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Emergency appeal Ethiopia: Drought

 International Federation
of Red Cross and Red Crescent Societies

Appeal n° MDRET016

65,371 people to be assisted

Appeal launched 28 December 2015

Glide n° [DR-2015-000109-ETH](#)

2,773,566 Swiss francs revised Appeal budget

Appeal ends December 2016

1,207,430 Swiss francs funding gap

This Emergency Appeal seeks **2,773,566 Swiss francs** (increased from some 2.2m Swiss francs) to enable the International Federation of Red Cross and Red Crescent Societies (IFRC) to support the **Ethiopian Red Cross Society (ERCS)** to reach **65,371 people** (increased from 35,000) affected by drought. The revised operation focuses on extending the **supplementary food support** to an additional **30,000 moderately malnourished children < 5 years, pregnant and lactating women** in priority hotspot areas, and adjusting the **water, sanitation, and hygiene (WASH)** component to ensure integration with the **Community Based Health and First Aid (CBHFA)** approach, and providing increased access to water for the target community. With 1,566,136 Swiss francs received, the funding gap (revised budget) is 1,207,136 Swiss francs.

The disaster and the Red Cross Red Crescent response to date

September / October 2015: consecutive failed rains (Belg rains (March – May), and Kirmet rains (June – Sept) combined with erratic weather conditions attributed to El Niño, has resulted in severe food insecurity, especially in the North and North East areas of the country.

November 2015: ERCS requests support through an IFRC Field Assessment and Coordination Team (FACT) deployed to define the needs and to develop an appropriate, relevant plan and budget for the response. The FACT conducted field visits to Afar and Somali regions, and held numerous meetings with Movement, non-Movement partners and other stakeholders.

28 December 2015: Emergency Appeal launched for 2,211,085 Swiss francs to support 35,371 people, with 181,521 Swiss francs allocated from the IFRC's Disaster Relief Emergency Fund (DREF) as start-up funding support for the response.

March 2016: IFRC Head of Emergency Operations (HEOps) deployed to work with the ERCS to consolidate its National Drought Response Plan.

June 2016: Revised Emergency Appeal launched for 2,773,566 Swiss francs to assist 65,371 people, with increased supplementary food, WASH and community based health (CBHFA) support, specifically targeting moderately and severely malnourished children < 5 years, pregnant and lactating women.



Ethiopian women receiving an Ethiopian Red Cross-distributed food parcel. Photo: IFRC and ERCS

Coordination and partnerships

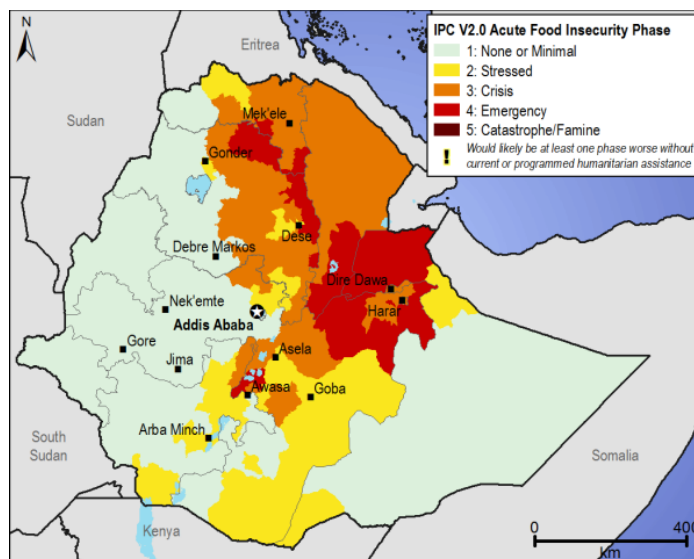
The National Society has been responding with its own funds and through support from Movement and external partners since the early stages of the drought. The ERCS has been successful in building strong partnerships in Ethiopia to increase the drought response operations; through private fundraising as well as partnership with International Organisations such as the UN. The ERCS is working and coordinating closely with the government at the central and regional levels. The ERCS is part of the Drought Technical Working Group organized by the National Disaster Response Mission Commission at the capital level. At the zonal and woreda level, the government has organized a Drought Response Task Force to which ERCS branches are participating. For this Emergency Appeal, ERCS will work in Bidu woreda in Afar region in the Health, WASH, Food Security / Livelihoods sectors as this is one of the area's most in need, and with the fewest number of humanitarian actors present. In other parts of Afar, the external actors present include CARE, CRS, GAA, IOM, IRC, MDM, Oxfam, SCI, UNHCR, VSF, and WFP, however only a few of them are offering support in Health and Livelihoods.

