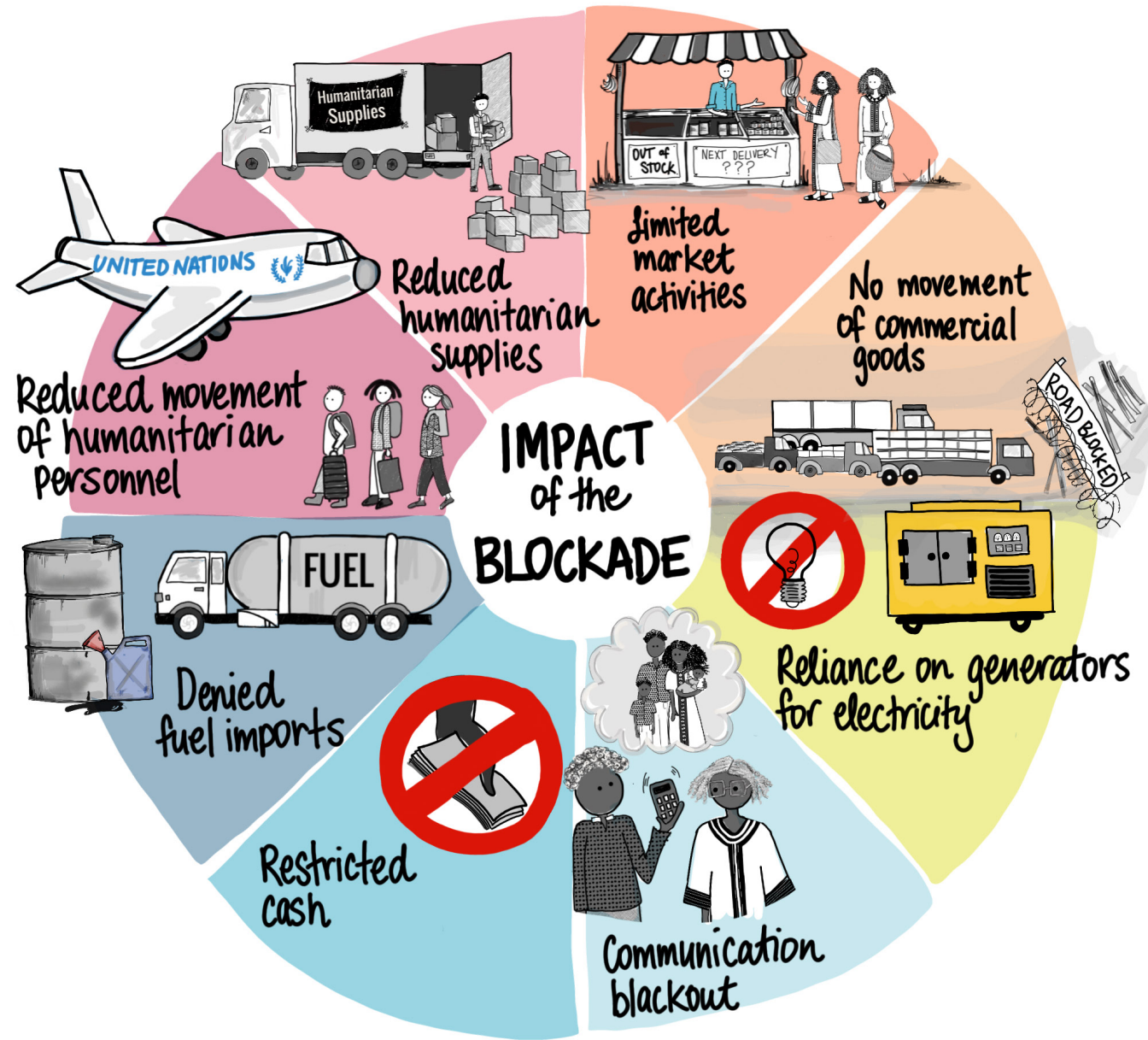
HUMANITARIAN BLOCKADE OF TIGRAY

Following the withdrawal of ENDF from Tigray in late June, movements within the region have improved, but access into Tigray has been severely restricted, essentially resulting in a blockade (OCHA 02/07/2021; BBC 02/09/2021).

