

The background of the entire page is a photograph of a woman and a young child. The woman, on the right, is wearing a colorful, patterned headscarf and is looking down at the child. The child, on the left, is looking towards the camera with a serious expression. The image is partially obscured by a semi-transparent yellow and white text box at the bottom.

# ADDENDUM

UNFPA ETHIOPIA

PREPAREDNESS AND  
RESPONSE PLAN FOR THE  
TIGRAY CRISIS

2021

# BACKGROUND

On November 4th, 2020, clashes erupted between the military and regional forces in the Tigray region of northern Ethiopia. The federal government declared a state of emergency for six months, and a large-scale humanitarian crisis emerged with a surge of internally displaced persons and refugees, with overspilling of the conflict into neighbouring regions. Now, after more than five months since its start, the conflict in Tigray is still ongoing, making the humanitarian situation on the ground extremely dire and far from improving.

This document shares insights on the progress made by UNFPA in responding to the ongoing Tigray crisis and describes UNFPA's plans to address the urgent needs of the crisis-affected population, in Tigray, Amhara, and Afar regions throughout the remainder of 2021. UNFPA needs **12 million USD** in order to be able to reach the most vulnerable of the 2.3 million people targeted, including women, girls, adolescents, and the disabled, with life-saving sexual and reproductive health services and response to gender-based violence.

2020

2021



**25,432**

Number

Currently Pregnant Women Within the Conflict Zone\*

**101,982**

Number

Currently Pregnant Women Within the Conflict Zone\*



**112,200**

Number of Women, Girls, Boys and Men Targeted\*

**2,300,000**

Number of Women, Girls, Boys and Men Targeted\*



**5,611**

Number of Survivors of Sexual Violence are expected to seek clinical care

**22,500**

Number of Survivors of Sexual Violence are expected to seek clinical care



**20,970**

Number of Vulnerable women and Girls supported with Dignity Kits for GBV prevention

**50,000**

Number of Vulnerable women and Girls to be supported with additional Dignity Kits for GBV prevention



**5,021,192**

UNFPA previous needs for the 2020 Response Plan

**12,000,000**

UNFPA current needs for the 2021 Response Plan



\*IAWG, "Misp Calculator"

# UNFPA'S RESPONSE PROGRESS AT A GLANCE

Following the onset of the crisis, UNFPA Ethiopia developed a **Preparedness and Response Plan** for the Tigray Crisis in December 2020 according to which USD 5,021,192 was needed to reach a targeted 112,200 women, girls, boys, and men over a 6-months period. The lack of access into the Tigray region for the first four-month of the crisis, created many challenges in the response, including constrained implementation of humanitarian interventions. Despite the blanket access authorized by the government of Ethiopia on the 3rd of March 2021, security issues continue to hamper full access, however with increased numbers of humanitarian actors in the region and intermittent travel to underserved locations in Tigray, the scope of the humanitarian needs on the ground has significantly increased. It is now necessary for UNFPA to take stock and reassess the Preparedness and Response Plan, taking into account the current situation and potential for a protracted emergency.

To date, UNFPA has managed to mobilize 4,111,795 USD for its response to the Tigray crisis. While challenged by access to the region, UNFPA has been supporting the response by leading the Gender-Based Violence Area of Responsibility (GBV AoR) under the Protection Cluster, coordinating activities related to protection for relevant partners, ensuring distribution of dignity kits to vulnerable women and girls through partners on the ground and distribution of reproductive health kits, COVID-19 infection prevention equipment and needed medical supplies to impacted health care facilities and IDP sites. An estimated **379,014 people in need** have been reached with medical supplies and commodities through the UNFPA-led response.

