

SNNPR

Joint Multi – Sector Rapid Assessment

1/4/2021

Government, NGOs & UN Agencies

Assessment Lead- DRMC/OCHA

***Need, Response & Gaps Rapid Assessment
In
Conflict – Induced Emergency Affected Woredas
(Amaro & Derashe Special Woredas)
Of
SNNPR***

Joint Multispectral Rapid Emergency Need Assessment Derashe & Amaro Special Woredas

(14 – 26 Dec 2020)

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1. Background Information

SNNPR, like any other are of the country, has been experiencing multiple manmade and natural disasters over the past few years. These disasters, as experiences showed us, affected / put at risk considerable number of people for various intervals and durations of time. These disasters / hazards that have been in play over the years in the region includes drought, conflict, flood, landslide and disease outbreaks such as cholera and the most recent one COVID_19.

Derashe & Amaro woredas, as part and parcel of region, have been facing similar problems over the past few years. The woredas, to hint readers, are located in Southern Nations, Nationalities and Peoples (SNNP) regional state of Ethiopia. The woredas are found in the Southern part of the region 525 km & 474 kilometers far from Addis Ababa, the capital city of Ethiopia and 335 km & 202 kilometers from Hawassa city, the capital of the SNNPR respectively. The Derashe woreda has 19 Kebeles and one town administration & in the same way, the Amaro woreda has 31 rural kebeles and 4 municipalities. Derashe woreda is bordered on the south by the Konso zone and Alle special woreda, on the west Alle Special woreda, on the north by Gamo zone, on the east by Amaro special woreda, and Burji Special woreda. Likewise, the Amaro woreda has bordered on the south by Burji woreda, on the west by Konso and Derashe woredas, on the North West by Gamo zone and Lake Chamo, and on the east and north east by the Oromia region. Gidole & Kelle are the main woreda towns for Derashe & Amaro woreda respectively.

The total population of the woredas are 244,703 (Male- 131163, Female-113,543) for Derashe & 230,676(Male- 121814, Female- 108,833) for Amaro woreda. From the total kebeles available at Derashe about 8 (eight) kebeles are Kola in its weather condition & about 12 Kebeles are Weyina-Dega. Similarly, from the available 35(thirty-five) kebeles in Amaro about 16(sixteen) kebeles are Kola & about 19(nineteen) kebeles are Dega in their weather condition.

The security situation in Derashe and Amaro special woredas had not been stable since Konso was granted zonal administration. The two special woredas (Derashe and Amaro) have also been claiming the same zonal status, like that of Konso. Likewise, there was a question of self-

administration by some kebeles in Segen area which was not accepted by the regional government and became the source of conflict between kebeles of Segen areas with the neighboring kebeles of Amaro and resulted in displacement of many peoples and damage of properties.

The other conflict between the two kebeles of Gato town which are currently under Derashe special woreda also resulted in the damage of many houses and properties and also caused the displacement of many people. The issue here was the question to become town admin by Gato 01 residents and allegedly to be part of Konso zone and a claim for woreda status by Gato 02, though they wanted to remain part of Derashe special woreda. The disagreement happened has become the source of conflict in the members one clan called “Kusumie” who are living in two kebeles of Gato town.

The recent conflict was erupted in the third week of July and further worsened in the 3rd week of November 2020 which actually has claimed death of lives and resulted in displacement of many people from kebeles of Alle and Derashe special woredas. Around 30, 561 people were displaced in Derashe (18,004) and Amaro (12, 557) special woredas in the recent conflict happened at the beginning of November 2020. To address the needs of IDPs, the government delivered food support to the affected community and some NFIs were also distributed. However, given the complexity of the situation and the magnitude of the effect, the support delivered so far doesn't satisfy the immediate needs of the affected people.

Under the leadership and overall coordination of the regional DRMC, a multi-agency assessment team was established to conduct joint assessment in the affected areas so as to better understand the situation on the ground, identify the gaps and to recommend possible interventions and support to be delivered to the affected IDPs. Hence, The Derashe-Amaro team conducted the assessment from Dec 14-26, 2020 and team members were from: UNICEF/Water Bureau, IOM, Plan International, WVI, SCI. Regional DRMC and UNOCHA also involved in the overall coordination and support of the implementation of the joint assessment.

2. Objective of the Rapid assessment

2.1. General Objective

The main purpose of this rapid assessment is to analyze and understand the overall situations of IDPs of Derashe and Amaro special woredas and to get a better understanding of the level of humanitarian needs, gaps and responses.