Road access: Movement into the region through Southern zone from Amhara region is unpredictable given the security situation, while access by road from Eritrea and Sudan is impossible (ICG 26/10/2021; OCHA 30/09/2021). Since late June, the movement of humanitarian supplies into Tigray has only been possible from Afar region through the Semera-Abala-Mekele route; access via this route has been sporadic and infrequent because of changing bureaucratic requirements, insecurity, and logistical constraints (OCHA 19/07/2021).

Air access: Since 23 June, commercial flights to Afar and Tigray have been suspended (OCHA 30/06/2021). UNHAS passenger flights for humanitarian staff have been scheduled to operate between Addis and Mekele twice per week, but flights have been postponed several times, and aid workers are not always allowed to board because of bureaucratic procedures. The UN suspended all humanitarian flights into Tigray from 22 October, after a government-led airstrike forced a UNHAS flight bound for Mekele to return to Addis Ababa (The Guardian 23/10/2021; Al Jazeera 22/10/2021). UNHAS flights have been the only way for humanitarian responders to move cash into Tigray.

Telecommunication blackout and electricity cut: Blackouts and disruptions of electricity, telecommunications, and banking services have been persistent concerns throughout the year. These concerns have become even more severe since the start of the blockade.



HUMANITARIAN NEEDS IN TIGRAY

Access to essential services and humanitarian aid: People in Tigray, particularly those in rural areas, have endured one year of limited access to essential and humanitarian services. Those displaced have received support from host communities, but these have also seen a gradual depletion in their resources. Water and electricity were completely disrupted by conflict in early 2021, and were only partially restored throughout the year, predominantly in urban areas. Lack of telecommunication services has prevented information sharing and the reunification of families. The population's access to cash has been an ongoing problem but has intensified since the start of the blockade in early July.

Food: The severe food security situation is affecting the entire population. At least 5.2 million people require food assistance, and the little food aid that can be distributed is heavily stretched among the population. The loss of the majority of the 2020 harvest due to the inability of farmers to access their land, looting and burning of fields and supplies left the region with a major food deficit going into the lean season in June. The blockade that started in early July has impacted the supply of food into the region. The price for basic foods has increased throughout the conflict, and markets have been destroyed, are inaccessible, or do not have stocks due to supply constraints. There is evidence that death due to starvation has occurred.

Nutrition: The number of people screened for malnutrition has fluctuated throughout the conflict, but severe cases continue to be recorded. Malnutrition is especially prominent in children, where a 10-fold increase in the average yearly caseload is recorded. Pregnant and lactating women are also particularly affected. The lack of data limits the understanding of the scale of the issue, as well as trends over time.

Health: The health system has collapsed, leading to a rise in disease outbreaks, neonatal and maternal deaths, inability to monitor disease outbreaks or perform surgeries, unsafe abortions, untreated trauma cases, injuries, and chronic diseases. This is the result of very limited health staff, some of whom have not been paid for several months, inability for humanitarian responders to access health facilities, overall shortages in medicine, vaccines, and medical supplies, looting of medical facilities, and military occupation of healthcare facilities. Ongoing movement restrictions have presented barriers for the population to access healthcare.

Protection: Protection needs have been extremely high since the start of the conflict, with the presence of different armed groups heightening protection concerns. There have been alarming reports of atrocities against civilians including mass killings, abductions, use of rape as a weapon of war, and detention. As the conflict evolved, the use of negative

coping mechanisms, including survival sex and begging, have been reported. The collapse of the health system poses a significant threat to adequately support and treat people affected, with only a few health facilities providing services for rape survivors and limited psychosocial support. Unaccompanied children continue to be of concern, with the need for family reunification since the start of the conflict. Armed recruitment is ongoing, targeting men, women and youth, and there are reports of child fighters. The presence of unexploded ordnance (UXO) and landmines poses issues for the free movement of people and agricultural activities.