## STATUS

## UNFPA'S RESPONSE PROGRESS DECEMBER 2020 - APRIL 2021

### Human Resources

- Humanitarian Coordinator
- GBV Specialist
- SRH Specialist
- Logistics Specialist
- Data analyst
- 20 midwives (\*including 3 Regional Coordinators)



### Supplies and Commodities

- Emergency Reproductive Health Kits 205 Kits benefiting 303,604 people  
468 Kits in the pipeline
- Dignity Kits 20,970 Kits distributed, more kits in pipeline
- Personal Protective Equipment (COVID 19) 40,802 items procured and distributed

### Capacity Building

- Training 300 health workers in MISP, CMR and GBVie 52 trained in MISP, 9 trained in CMR  
68 trained on PSEA  
20 midwives received SRH/GBV orientation  
35 journalists on GBV reporting guidelines

## Service Delivery

- Support mobile community outreach
- SRH, GBV Awareness Raising
- Regional SRH / GBV coordination
- GBV Referral Pathways for 3 regions (Tigray, Afar and Amhara)
- Prevention Response programs (WGSS)
- Mental Health, Psychosocial Support and Psychological First Aid
- GBV Community Outreach

**RH Kits provided to SRH partners operating medical mobile teams**

**Pending Implementation**

Completed with deployment of national surge staff, GBV AoR coordinator in Addis Ababa and incoming GBV AoR for Mekele; SRH coordination pending

Ongoing and adapting to the changing situation on the ground

**Pending construction**

Orientation given to frontline staff at 5 one stop centres

**Pending Implementation**

In addition to the activities that were included in the initial Tigray plan, UNFPA worked to expand partnerships with strategic organizations while ensuring staff on the ground to promptly respond to the rapidly evolving needs of the population affected by the crisis. Below is a **snapshot of additional interventions** that UNFPA executed beyond the UNFPA Preparedness and Response Plan in the spirit of adapting to the volatile situation in Tigray and the evolving needs of the most affected populations.

## ADDITIONAL INTERVENTIONS

1. **Communications Specialist** (Surge)
2. **Regional consultants** – National surge x 3 (Amhara, Afar, and Tigray)
3. **8 Women and Girls' Safe Spaces (WGSS) in IDP sites in Mekele and Shire**, including all staff (case managers, midwives, social workers, MHPSS facilitator, etc.), trauma counseling, and livelihood's training (response 6 months, pending implementation)
4. **Programming for RH teams offering family planning, post-abortion care, safe abortion, and first-line gender-based violence (GBV) care and referral for 12 months** (2 more teams needed) (6 months response, 6 months recovery = 12 months, pending implementation)
5. **Capacity building for clinical management of rape, basic emergency obstetric and neonatal care, GBV, post-abortion care, minimum initial service package (MISP) for SRHiE, and psychosocial first aid (on-going).**



# SITUATION OVERVIEW

According to the 2021 [Humanitarian Needs Overview](#) issued on March 5, from the 4.5 million people currently estimated to be in need in Northern Ethiopia, 3.5 million are in accessible and partially accessible areas. The number of displaced people due to this conflict continues to increase. To date [IOM](#) has tracked 1,000,052 IDPs in Tigray, 45,343 IDPs in Afar and 19,998 IDPs in Amhara. The southern zone in Tigray and large areas of North-Western, Central, and Eastern in the region remain inaccessible to humanitarian actors.



1,065,393

Internally displaced  
people (IDP)



TIGRAY  
AMHARA  
AFAR

**Access to life-saving health services by the affected populations remains a serious concern.** Ongoing assessments indicate that [141 of the 198 assessed hospitals](#) and health centers were either partially or fully damaged. **Maternal health services have been drastically disrupted** with only [17% of health facilities providing antenatal care](#) and delivery care. It is estimated that about **101,982 women are currently pregnant and 5,099 will experience complications** if no access to emergency obstetric care is made available in the next three months. Women and girls are also in dire need of basic items such as hygiene products, including sanitary pads and dignity kits, which will allow them to access humanitarian assistance through distribution sites.

