



UNFPA ETHIOPIA RESPONSE TO THE NORTHERN ETHIOPIA CRISIS
Situation Report
16 to 30 November 2021

Background

On November 4, 2020, conflict broke out in Tigray region, Northern Ethiopia, between the Tigray People's Liberation Front (TPLF) and the Ethiopian National Defence Forces (ENDF). One year later, the humanitarian situation remains extremely dire and continues to deteriorate, with severe impact on civilians leading to mass displacement and limiting the delivery of humanitarian assistance to those in need. The political dynamics across the region changed drastically on June 28 following the unilateral declaration of ceasefire by the Federal Government and the subsequent withdrawal of the ENDF from and the takeover of the Tigray region by the TPLF. Since



Source: UNFPA Ethiopia

July, the conflict spiraled into the neighboring regions of Afar and Amhara causing a large-scale upsurge in displacement and aggravating the humanitarian situation with nearly [7 million people in need](#) across the three regions (**5.2 million¹ in Tigray and the rest in Amhara and Afar regions**). Approximately 3 million people are estimated to be displaced as a result of the conflict across Northern Ethiopia: 2.1 million people in Tigray, 789,035 in Amhara (North Gondar, Central Gondar, South Wollo, South Gondar, and Awi zones), and 323,000 in Afar (zones 2 and 4), according to recent assessments by regional authorities. In October alone, 60,657 people were displaced in Afar and 354,790 in Amhara regions as a result of the conflict, according to [IOM Displacement Tracking Matrix](#).

On November 2, 2021, the Ethiopian Government declared a state of emergency for six months across the country, following the expansion of hostilities across the Amhara region and TPLF's declaration of intentions to reach the capital, Addis Ababa. The tension among all parties is escalating on different fronts, with active fighting - including airstrikes reported in Tigray's capital, Mekelle - expanding across Afar and Amhara regions. Humanitarian operations have been significantly reduced or even suspended due to the lack of fuel, cash and supplies. The ongoing hostilities have caused significant damages to civilian infrastructure and public services across the three regions, depriving a large segment of the population healthcare services. Access remains challenging for many humanitarian partners to reach people with life-saving assistance in many parts of Northern Ethiopia.

¹ Ethiopia - Tigray Region Humanitarian Updated Situation Report (October 14, 2021):

<https://reliefweb.int/report/ethiopia/ethiopia-northern-ethiopia-humanitarian-update-situation-report-14-oct-2021>

Situation Overview



7,062,000 total
population in Tigray²



5,200,000 people in need in
Tigray³



5,200,000 million
targeted

The overall humanitarian situation in Northern Ethiopia remains dire with humanitarian operations severely constrained due to insecurity and administrative impediments, including grave shortages of humanitarian supplies, hindering the delivery of life-saving aid to **more than 5.2 million people in need across Tigray**. In addition to the 2.1 million people displaced within Tigray, displacements across Afar and Amhara regions continue to increase rapidly as a result of the conflict. According to the Amhara Regional Disaster Prevention, Preparedness, and Food Security Coordinator office (DPFSPCO), **the number of internally displaced persons in the region reached 2,083,276, with nearly 1,165,274 (55.9%) of whom were recently displaced across 10 zones** as a result of the spill-over of the conflict from Tigray region. As of November 18, the largest number of recently displaced people in Amhara region is found in South Wello (280,445), North Shewa (219,055), Wolkait-Tegedie (190,739), and North Wello (167,000). More than 90% of the IDPs are living with the host community and a significant number have been facing repeated displacements - up to 5 times – arising among others in critical needs, as reported by DPFSPCO. In Afar, regional authorities estimate that **over 334,264 individuals have been displaced from 14 districts in the region, with 194,252 newly IDPs from August to November, 2021**.

Healthcare services across conflict-affected areas in Northern Ethiopia are alarmingly limited, leaving hundreds of thousands of people, including internally displaced people, children, pregnant and lactating women, and survivors of sexual violence without adequate access to life-saving medicines and basic health care. According to an assessment by the Tigray Regional Health Bureau, from 200 health facilities in July 2021⁴, **65% of hospitals and 87% of health centers have been looted, damaged, and vandalized**. According to OCHA, **80% of the essential medication is no longer available** while 3.8 million people are estimated to be in need of access to health care. In Afar, as reported by the DPFSPCO, **49 health facilities have been partially or totally destroyed** hampering access to basic healthcare services in conflict-affected areas bordering with Tigray region. In Amhara, OCHA reports more than **500 health facilities⁵ across the region have been damaged** due to ongoing hostilities, worsening the already fragile health system and hampering access to critical health care.