WASH: Access to clean water has been lacking across the region since the start of the conflict, with the majority of water facilities damaged by fighting. The continued degradation of WASH facilities and services has particularly affected IDP camps, with no gender-segregated facilities. Damage to water facilities was compounded by the lack of electricity and fuel required to pump and purify as well as support water trucking. Lack of clean water and open defecation, resulted in a rise in waterborne and communicable diseases, including diarrhoea, Hepatitis E and COVID-19.

Emergency Shelter and NFI: Conflict across Tigray has displaced more than 2 million people, forcing them to live with host communities or in informal settlements in schools and churches, which are overcrowded and unsanitary. High numbers of IDPs in the early stages of the conflict resulted in people living in the open without adequate shelter materials, a situation which was compounded by lack of shelter materials and the onset of main rainy season (June to September). Returnees who were displaced at the start of the conflict found their homes looted and destroyed upon returning to their place of origin. The scale of returnees is unclear, but they are also in need of shelter, food, and NFIs.

Education: For more than two years, children have been unable to attend school due to COVID-19 and then conflict, with 1.4 million in need of education support. Given that schools have numerous roles, including being a learning environment, safe space, community information, food and nutrition services, and health services, the impact is likely to be profound. Schools across Tigray are being used to host IDPs, and when schools reopen, resources will need to be placed into relocating IDPs, as well to rehabilitate schools and provide them with basic services. Teachers' salaries also need to be paid. Active conflict in and around schools continues to prevent safe access, as well as the presence of landmines and UXO.

Sources: ACAPS 11/2020; AP 20/09/2021; IOM 24/09/2021; DTM 13/08/2021; IPC 10/6/2021; MSF 24/03/2021; OCHA 07/10/2021; OCHA 05/08/2021; OCHA 19/01/2021; OCHA HRP 05/2021; Refugees International 26/08/2021; The New Humanitarian 11/10/2021; Tigray External Affairs Office 19/10/2021; UNICEF 22/10/2021; UNICEF 14/01/2021; WFP 06/10/2021.

DISPLACEMENT IN AMHARA AND AFAR CAUSED BY THE TIGRAY CRISIS

Displacement in Amhara and Afar has been ongoing since the spread of the conflict but total IDP figures remain challenging to establish. Since October, an escalation of conflict in both regions is leading to further displacement and a deterioration in the humanitarian situation (OCHA 21/10/2021). It remains unclear how hostilities are impacting displacement in both regions, due to ongoing insecurity and access constraints. As at 30 October, fighting in Dessie and Kombolcha (Amhara) has resulted in large-scale displacement and insecurity in the area is preventing humanitarian response (OCHA 01/11/2021; Aljazeera 31/10/2021).