The IFRC supports the ERCS through its East Africa and Indian Ocean Islands (EAIOI) Country Cluster Support Team and the Africa Regional Office (both based in Nairobi, Kenya), and through an IFRC Operations Manager based in the ERCS headquarters in Addis Ababa. In Ethiopia, the IFRC, ICRC and Partner National Societies (PNS) participate in regular co-ordination meetings convened by the National Society. The IFRC also convenes regular co-ordination meetings in Nairobi with the ICRC and PNS representatives to share updates on the situation in Ethiopia and neighbouring countries and Movement action to date. In March 2016 an IFRC Head of Emergency Operations (HEOps) was requested by the National Society to support the consolidation of the ERCS's National Drought Response plan under an 'umbrella document'. The objective of this document was to pull together the National Society overall response plan, strategy and operational framework. There is an extensive presence of Red Cross partners in Ethiopia (Austrian, Spanish, Canadian, Finnish, Swedish, Netherlands, and Swiss Red Cross, and ICRC) and all PNS's have developed strategies to support the ERCS drought emergency response. Discussions between IFRC and ERCS resulted in an agreement that all partners Drought Response activities should be harmonised with the ERCS National Drought Response Plan.

The operational strategy

The last OCHA Humanitarian Bulletin¹ indicates that the level of needs across virtually all humanitarian sectors have already exceeded the levels seen in the Horn of Africa drought of 2011.

In Afar, where ERCS and IFRC are targeting their assistance, FEWSNET has indicated that the food security situation in the northern areas will continue to remain at a crisis level until September this year (see map). A crisis level of acute food insecurity represents that at least 1 in 5 households face significant food consumption gaps with high or above the usual acute malnutrition, or is marginally able to meet minimum food needs only with unsustainable coping strategies such as liquidating livelihood assets. The maps represent acute food insecurity outcomes relevant for emergency decision-making. It does not necessarily reflect chronic food insecurity².



The Humanitarian Requirement Document (HRD) which was launched in December 2015 initially projected that 10.2 million people required relief food assistance; 1.7 million individuals were estimated to experience Moderate to Acute Malnutrition (MAM) and 435,000 people were estimated to experience Severe Acute Malnutrition (SAM). UN OCHA and the Ethiopian Government in March 2016, indicate that 2.2 million people are estimated to experience MAM and 450,000 children under 5 are expected to face SAM. Due to the increased needs, the revised Emergency Appeal will seek funding to support an additional 30,000 children < 5 years and pregnant/lactating women (PLW) as part of the ERCS National Drought Response Plans for the extended emergency phase.

¹ April 18th 2016.

² FEWS Net – Ethiopia Food Security Outlook – Feb – Sept 2016

Overall objective:

Provide humanitarian aid to some 35,371 people in Afar region affected by drought through the distribution of supplementary food, malnutrition screening and referral, improved access to safe water, hygiene promotion and protection of their livelihoods. The revised Emergency Appeal will also support the provision of supplementary food for an additional 30,000 beneficiaries with MAM in priority 1 hot spot areas³ where ERCS has an effective operational presence and with the aim of covering the gap in the support to these people. The ERCS will target Afar Region (Bidu woreda) with health, WatSan, and food security / livelihood response activities with complementary activities in filling the gap in the ERCS commitment to cover supplementary food needs for 10% of the total needs identified in the Humanitarian Requirement Document (December 2015).

Proposed strategy:

The initial Emergency Appeal timeframe covered a total of 12 months, with initial activities planned for the first 6 months. This revised Emergency Appeal elaborates on activities planned for the latter 6 months of the appeal timeframe and is based on information obtained from secondary data and field visits conducted during April (the Belg rain period that failed in 2015, and have been lower than average in 2016).