2.2. Specific objectives

The assessment, as a joint and multi-sector one, has anticipated to meet multiple objectives. It, more specifically, has intended to: -

- Provide supplementary information for rapid emergency response that clarifies, amplifies, and complements existing sources.
- Reduce the burden of conducting multiple situation assessments on the disaster-affected communities.

- Enhance coordination efforts and experience sharing between humanitarian response actors.
- Provide a comprehensive picture of the disaster situation in order to advocate to appropriate donor, government, community, and agency response.
- Make appropriate recommendations for actions to be taken.

3. Assessment Methodology

Both Qualitative and Quantitative approaches have used in conducting the joint assessment. Quantitative data have gathered through key informant interviews (KII) held with concerned government officials of the sectors, questioners and reviewing secondary data provided / presented by relevant sectors.

Furthermore, the team have gathered qualitative data through focus group discussions with IDPs at different sites of the special woredas. On top of this, the team managed to gather qualitative data through observation while paying a visit to the IDP sites in both Woredas.

4. Assessment Findings

The team, as per the conducted assessment, managed to find multiple issues that adhere towards food, Education, WASH, Health / Nutrition, Shelter & Protection. The team, among others, have found the following most notable issues in the affected and assessment areas: -

Food

- √ The IDPs have lost their houses, livestock, cultivated annual & perennial crops and many other belongings.
- √ Using several coping strategies including depending on relatives & the host community for food, the IDPs survived since the onset of the conflict. Very recently, a single round distribution of food for nearly 26,000 people has conducted by the government. Even though there are some 5000 people who have not reached, starting the distribution program has considered as a positive measure by the IDPs
- √ Actors who are working in the sector have advised to feel the existing gaps for the coming six months through stockpiling, transporting and distributing food items in timely manner. Further, all stakeholders have recommended to pay an attention to cash transfer activity as integral part of their future deeds in the affected woredas.

WASH

- √ The woredas water supply coverage, in comparison to the regional one, is at its lowest stage and below 40%. Due to this fact, almost all the IDPs and vast majority of the host community are using open and unprotected water supply sources.
- √ The non-functionality rate in both woredas (27%) has found higher than the regional one (21%). This indicates there are significant number of water supply schemes / systems, which are not serving the residents of the woredas.
- √ Neither the government nor the humanitarian community are responding to hygiene and sanitation needs of the affected community.
- √ There exist huge gaps in terms of providing WASH NFIs including bathing & laundry soaps, HH water containers, washing basins, water treatment chemicals.

Education

- √ Excluding the one damaged from previous conflict between Amaro Special Woreda & neighboring Guji Zone of Oromia Region, only one school has damaged over the recent conflict. Further, larger segment of the students in the affected Kebelles have displaced, schools have closed and few students are currently enrolling in few schools.
- √ The Education offices in both Woredas have conducted assessments that focus of the physical structure of the schools and enrollment of students. Following this, the offices shared their findings to concerned government line offices, working to stabilize displaced students & the general public, advising students to attend classes in regular bases.
- √ Concerned bodies have recommended to rebuild the fully & partially damaged schools; reinstall or expand water and sanitation facilities including latrines, hand washing and waste disposal points.
- √

Health / Nutrition

- √ In both woredas in the IDP sites, there are newly established mobile clinics, but which are not giving the intended service for the IDPs, due to the shortage of supplies of drugs and medical equipment.
- √ In Derashe woreda, Gato health post was totally damaged during the conflict and Gato health center is not providing the service, rather it is used as settlement for regional defense force.
- √ Similarly, in Amaro woreda, Buniti health post was totally damaged together with what was in it and Abulo health post was partially damaged and materials in it were totally robbed.
- √ In both Derashe and Amaro Woreda, the health condition of IDPs in all age and sex groups (Male +60, Female +60, adult men, adult women, boys, girls, PWD) is worsening after the disaster, compared to what it was before, due to high load of acute illnesses.
- √ In both Derashe and Amaro Woredas, nutritional screening and CMAM programs are in place but the coverage is very low and there is shortage of supplies and drugs for the program, and no other partners supporting the program except the woreda health office.
- √ As per the Derashe woreda health office nutritional screening report of one week before starting this assessment, the nutritional condition is becoming critical among the IDP population.