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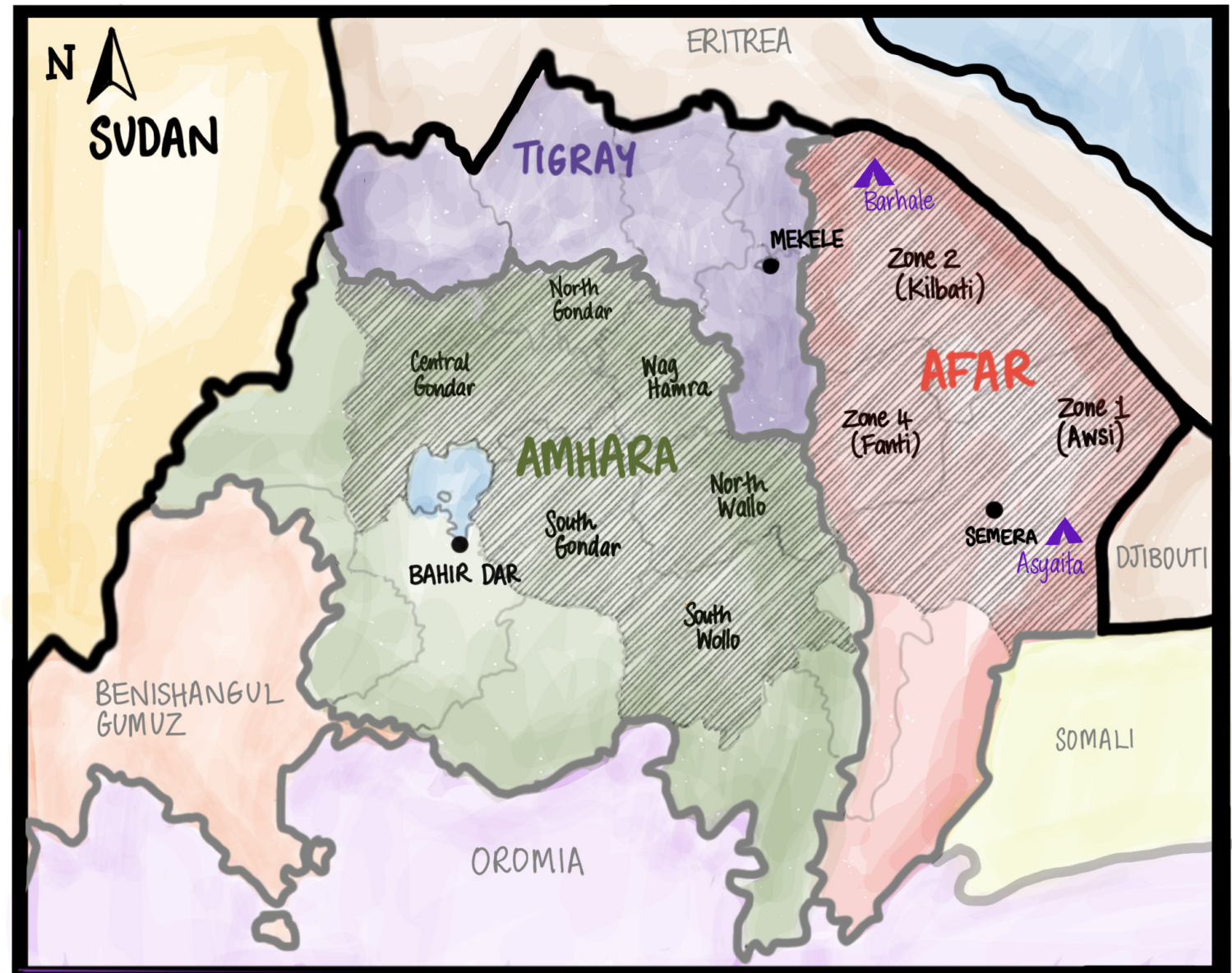


Zones experiencing displacement



Refugee camps

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REGIONAL IMPLICATIONS OF THE TIGRAY CONFLICT

Amhara

Access constraints

In Amhara, active fighting continues to affect the access of humanitarian service providers to those in need of assistance, particularly those displaced in Dessie and Kombolcha (OCHA 12/10/2021). There are also reports of civilian deaths (including children) caused by landmines and UXO, but this remains difficult to verify. Access constraints have increased prices for food and NFIs (OCHA 07/10/2021). Since 30 October, telecommunications and electricity have been cut (OCHA 01/11/2021).

Main needs

Protection: Incidences of rape have been reported in regions of Amhara controlled by Tigray forces (Reuters 18/10/2021).

Food: Needs have increased as a result of the conflict and large-scale displacement (OCHA 02/09/2021 and 01/11/2021). Food assistance is required given the disruption to livelihoods.

Agriculture: Farmers in conflict-affected areas in Amhara have not been able to plant and plough as a result of the insecurity associated with conflict (The New Humanitarian 04/10/2021).

Health: Towns with high numbers of IDPs, such as Dessie, Debark, and Kombolcha, have a shortage of medicine because of the increased number of people injured in the conflict. Those living in congested collective sites are at high risk of contracting communicable diseases (The New Humanitarian 04/10/2021; OCHA 01/11/2021).

Afar

Access constraints

Access improved in Zone 4 (Fanti zone) in September, allowing thousands to be reached with humanitarian assistance, and IDPs were able to return home. Active fighting in Zone 2 (Kilbati zone) has prevented humanitarian response (OCHA 30/09/2021).

Main needs

Food: An estimated 534,000 people in Zones 1, 2, and 4 are in need of food assistance (OCHA 21/10/2021). Insecurity around Zone 2 (Berhale zone) has made the Eritrean refugee Berhale camp inaccessible to UNHCR, who provides aid there (UNHCR 26/10/2021).