The main elements for the appeal revision and operational adjustments are:

- The current revision has adjusted the planned activities for Afar based on the evolving needs on the ground, in addition to adding a separate component in support of the growing need for supplementary food in priority 1 hot spots areas where ERCS has an operational presence. The main areas for this support will be in Oromiya, Tigray, Amhara, Somalis and/or other hotspots in Afar. This will be identified through ERCS assessments and active coordination with the Addis based nutrition cluster and regional branch structures. The latter added aspect aligns the revised Appeal to the ERCS National Drought Response Plan.
- A second operational adjustment is envisaged for the end of July following a mid-term evaluation. Lessons learned will inform further operational adjustments, including a sustainable and relevant exit strategy. The phase out and exit strategy will be coordinated with IFRC and Movement partners to adjust and coordinate support to the National Society's continued activities and strategic plans for the drought response and links to longer-term programming in the most vulnerable areas with an ERCS presence.
- Subsequent operational and strategic adjustments are planned for August-September, as per the evolving humanitarian situation in country and release of more detailed weather forecasting for the end of the year.

Activities planned (by sector)

Livelihoods, including food security:

- **Supplementary food transfers:** Although the GoE of Ethiopia (GoE) and the UN World Food Program (WFP) are providing general food rations⁴ (maize grain) to affected populations in the target areas, the food provided does not meet the full nutrition requirement. Young children and pregnant/lactating mothers are particularly in need since the full basket is not frequently provided due to logistics constraints and supply chain challenges from WFP/GoE. To complement this initiative, supplementary food will be provided to children < 5 years, as well as pregnant and lactating mothers in Bidu woreda as well as in other priority 1 hotspot areas. The supplementary feeding package will include Corn Soya Blend (CSB, now often entitled SuperCereal) and vegetable oil. This will be based on the established standard of monthly rations of 6.25kg of CSB and 1ltr. of oil per person for a period of 6 months.

For Bidu Woreda, the intervention will target 100% of the screened and registered children < 5 years and pregnant and lactating women over a period of 6 months with a 2-month ration per distribution. The total target is 19,200 beneficiaries. For other priority 1 hot spot areas, the intervention will support up to 30,000 beneficiaries -- 17,700 children under 5 and severely or acutely malnourished (U5 SAM) and 12,300 pregnant and lactating women (PLW) – over a period of 6 months with a 2-month ration per distribution. The total target is 30,000 beneficiaries.

- **Provision of supplementary food for livestock:** This intervention will target the most vulnerable 20% households in the affected host community (supporting 9,514 animals, or 5 animals per HH) in target kebeles. The livestock feed primarily targets the most productive female livestock (milking) to ensure continued access to milk. The intervention will target 5 productive livestock per household for a period of 6 months. This number

⁴ Standard food basket for a monthly ration for family size of 6 individuals consists of 16 kg cereal (maize or wheat), 0.9l oil 1.5 kg pulses (lentils, beans or split peas), 4.5 corn soya blend. (CSB/SuperCereal).

is derived from the livelihood baseline profiles that indicate poor pastoralists own 6 – 10 livestock mainly goats and sheep⁵.

- **Provision of livestock treatment support:** The GoE as well as regional and woreda authorities in Afar are providing mass livestock vaccinations to prevent livestock from contracting preventable diseases associated with long dry spells and weakened livestock body conditions. The recent Karma assessment in Zone 2 of Afar Region indicated the community based animal health system has weakened because most poor pastoralists are currently not able to pay for the service with the current poor livestock prices. The intervention will target 20% most vulnerable households in targeted communities with the treatment of 5 livestock for 6 months (supporting 9,514 animals, or 5 animals per HH). The program will be technically guided by the woreda livestock office which will also ensure availability of the basic drugs and equipment.
- **Provision of pasture and fodder seed:** This is planned as a community level intervention primarily targeting host community in the operational kebeles to rejuvenate degraded pastures and pilot community/fodder production. The current strain on pasture, particularly in areas with increased populations, will continue even with the current rains as the consecutive long dry spells will have likely destroyed natural pasture seed. The regional GoE authorities in Afar are prioritizing fodder production by allocating 700 hectares to the agricultural bureau to boost fodder production. This intervention is in line with the GoE led initiative. Regional governments are making fodder provision a priority and already some supplies have been provided.

The government fodder supplies are targeted to specific areas where no other agency is present, and the duration of distributions is not determined. The project will evolve with the Agriculture and Pastoral Development Bureau in the identification of the target households for fodder provision to ensure no duplication.