Of extreme concern are reports about an alarming increasing prevalence of gender-based violence during the conflict, in flight, and in places of displacement. Since many areas in Tigray remain inaccessible, it is difficult for survivors to receive urgent and life-saving medical care, gender-based violence case management, or mental health and psychosocial support. Although gender-based violence is largely underreported, at least **22,500 survivors of sexual violence are estimated to seek clinical management of rape services** while only [1 % of health facilities](#) currently have the capacity to provide comprehensive services in the Tigray region. Despite the concerted effort to get kits into the hands of those who need them most, requests for needed medical equipment and medications continue to be lodged, and the needs of basic hygiene items currently outgrow the available UNFPA's supply. All of this amid a steady wave of COVID-19 confirmed cases in the country. In Tigray, there is not currently any surveillance of COVID-19 cases or testing and quarantine capacity.



17%

Health facilities  
providing ANTE-  
NATAL CARE (ANC)



5,099

pregnant women  
expected to  
experience  
complications

# RESPONSE STRATEGY **REVISED PRIORITIES**

Going forward, UNFPA's response to the Tigray crisis will focus on implementing the priority interventions described in this addendum. **These activities are tailored to ensure the continuation of sexual and reproductive health and gender-based violence services, including mental health and psychosocial support (MHPSS), and prevention of sexual exploitation and abuse (PSEA) to restore pre-crisis capacity through government health facilities and to support the urgent humanitarian response on the ground.** These priority interventions are aligned with UNFPA and partner's response capacity and access to the affected population. UNFPA will be establishing effective response mechanisms with the aim to address the immediate needs of the crisis-affected population with underpinning a longer-term, sustainable strategy, involving the development sector and with a focus on a peaceful resolution to the conflict in the north, as to operationalize the humanitarian-development and peace nexus.

Currently, UNFPA repurposed development funds to support the humanitarian efforts and development teams in the Country Office as well as in the regions have been working in tandem with the humanitarian in the Tigray region to ensure leveraging and coordination of partnerships and initiatives within the broader UNFPA's program. UNFPA co-led the Early Recovery Planning exercise for Tigray in the 'restoration of social services' through the Ministry of Finance and alongside UN partners, INGOs, and donors, and is well placed to position programming within the humanitarian-developmental-peacebuilding continuum and the principle of "building back better" within the Decade of Action.

UNFPA currently has a humanitarian response presence in Addis Ababa, Tigray, Amhara and Afar regional offices who can oversee immediate priority activities, incorporating government ministries, local implementing partners on the ground, and multiple SRH and GBV partners who receive UNFPA's procured life-saving medical supplies and dignity kits to ensure increased coverage of last mile distribution. In order for quality implementation, oversight and technical support, UNFPA needs continued support for skilled human resources to be based out of Tigray (ideally in Mekelle and Shire).

## **Priority GBV Interventions:**

- Establish (8) Women and Girls' Safe Spaces to provide comprehensive GBV services in Mekele and Shire, in Tigray region.
- Establish (4) One-Stop Centers (OSC) linked to Women and Girls' Safe Spaces in Tigray region.
- Procure and distribute additional dignity kits and essential items to vulnerable women and girls
- Support GBV/SRH coordination at national and regional level
- Support the establishment of additional Safe House(s)<sup>7</sup> for comprehensive care and protection to GBV survivors.

## **Priority SRH Interventions:**

- Provision of additional reproductive health (RH) kits to respond to the urgent needs of nearly 1,160,000 internally displaced people and refugees in the conflict-affected regions.
- Provision of COVID-19 infection prevention supplies and personal protective equipment (PPE) to health facilities in the crisis areas of Tigray, Afar, and Amhara.

- Support the establishment of Maternity Waiting Rooms in Shire town, Tigray region.
- Additional deployment of 40 midwives and 40 social workers for service provision at hospitals and IDP camps.
- Support mobile community outreach activities and community sensitization about available SRH services and rights.