² Tigray in Ethiopia: https://joshuaproject.net/people_groups/15481/ET

³ Ethiopia - Tigray Region Humanitarian Update Situation Report (June 3, 2021): <https://reliefweb.int/report/ethiopia/ethiopia-tigray-region-humanitarian-update-situation-report-3-june-2021>

⁴ Tigray Regional Health Bureau - Service Availability Report (July, 2021), Internal Document.

⁵ Ethiopia - Tigray Region Humanitarian Update Situation Report (November 25, 2021): <https://reliefweb.int/sites/reliefweb.int/files/resources/Situation%20Report%20-%20Ethiopia%20-%20Northern%20Ethiopia%20Humanitarian%20Update%20-%202025%20Nov%202021.pdf>

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Armed conflict, natural disasters, and humanitarian emergencies can significantly weaken a society's ability to protect women and girls from gender-based violence, exploitation, and abuse. Protection systems that address gender-based violence are still limited across the region due to ongoing hostilities, insecurity, and administrative constraints on medical supplies and cash. In Tigray, **protection services are limited to Mekelle and Shire due to the lack of, fuel, cash and supplies**⁶. Despite the operational challenges, the [GBV AoR Dashboard for Tigray](#) reports that from 536,000 people targeted for GBV prevention and response activities, 436,000 individuals have been reached with at least one type of activity by 33 implementing partners across 53 woredas across the region. In Amhara and Afar regions, the mapping of information on GBV prevention and response activities is still ongoing across areas bordering with Tigray. The current challenges and operational constraints to deliver protection services across Northern Ethiopia place conflict-affected populations at greater risk of life-threatening physical, psychological, and health consequences.

Since the onset of the conflict, UNFPA has been committed to upholding women's and girl's choices and rights among the current and emerging protection and health-related humanitarian needs across Northern Ethiopia. UNFPA's Preparedness and Response Plan for the Northern Ethiopia crisis focuses on preventing and responding to gender-based violence and bridging protection, gender equality, and MHPSS, while building back capacity on sexual and reproductive health and rights in the conflict-affected regions. UNFPA has a presence in Mekelle and Shire (Tigray Region), Semera (Afar Region) and Bahir Dar (Amhara Region) with International and National Surge Capacity Specialists supporting the Northern Ethiopia Response.

UNFPA'S RESPONSE

Sexual and reproductive health and rights (SRHR)

Of the people in need⁷:



1,300,000
are women
of
reproductive
age



117,846
are
currently
pregnant
women



13,094
expected
births
per
month



624,000
are
adolescent
girls
(10-19)

Tigray Region

- **3,765 internally displaced persons** supported with SRH community awareness raising sessions by the **Mobile Health Units** deployed in partnership with **Marie Stopes International (MSI)** in Mekelle and Adigrat, Tigray. In addition, **Mobile Health Teams** reached **629 individuals with family planning methods**, **30 women with maternal health care services** and **71 persons with STI/HIV screening and treatment** in Tigray.

⁶ Ethiopia - Tigray Region Humanitarian Update Situation Report (November 4, 2021): <https://reliefweb.int/sites/reliefweb.int/files/resources/Situation%20Report%20-%20Ethiopia%20-%20Northern%20Ethiopia%20Humanitarian%20Update%20-%204%20Nov%202021.pdf>

⁷ Based on Minimum Essential Service Package (MISP) calculator: <https://iawg.net/resources/misp-calculator>

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- **Reached 2,383 individuals** - 1,292 women & girls and 526 men and boys - **with SRH awareness sessions and 76 individuals with family planning services** in partnership with **Food for the Hungry International (FHI)** across 6 IDP sites in Mekelle and Shire, Tigray.
- **Distributed 45 IARH Kits to Marie Stopes International and components of Kit 8 and 9 to Hamlin Fistula Center (Mekelle)** to support the provision of sexual and reproductive health services across IDP sites and health facilities in Tigray region.
- **958 individuals reached with SRH mass education** - individual and group counseling - in partnership with OSSHD in 3 IDP sites of Mekelle and 2 temporary shelters of Shire, Tigray.
- **Screened 1,611 pregnant and lactating women for acute malnutrition and provided midwifery services to 1,671 people** in partnership with Ethiopian Midwives Association (EMwA) across 12 health facilities in Tigray.
- **185 people supported with reproductive health services** - including antenatal care, STI/HIV screening, and clinical management of rape (CMR), among others - **and 359 individuals with SRH awareness raising sessions in partnership with Maedot** at the Maternity Waiting Home of Sabacare 4 IDP site in Mekelle, Tigray.