- **Discussion on market-based Interventions and Cash Transfer Programming (CTP):** In the ERC National drought response plan the National Society has highlighted the potential opportunities of cash transfer programming in this response. IFRC and ERCS are in discussions on how to identify the most suitable way of conducting a market assessment and CTP feasibility study for the appeal intervention in Afar. Initial visits have shown that one kebele has a small market which gives access to basic commodities such as sugar, tea, biscuits, grains and various other basic household items. It is envisaged that a sector for possible intervention would be the livelihoods component and following the CTP feasibility study a more detailed plan would be developed to include interventions in the next revision of the EA.

Health:

- **Household level screening:** In total 75 health/hygiene volunteers will be involved in this intervention visiting and identifying households with children < 5 years who are severely or acutely malnourished (U5 SAM). 75 (5 from each Kebele in Bidu) were already trained in December 2015 on CBHFA modules 1-3, the identification of severely malnourished children and the identification of other vulnerable households, such as those with children with disabilities.
- **Skilled volunteers and real time monitoring:** The volunteers will be provided additional refresher training with a focus on data collection and reporting through the use of mobile phones as well as malnutrition screening.
- **Good quality care through strengthening the health system:** Health centre and staff in Bidu participate in monitoring and supporting volunteers. The health centre cannot presently meet the increasing demand and therefore some activities are targeted to support strengthening of health centre to better manage expected increase in service demand. A health centre assessment and support to existing mobile clinics is included in the appeal.
- **Health promotion and prevention:** Once the situation is stabilized and the number of new U5 SAM cases decreases, volunteers will re-focus their work to health promotion based on the needs found during household registration. Also some health awareness activities will be done at community level.


Water, sanitation and hygiene:


In addition of the integrated health and WASH approach identified under the health section, the revised Appeal will support a water needs assessment for Bidu as well as the repositioning of WASH non-food items (water treatment chemicals, bucket, body soap and collapsible jerry cans) for 1,000 households. Distribution will be discussed and agreed with local authorities and based on needs in case of increased population numbers in vulnerable households and/or flooding.

⁵ Elidar Pastoral Livelihood baseline profiles 2006

Hygiene promotion will be conducted as part of the health information and community malnutrition screening activities by a total of 75 volunteers. PHAST training will also be given to enhance community participation in order to reflect on their practices and behaviours and the impact this has on their health. This will allow for a comprehensive and integrated health and hygiene promotion to affected communities. Access to water from an infrastructural stance is a chronic challenge, and gaps in the water needs will be identified with the local government authorities, then forwarded to the responsible authorities or the emergency response mechanisms within Afar region.




Proposed sectors of intervention

 Health
Outcome 1: Critical nutritional status of the children under five is improved in Bidu, Afar region
Output 1.1 Screening and referral for acute malnutrition carried out for households with children < years.
<p>Activities planned:</p> <ul style="list-style-type: none"> • CBHFA training for 75 volunteers and refreshers. • CBHFA health/hygiene volunteers in 15 kebeles are trained in reporting and engagement methods, including use of mobile phones. • Deliver mobile phones for health/hygiene volunteers for reporting and other equipment for household screening. • Identification and registration of households with U5 SAM (including general household health assessments) • Health/hygiene volunteers report findings and data to health facilities. • Provide food support for mothers/fathers arriving to health facility with their children • Two (2) month food support for households after discharge of child • Health/hygiene volunteers continue follow up with households after successful treatment
Output 1.2 Target population are provided with rapid medical management of drought related diseases
<p>Activities planned:</p> <ul style="list-style-type: none"> • Planning meetings to define roles between Red Cross and health centre staff • Establish supervision system for volunteers and prepare reporting formats • Support drought affected population with additional Red Cross mobile health unit • Equip and or replenish medicines and supplies of the mobile unit • Twenty (20) volunteers are trained in First Aid • In coordination with regional health authorities, conduct a health centre capacity assessment • Establish accountability mechanism for households to report any shortcomings and follow up any complaints
Output 1.3 Community-based disease prevention and health promotion is provided to the target households
<p>Activities planned:</p> <ul style="list-style-type: none"> • Analysis of household's health situation based on information gathered during registration • Identify and prioritize needs for increasing health knowledge and awareness at the household level • Train volunteers in identified topics • Establish supervision and reporting structure for longer term intervention and define roles between health centre and Red Cross • Implement promotion activities at community level • Implement community conversation sessions (tea and coffee ceremony expenditure: once/month in 15 kebeles) • Mid-term and final review meeting (2 sessions for 2 days each)