Protection

- √ In general, ensuring security by the government bodies is the primary need of IDPs, followed by meeting their basic needs (food, water, NFIs & shelter) & ensuring access to their land for agriculture based livelihood activities.
- √ Women & children are in more risk in relation to the security problems as the men & boys are not around their homes.
- √ Sexual harassment by unidentified parts, killing of children, girls, boys, women, & men by unidentified group, rape cases were also reported- The 12-year girl in Duya kebele & the 10-year female child from Becho kebele killed by the unidentified groups near the Hyabena IDP site.

Shelter / NFI

- √ Most of Internally displaced people are currently residing within host families and renting shelter reportedly experienced the worst situation in terms of overcrowding and some of them found in rural none village setting which lack basic infrastructure and access to basic service such as markets
- √ IDPs confirmed as some of them have received plastic sheets and jerry cans but complained that most of the IDPs did not get the assistance.

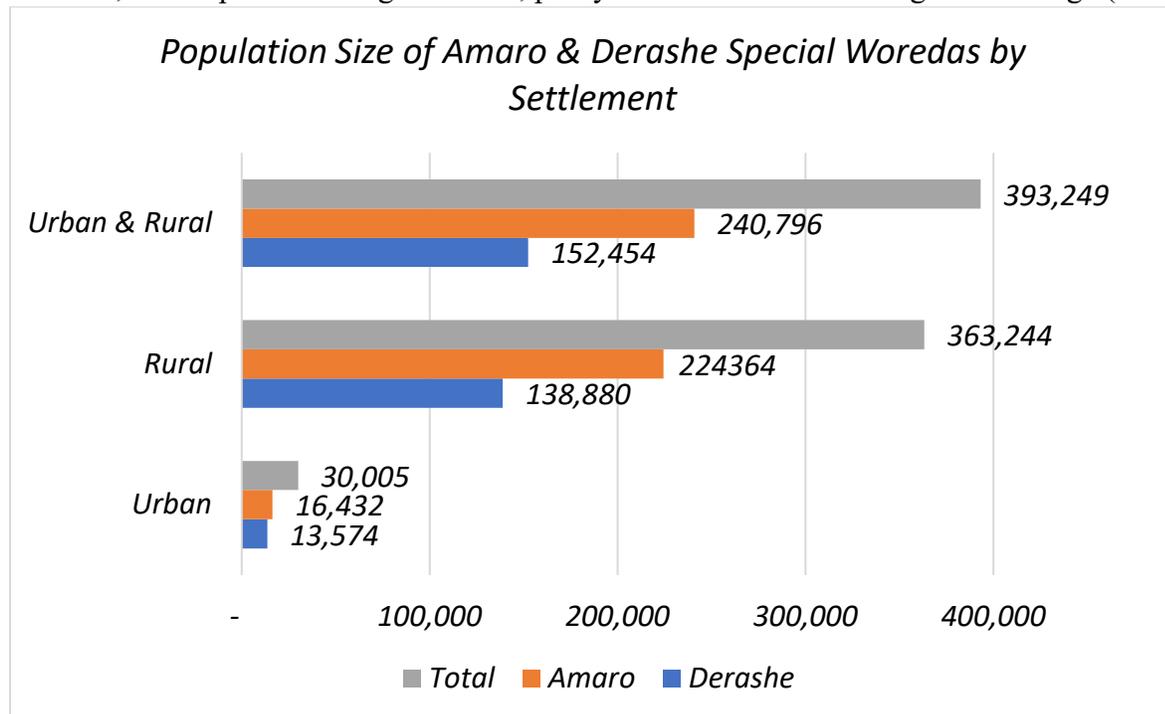
4.1. Affected area and population/IDPs

4.1.1. Population

Both of the affected woredas, according to regional projection for 2021, hosts 393,249 people (Amaro = 240,796 & Derashe = 152,454). This population size, for clear reasons, reside in 53 kebeles / localities (35 = Amaro & 18 = Derashe).

The population of the woredas, like any other corner of the country, settled in both urban and rural areas. However, the proportion between these settlements have wide range of disparity. This disproportionate population distribution between urban and rural, to be more specific, has found as 7.6 % and 92.4% respectively.

The settlement pattern, even between the woredas, has considerable difference. Urban settlers of Derashe (8.9%) have higher precedence than these in Amaro (6.8%). In General, urbanites in these woredas, in comparison to regional data, pretty much lower than the regional average (10.7%).