Amhara Region

- **In partnership with Marie Stopes International, 17 health personnel drawn** from government-led health facilities and MSIE Mobile Health Clinics operating at Debark and Ebinat woredas, Amhara region. **were trained on the Minimum Initial Service Package (MISP)**
- **Recruited 6 health workers - 3 midwives and 3 clinical nurses** - to provide maternal and reproductive health services through Mobile Health Units run by Marie Stopes International (MSI) at 3 IDP sites in Debre Berhan, Amhara.
- **181 internally displaced persons reached with clinical care** – for malaria, pneumonia, dysentery, diarrhea and infections - **and midwifery services** - antenatal care, postnatal care, family planning – by **MSI Mobile Units** at Debark and Ebinat woredas, Amhara
- **3,821 people reached through house-to-house visits on SRH and Covid 19 prevention measures** in partnership with the Amhara branch of Ethiopian Red Cross Society (ERCS) at Wolkayt, Dabat and Debark woredas in Amhara region.

Afar Region

- **5,149 people reached - 1,873 women, 1,578 girls, 920 men and 778 boys - with critical information on SRH/GBV service availability** through community group discussions and house-to-house awareness raising visits by 27 ERCS - community volunteers deployed at IDP sites in Chifra, Teru-Digdiga and Aba'ala districts in Afar region.

AT A GLANCE

MIDWIFERY SERVICE PROVISION

(*Cumulative numbers per reporting period and since March 2021)

REGION	PARTNER	SERVICE PROVIDED	From 16-30 Nov	Grand Total (Since Mar, 2021)
AFAR	ERCS	# deliveries attended to by skilled provider	*	339
		# outpatients for post-natal care (PNC) within 42 hr.	*	353
		# outpatients for antenatal care consultations (ANC)	*	827

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AMHARA	ERCS	# outpatient visits for family planning (male and female)	*	602
		# visits for STI/HIV counseling, screening, testing or other treatment	*	859
		# referrals for a higher level of obstetric care/emergency (mother/newborn)	*	11
		# clinical management of rape visits completed within 72 hr. of assault	*	3
		# of ANC outpatients visits, including PMTCT	*	727
		Total Afar	*	3,721
		# deliveries attended to by skilled provider	*	256
		# outpatients for post-natal care (PNC) within 42 hr.	*	297
		# outpatients for antenatal care consultations (ANC)	*	1,511
		# outpatient visits for family planning (male and female)	*	1,302
		# visits for STI/HIV counseling, screening, testing or other treatment	*	1,340
		# of referrals for a higher level of obstetric care/emergency (mother/newborn)	*	82
		# of clinical management of rape visits completed within 72 hours of assaults	*	12
		# of ANC outpatients visits, including PMTCT	*	440
TIGRAY	ERCS	Total Amhara	*	5,240
		# deliveries attended to by skilled provider	*	1,690
		# outpatients for post-natal care (PNC) within 42 hr.	*	1,615
		# outpatients for antenatal care consultations (ANC)	*	6,813
		# outpatient visits for family planning (male and female)	*	5,872
		# visits for STI/HIV counseling, screening, testing or other treatment	*	6,422
		# referrals for a higher level of obstetric care/emergency (mother/newborn)	*	228
		# clinical management of rape visits completed within 72 hr. of assault	*	103
		# of ANC outpatients visits, including PMTCT	*	1,028
		# of ANC outpatients visits, including PMTCT	18	18
	MSI	# clinical management of rape visits completed within 72 hr. of assault	*	40
		# deliveries attended to by skilled provider	*	2
		# outpatient visits for family planning (male and female)	509	3,047
		# visits for STI/HIV counseling, screening, testing or other treatment	48	430
		# referrals for a higher level of obstetric care/emergency (mother/newborn)	4	4
		# clinical management of rape visits completed within 72 hr. of assault	*	40
		# of ANC outpatient visits, including PMTCT	*	24
	SAVE THE CHILDREN	# referrals for a higher level of obstetric care/emergency (mother/newborn)	*	20
		# of clinical management of rape visits completed within 72 hours of assault	*	15
		# deliveries attended to by skilled provider	*	62
		# outpatients for post-natal care (PNC) within 42 hr.	*	357