WASH: Water supply systems in Zone 4 (Fanti zone) are reportedly out of service owing to the failure of motorised schemes, lack of fuel, inflation of fuel prices, and disconnection of electric power. Alternative sources such as rivers are used, which requires long-distance travel by foot, raising concerns about the protection of women and girls (GoE 30/09/2021).

Sudan

As at 30 September, a total of 49,490 refugees have entered eastern Sudan from Tigray since the start of the crisis in November 2020. The majority of them are Ethiopian nationals located in four sites (UNHCR 14/10/2021). The beginning of the conflict saw an influx of refugees starting in mid-November 2020, with peaks in daily arrivals recorded between early January and mid-February 2021 (UNHCR 02/05/2021). A decline in arrivals was reported from the end of April onwards (UNHCR 19/10/2021), which may be partly attributed to movement prevented by insecurity in Western zone in Tigray (Reuters 24/08/2021; AP 06/08/2021).

Main needs

Protection: Medical assistance and psychological support are needed for sexual and gender-based violence survivors (UNHCR 27/09/2021).

Shelter: Transit centres are overcrowded. Continued gaps in the provision of basic services were caused by flooding in September and the resulting inaccessibility of roads (IFRC 05/09/2021).

WASH: Latrine coverage remains below the minimum standard in post emergency settings (1:20), and facilities are not gender-segregated (UNHCR 19/10/2021).

Health: A total of 1,328 cases of hepatitis E has been recorded in the four refugee sites as at 23 September (UNHCR 01/10/2021). There is an increasing concern for mental health among refugees living in dire conditions (ICRC 08/10/2021).

INFORMATION GAPS AND LIMITATIONS

Information is controlled

Media activities and access to the region for journalists are restricted. Journalists have faced harassment, detention, and expulsion when reporting on the conflict in Tigray. Ethiopian government exercises internet and communications blackout during times of unrest.

Information is politicised

It is hard to triangulate information and remain unbiased. There is a lack of independent information. Misinformation campaigns are used by parties to the conflict as a mean of warfare.

Information is limited

Telecommunication, internet, and electricity services have been deliberately disrupted on a regular basis since the start of the conflict and the region is currently experiencing an ongoing, complete outage since June.

There are few opportunities to

Collect

Assess

Analyse

Share

... information

Without data on food security

Scale and severity of food needs are unknown.

Humanitarian response planning is hindered.

Inability to meet the needs of the population.

Famine cannot be confirmed or denied.

What we don't know regarding humanitarian needs

Geographic areas

Rural areas throughout Tigray region.
Western zone.
Border areas.
Areas with active conflict in Tigray, Amhara and Afar.

Population groups

IDP flow and numbers.
Returnee flow and numbers.
Number of host communities hosting IDPs.
Gender disaggregated data.
Situation of people with disability or chronic illnesses, and elderly people.

Needs

Only localised rapid assessments.
Severity, scope, and scale of needs.
Sectoral data.