 Water, Sanitation, and Hygiene
Outcome 2: Immediate reduction in risk of waterborne and water related diseases in targeted communities
Output 2.1 Continuous assessment of water, sanitation, and hygiene situation is carried out.
<p>Activities planned:</p> <ul style="list-style-type: none"> • WASH and water needs assessment in Bidu • Procurement of WASH NFI's for prepositioning for 1,000 households
Output 2.2 Hygiene promotion activities which meet Sphere standards

Activities planned:

- 75 CBHFA health/hygiene volunteers receive PHAST training
- Hygiene promotion campaigns in public places and at SF distributions
- Hygiene promotion.

 Food security	 Nutrition	 Livelihoods
Outcome 3: Immediate nutritious supplementary food requirements are met for the targeted population in priority 1 hot spot areas		
Output 3.1 Sufficient nutritious supplementary food is accessed by children < 5 years, pregnant and breast feeding women in Bidu woreda.		
Activities planned: <ul style="list-style-type: none"> • Procurement of supplementary food rations for 2,500 children < 5 years and 700 PLW per month (2 month rations per distribution) based on monthly screenings. • Identification and registration of beneficiaries • Distribution of supplementary food rations for < 5 years • Distribution of supplementary food rations for pregnant and breastfeeding mothers • Post distribution follow up visits 		
Output 3.2 Sufficient nutritious supplementary food is accessed by children < 5 years years, pregnant and breast feeding women in other priority hot spot areas.		
Activities planned: <ul style="list-style-type: none"> • Procurement of supplementary food rations for 17,700 children under 5 and 12,300 PLW in total over 6 months • Coordination with GoE and nutrition partners on gaps and identification of beneficiaries • Distribution of supplementary food rations for children < 5 years Distribution of supplementary food rations for pregnant and breastfeeding mothers • Post distribution follow up visits 		
Outcome 4 Livelihoods of affected populations are protected through targeted livestock interventions.		
Output 4.1 Livestock assets are protected		
Activities planned: <ul style="list-style-type: none"> • Livelihood assessment and implementation work planning • Procurement of supplementary livestock feed for 6 months for 9,514 animals • Identification and registration of beneficiaries • Distribution of supplementary feed for milking livestock • Veterinary treatment of livestock for the most vulnerable households • Provision of pasture and fodder seed for targeted communities 		


Quality programming / Areas common to all sectors

Outcome 5: The management of the operation is informed by continued assessments and a comprehensive monitoring and evaluation system

Output 5.1 The findings of evaluations lead to adjustments in on-going plans and future planning as appropriate

Activities planned:

- Carry out needs assessments
- Conduct Appeal revisions as needed based on on-going assessments and relevant new data to ensure activities remain in line with the needed response
- Inception workshop with ERCS field coordinator, technical committees and the IFRC coordinator
- Drought learning review workshops
- Conduct mid-term review including a beneficiary satisfaction survey with targeted population
- Consider operational revisions and adjustments based on outcome of the mid-term review
- Conduct a final evaluation of the operation

 **Programme support services**

Based on the demand for the technical and coordination support required to deliver in this Emergency Appeal operation, the following programme support functions will be put in place to ensure an effective and efficient technical coordination: human resources, logistics and supply chain; information technology support (IT); communications; security; planning, monitoring, evaluation, and reporting (PMER); partnerships and resource development; and finance and administration. Further details are available in the Emergency Plan of Action.

 **Budget**

The revised appeal budget is **2,773,566 Swiss francs**. See attached [budget below](#).

Garry Conille
Under Secretary General
Programme and Operations Division

Elhadj As Sy
Secretary General

Contact information

For further information specifically related to this operation please contact:

- **Ethiopia Red Cross:**
 - Madam Frehiwot, Secretary General; phone: +25193000582; email: ercs.sg@redcrosseth.org
 - Ato Hagos Gemechu, DSG-Program, phone: +251930099528; email: dsg.program@redcrosseth.org
 - Ato Mohammed Deda, DPRD head, phone: +251911411719; email: mohammed.dada@redcrosseth.org
- **IFRC Project Manager:** Mette Steen, Operations Manager, phone: +251911207163; email: mettesteen.petersen@ifrc.org
- **IFRC East Africa Country Cluster Support Team (CCST):** Mununuri Musori, Acting Head of Cluster, PMER coordinator; phone: +254202835261; email: mununuri.musori@ifrc.org
- **IFRC Africa Regional Office:** Farid Abdulkadir, Head of Disaster and Crisis Prevention, Response and Recovery Unit, Nairobi, Kenya; phone +254731067489; email: farid.aiywar@ifrc.org
- **IFRC Africa Regional Office Logistics:** Rishi Ramrakha, Head of Regional Logistics Unit; mobile phone: +254733888022; Fax +254202712777; email: rishi.ramrakha@ifrc.org