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UNHCR	# outpatients for antenatal care consultations (ANC)	*	2,935
	# outpatient visits for family planning (male and female)	*	3,093
	# referrals for higher level of obstetric care/emergency (mother/newborn)	*	39
	# visits for STI/HIV counseling, screening, testing or other treatment	*	180
	# deliveries attended by skilled provider	*	60
	# outpatient visits for PNC (within 72 hours)	*	84
	# outpatients for antenatal care consultations (ANC)	*	304
	# outpatient visits for family planning (male and female)	*	369
	# visits for STI/HIV counseling, screening, testing or other treatment	*	10
	# referrals for higher level of obstetric care/emergency (mother/newborn)	*	7
MAEDOT	# outpatients for antenatal care consultations (ANC)	81	94
	# outpatients for post-natal care (PNC) within 42 hr.	3	3
	# outpatient visits for family planning (male and female)	63	67
	# visits for STI/HIV counseling, screening, testing or other treatment	5	21
	# of ANC outpatient visits, including PMTCT	327	327
EMWA	# deliveries attended by skilled provider	103	103
	# outpatients for post-natal care (PNC) within 42 hr.	99	99
	# outpatient visits for family planning (male and female)	267	267
	# visits for STI/HIV counseling, screening, testing or other treatment	11	11
Total Tigray		1,538	35,903
GRAND TOTAL		1,538	44,864

**Note: Due to a persistent communication blackout within Tigray, the reporting of midwifery services is inconsistent and challenging over time.*

Sexual and Gender-based Violence (GBV)

Tigray Region

- **6,541 individuals reached with GBV prevention and risk mitigation awareness raising sessions and sensitization activities**, including referral linkage to health care services in 6 Women Community Centers and 2 Women and Girls' Friendly Spaces (Mekele) and Shire IDP camps in partnership with OSSHD (1,630) and Food for the Hungry International (4,911).
- **20 professionals trained on Protection from Sexual Exploitation and Abuse (PSEA)** and available/accessible community-based complaint mechanisms by Food for the Hungry International in Shire, Tigray.
- **Conducted a GBV Safety Audit** on 2 IDP sites with the partnership of Food for the Hungry International and jointly with other humanitarian agencies in Shire, Tigray.
- **Reached 625 individuals** with different sensitization events **within the 16 Days of Activism campaign** in partnership with Food for the Hungry International across IDP sites in Shire, Tigray.

Amhara Region

- **606 internally displaced persons and host communities reached with GBV prevention and mitigation messages**, including GBV referral services through community-based dialogues in partnership with **Amhara Women Association (AWA)** in Debark and Dabat woredas (North Gondar zone) and West Armacho woreda (West Gondar zone).
- **22 health professionals trained on Clinical Management of Rape (CMR) and GBV Case Management in partnership with Ethiopian Midwives Association (EMwA)** to provide GBV services at selected health facilities and hospitals in Chagni, Dabat, Debark, Metema and West Armacho woredas, Amhara.
- **3,821 individuals reached through door-to-door awareness raising sessions on GBV prevention and risk mitigation measures** at schools and marketplaces in partnership with Ethiopian Red Cross Society (ERCS) at Wolkait, Debark and Dabat towns, Amhara region.



UNFPA and OSSHD's social workers and PFA's counsellors participating in the kickoff event of the '16 Days of Activism' campaign against gender-based violence at the Women and Girls' Friendly Space (WGFS) in Mekelle, Tigray. Photo by OSSHD and UNFPA Ethiopia.

Afar Region

- **5,218 individuals reached** with key messages on GBV service promotion and risk mitigation measures in temporary shelters and host communities by the ERCS's facilitators in Teru and Chifra woredas, Afar.

Mental Health and Psychosocial Support (MHPSS)

Tigray Region

- **Supported 733 children and 292 adults with Psychological First Aid (PFA) individual counseling sessions** across 2 IDP sites in Shire and 3 temporary shelters in Mekelle through trained PFA providers from OSSHD and trained community-based counselors from Tigray Regional Health Bureau. Airstrikes in Mekelle have interrupted services over time.
- **15 women and girls provided with one-to-one psychological support services (PSS)** and referral to psychiatric services by the health personnel of Maedot at 2 IDP sites in Mekelle, provided during the reporting period in Tigray.