### Priority MHPSS Interventions:

- Community-level psychosocial support through training of the trainer for health professionals and implemented by community health workers at IDP sites in Tigray region.
- Support to survivors through psychological first aid, counseling, and reintegration.

### Priority PSEA Interventions:

- Continue to co-lead the PSEA networks in Addis Ababa and Mekelle.
- Provide awareness-raising and sensitization sessions on PSEA, with a focus on humanitarian workers.

### Linking Humanitarian Response - Early Recovery Interventions:

- Livelihood training to link humanitarian response effort with early recovery planning to the affected population (for example: masks, sanitary pads).
- Continued support to resilience-building and life-skills' training to GBV survivors at UNFPA's supported Safe Houses in Tigray region.
- Humanitarian support to government and national non-governmental agencies for sustainable, long term development of Tigray region

REVISED

# BUDGET SUMMARY

APRIL 2021 - DECEMBER 2021

## Supplies and Commodities

## Budget in USD

• Dignity kits to women and girls (at least 50,000)	1,050,000
• Reproductive Health kits for health facilities and mobile health - nutrition teams (including transportation)	598,169
*based on the current registered number of refugees and IDPs in Tigray (1,160,000)	*200,000
• Personal Protective Equipment (COVID-19) to health care workers	200,000
• Additional sheets, blankets and soap	135,000

(\*buffer for additional, anticipated IDPs)

## Service Delivery

• Programming for sexual and reproductive health through mobile clinics in IDP camps (response)	200,000
---	---------

- 8 Women and Girls Safe Spaces (WGSS) in IDP sites in Mekele and Shire 1,046,241  
 \*including all staff (case managers, midwives, social workers, MHPSS facilitator, etc.), trauma counseling, and life skills for 6 months (recovery 7-12 months)
- 4 One Stop Centers, linked to community WGSS 1,473,667  
 \*including all staff and medical supplies for 12 months
- Support to an additional safe house in the Eastern / Central zone x 6 months (response) 300,540
- Support to additional maternity waiting homes in the North Western zone 384,819
- Additional deployment of 40 midwives and 40 social workers for 12 months 576,000  
 \*including in Shire referral hospital and in IDP camps
- Community engagement / outreach for MHPSS and psychosocial support (6 months) 280,000

### Capacity Building

- Livelihood training to link with response activities (masks, sanitary pads) – 6 months response, 6 months recovery 200,000

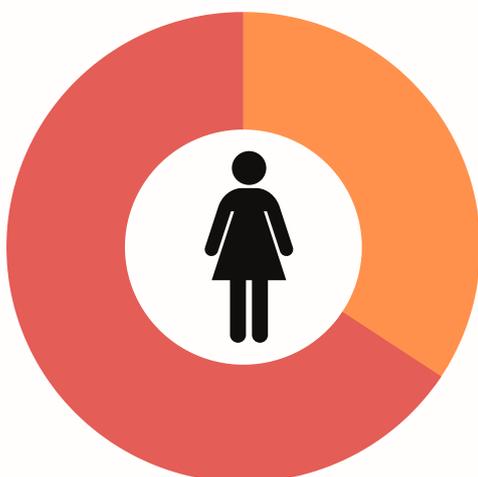
### Human Resources

- Additional 3-6 month deployment of Surge Staff 1,243,769  
 Humanitarian coordinator, SRHIE specialist, GBVIE specialist, GBV AoR – subnational, MHPSS specialist, Logistician, Communications, Data Analyst, Regional surge (national)

**TOTAL 7,888,205 USD**

## FUNDING NEEDS

\*APRIL 2021



**Funding gap**  
65.7%  
7,888,205 USD

**Funding received**  
34.3%  
4,111,795 USD

**UNFPA ETHIOPIA'S PREPAREDNESS AND RESPONSE PLAN**

**12,000,000 USD**  
**GRAND TOTAL**



Ensuring rights and choices since 1969