What we do know regarding humanitarian needs

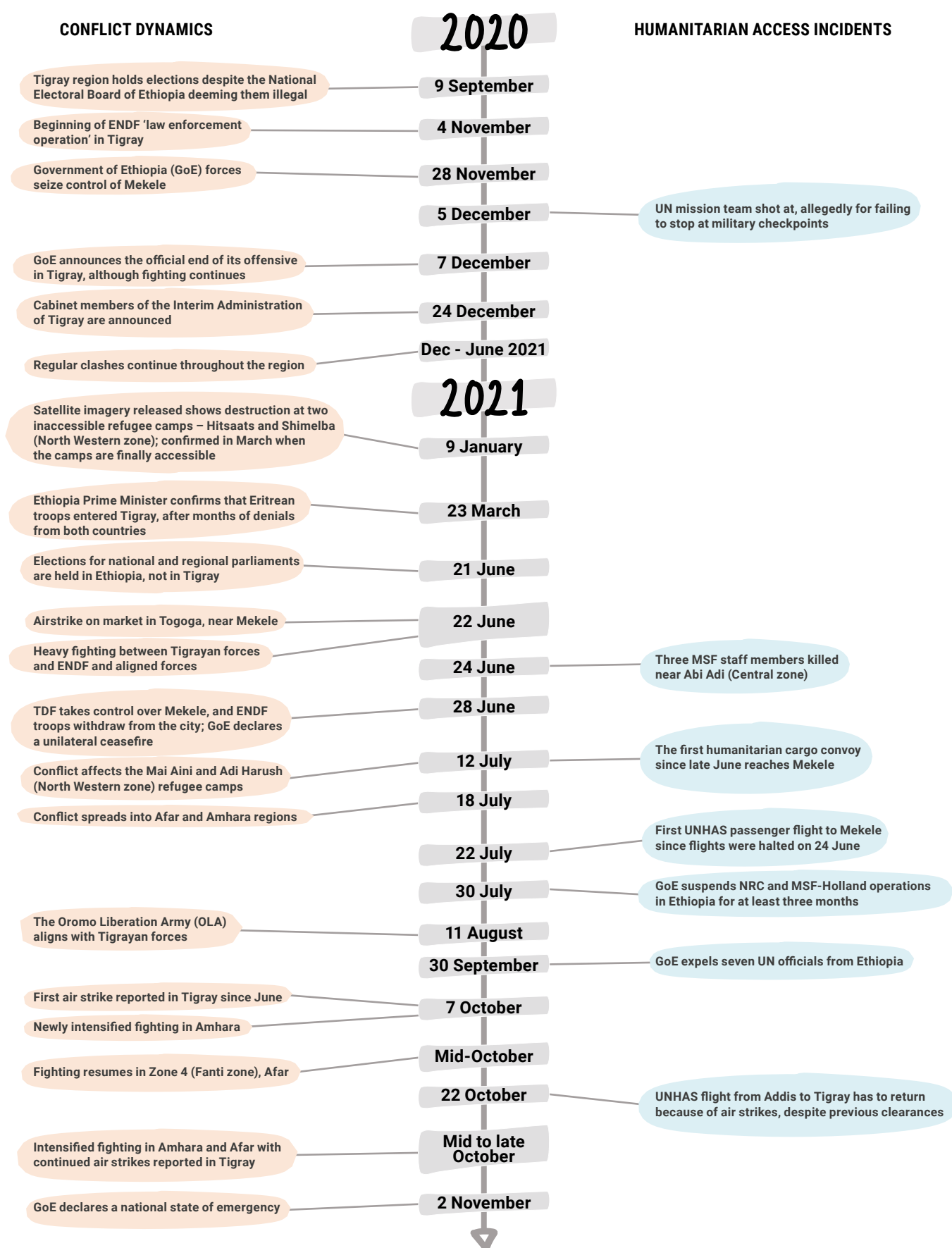
We know that the number of people in need of humanitarian assistance in northern Ethiopia is one of the highest in the world.

We know that over 2.2 million are internally displaced in northern Ethiopia as a result of the conflict, most of them during the first months of hostilities.

We know that over 90% of the population urgently need food to survive.



TIMELINE: KEY DEVELOPMENTS SINCE 4 NOVEMBER 2020



Sources: AP 02/11/2021; OCHA 22/10/2021; France 24 13/10/2021; Reuters 13/10/2021; AP News 11/10/2021; Reuters 13/10/2021; Reuters 09/10/2021; The New Humanitarian 11/10/2021; Reuters 09/10/2021; UN News 30/09/2021; AP News 11/08/2021; AP 03/08/2021; Devex 04/08/2021; UN News 22/07/2021; Reuters 19/07/2021; RFI 18/07/2021; Reuters 19/07/2021; RFI 18/07/2021; OCHA 19/07/2021; WFP 12/07/2021; OCHA 19/07/2021; Addis Standard 28/06/2021; ENA 28/06/2021; Reuters 29/06/2021; MSF 25/06/2021; UN RC/HC 26/06/2021; BBC 22/06/2021; AP 24/06/2021; Bloomberg 09/01/2021; Borkena 24/12/2021; DW 08/12/20.

Disclaimer: the timeline does not display an exhaustive list of events