Amhara Region

- **223 women and girls provided with psychological support services (PSS) through group counseling (184) and individual sessions (39)** - by the social workers of Ethiopian Midwives Association (EMwA) in Debark and Dabat woredas, North Gondar zone, Amhara.

Logistics and Operations



45 Sexual and Reproductive Health Kits were dispatched to MSI in Tigray region

- **Conducted an internal technical review - led by UNFPA Head of the Response and Technical Support Unit** - to standardize protocols, indicators and procedures across the whole Northern Ethiopia Response.
- **Onboarded a new UNFPA Programme Associate** to provide support on Finance, HR and Administration to the Northern Ethiopia Response.

Coordination and Partnerships

UNFPA has:

- Follow up the recruitment and contractual transition process of international technical staff for the scale up of UNFPA operations in Northern Ethiopia.
- Coordinated the striking of new partnerships – with World Vision, CARE and Medical Teams International (MTI) - and oversaw the general performance of current Implementing Partners amid the current operational challenges in Tigray.
- Supervised the resource-mobilization strategy for Northern Ethiopia Response, including the completion of two new grant proposals for scaling up the humanitarian response across regions.

GBV AoR Coordination

UNFPA as the lead agency for GBV AoR coordination:

- Followed up on all the preparations for the two-day GBV AoR Retreat aiming at improving GBV programming and implementation for 2022 with relevant humanitarian and development partners at regional and national levels.

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- Updated the [GBV AoR 5Ws Matrix Dashboard](#) capturing GBV partner presence, performance and service provision according to the Humanitarian Response Plan from January to October 2021 for Tigray region.

Communications

- ✱ Developed and published [a human-interest story on the refugee crisis](#) showcasing the situation of pregnant women in Gambella region, Ethiopia.
- ✱ Designed and published the [Humanitarian Response Plan for Ethiopia 2021-2021](#) (beyond Northern Ethiopia).
- ✱ Supported the [kickoff event on the '16 Days of Activism Campaign'](#) against gender-based violence and follow up on the agenda at national and regional level with relevant partners and UN agencies.

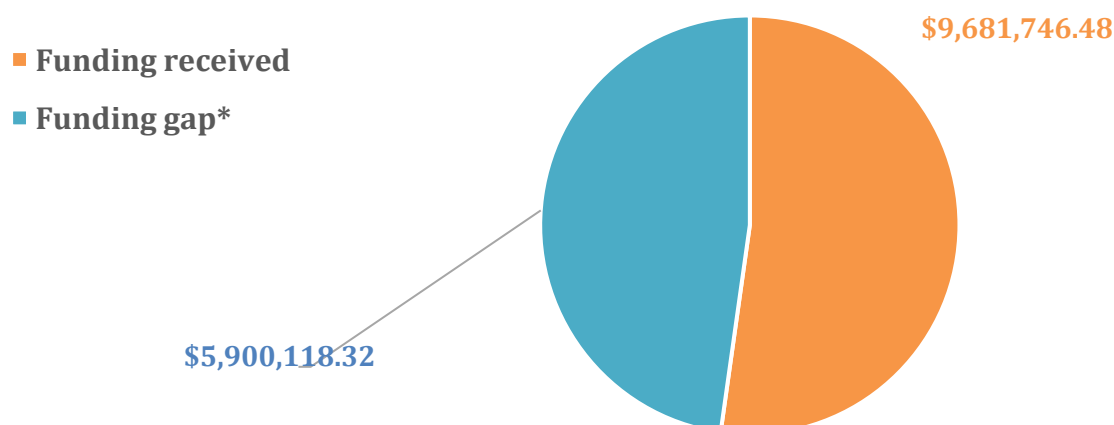
UNFPA'S RESPONSE

Resource Mobilization

Special thanks to the major donors supporting @UNFPAEthiopia Response to the Northern Ethiopia Crisis:

CERF 2020 - 1,500,539 USD | **Emergency Fund** - 1,343,032 USD | **Danish MFA** - 1,600,000 USD
CERF 2021 - 2,500,003 USD | **USAID** - 1,637,527.00 USD | **Ethiopia Humanitarian Fund (EHF)** - 449,633.27 USD | **CERF (Amhara & Afar)** - 397,012 USD | **Iceland** - 250,000 USD
Sweden - 197,000 USD | **Friends of UNFPA** - 4,000 USD

Funding required: 15,581,865 USD





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every childbirth is safe and every young person's
potential is fulfilled



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