For Resource Mobilization and Pledges:

- **IFRC Africa Regional Office:** Fidelis Kangethe, Partnerships and Resource Mobilization Coordinator; mobile phone: +254714026229; email: fidelis.kangethe@ifrc.org

For Performance and Accountability (planning, monitoring, evaluation and reporting)

IFRC Africa Regional Office: Robert Ondrusek, PMER Coordinator; mobile phone: +254731067277; email: robert.ondrusek@ifrc.org

How we work

All IFRC assistance seeks to adhere to the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable. The IFRC's vision is to inspire, **encourage, facilitate and promote at all times all forms of humanitarian activities** by National Societies, with a view to **preventing and alleviating human suffering**, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:



Save lives,
protect livelihoods,
and strengthen recovery
from disaster and crises.



Enable **healthy**
and **safe** living.



Promote **social inclusion**
and a culture of
non-violence and **peace.**

EMERGENCY APPEAL

27/05/2016

APPEAL Ethiopia Drought

Budget Group	Multilateral Response	Inter-Agency Shelter Coord.	Bilateral Response	Appeal Budget CHF
Shelter - Relief	0			0
Shelter - Transitional	0			0
Construction - Housing	0			0
Construction - Facilities	0			0
Construction - Materials	0			0
Clothing & Textiles	0			0
Food	810,300			810,300
Seeds & Plants	6,000			6,000
Water, Sanitation & Hygiene	0			0
Medical & First Aid	16,801			16,801
Teaching Materials	11,600			11,600
Utensils & Tools	447,526			447,526
Other Supplies & Services	0			0
Emergency Response Units	0			0
Cash Disbursements	0			0
Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES	1,292,227	0	0	1,292,227
Land & Buildings	0			0
Vehicles	0			0
Computer & Telecom Equipment	0			0
Office/Household Furniture & Equipment	0			0
Medical Equipment	0			0
Other Machinery & Equipment	0			0
Total LAND, VEHICLES AND EQUIPMENT	0	0	0	0
Storage, Warehousing	37,600			37,600
Distribution & Monitoring	28,800			28,800
Transport & Vehicle Costs	319,240			319,240
Logistics Services	18,000			18,000
Total LOGISTICS, TRANSPORT AND STORAGE	403,640	0	0	403,640
International Staff	329,000			329,000
National Staff	18,900			18,900
National Society Staff	83,800			83,800
Volunteers	79,460			79,460
Total PERSONNEL	511,160	0	0	511,160
Consultants	4,000			4,000
Professional Fees	16,000			16,000
Total CONSULTANTS & PROFESSIONAL FEES	20,000	0	0	20,000
Workshops & Training	80,460			80,460
Total WORKSHOP & TRAINING	80,460	0	0	80,460
Travel	52,775			52,775
Information & Public Relations	11,075			11,075
Office Costs	38,150			38,150
Communications	18,800			18,800
Financial Charges	14,400			14,400
Other General Expenses	161,600			161,600

Shared Office and Services Costs	0			0
Total GENERAL EXPENDITURES	296,800	0	0	296,800
Partner National Societies	0			0
Other Partners (NGOs, UN, other)	0			0
Total TRANSFER TO PARTNERS	0	0	0	0
Programme and Services Support Recovery	169,279	0		169,279
Total INDIRECT COSTS	169,279	0	0	169,279
Pledge Earmarking & Reporting Fees	0			0
Total PLEDGE SPECIFIC COSTS	0	0	0	0
TOTAL BUDGET	2,773,566	0	0	2,773,566
Available Resources				
Multilateral Contributions	1,566,136			1,566,136
Bilateral Contributions				0
TOTAL AVAILABLE RESOURCES	1,566,136	0	0	1,566,136
NET EMERGENCY APPEAL NEEDS	1,207,430	0	0	1,207,430