Settlers of the Woredas, according to CSA of Ethiopia, has been leading their lives through multiple economic activities. Most notably, the major source of income in the woredas have categorized in to three. Vast majority generates income from pastoralism, followed by a mixed

one i.e. pastoralism and farming. Thirdly, it has disclosed that large segment of the population earns its means of living through farming.

4.1.2. Internally Displaced People (IDPs)

Since the onset of the conflict, significant number of people have affected in both woredas. People have displaced due to insecurity and loss of their belongings including burning of houses, farming lands with both annual and perennial crops, looting of their properties including domestic animals. Due to the aforementioned reasons, considerable number of people have displaced and residing in multiple collective centers and with the host community. These affected people are currently in – need of humanitarian assistance that encompass food, shelter, nutrition, health, WASH, Education and Protection issues.

Internally Displaced People (IDPs) From Conflict Induced - Emergency in Amaro & Derashe Special Woredas									
Area Description			Total Internally Displaced People						
Location			Households			Individuals			
Zone	Woreda	IDPs Site	MHHHs	FHHHs	Total	Male	Female	Total	Remark
Derashe	Derashe	Kolla Mashile	1,334	102	1,436	3,800	3,948	7,748	
		Hybena	540	43	583	1,715	1,785	3,500	
		Gato	932	226	1,158	2,468	3,532	6,000	
	Segen Z.	Gidole Town	68	124	192	326	430	756	
	Sub Total		2,874	495	3,369	8,309	9,695	18,004	
Amaro	Amaro	Buniti	740	77	817	2,274	2,465	4,739	
		Abulo	318	34	352	981	1,061	2,042	
		Alfacho	762	79	841	2,341	2,536	4,877	
		Kelle Town	140	15	155	431	468	899	Earlier IDPs
	Sub Total		1,960	205	2,165	6,027	6,530	12,557	
	Total		4,834	700	5,534	14,336	16,225	30,561	

Out of the total Internally Displaced people in both Woredas, the team has found that considerable number of people are in – need of special attention. Generally, out of 30,561 IDPs, there are 175 Disabled, 3670 under 5 children, 483 Pregnant and 1498 lactating women.

Woreda	Pregnant	Lactating	Under 5 Children	Disabled	Remark
Amaro	135	538	1,456	28	
Derashe	348	960	2,214	147	
Total	483	1,498	3,670	175	

These, using simple arithmetic calculation, represents about 19.06 percent of the entire IDPs in both Amaro and Derashe Special Woredas.

4.2.Situation and Needs

4.2.1.Food

The IDPs, as per the collected data, lost their houses, livestock, crops, equipment used as house utilities. They, as anticipated crackdown of the incident, were not ready and took their belongings. For this reasons, the major source of food at the initial stage, as indicated by the IDPs, was the host community, family and friends. Following this, the affected community pinned out market purchase and borrowing food from those who managed to run with limited one as a source of food. Pretty recently, government assistance has arrived in both woredas and become the major source of food to majority of the IDPs. However, this source is not sufficient enough to cover all the people in need in Derashe Woreda.

Food availability, even though limited assistance arrived recently, has limited due to multiple factors. The IDPs in both woredas indicated that loss of agricultural cultivated land, loss of livestock, insufficient facilities & fuel for cooking are the four primary factors that limited availability of food. Further, the IDPs pointed – out that inflation, even though limited money at hand, hindered them from buying basic food items in the nearby markets.

In terms of food accessibility, the IDPs listed multiple factors that play significant role currently. The following, among others, have pointed out as the most notable ones by the IDPs from the top to the bottom of the table: -

Accessibility issues

- √ No/reduced income, money to purchase food
- √ Security constraints restricting movement to markets
- √ Prices for food in the market went up
- √ No/reduced income, money, resources to purchase cooking fuel/gas

Multiple coping strategies for lack of income / food, as disclosed by the IDPs, have executed since the onset of the crises. IDPs in both woredas, reduction of meals size, depending on host community for borrowing money & food, reducing expenses, spending saving, skipping meals have ranked from the top to the bottom.

Furthermore, due to reduction / absence of families income children have been applying different coping mechanism since the onset of the conflict. Engaging in work for income, begging for food / money, eating much reduced size of meal and even spent a day without eating are the most notable coping mechanisms applied by children.

4.2.2.Shelter/NFI

Most of Internally displaced people are currently residing within host families and renting shelter reportedly experienced the worst situation in terms of overcrowding and some of them found in rural none village setting which lack basic infrastructure and access to basic service such as markets

IDP identified through this assessment; people that have self-settled in urban area and in collective center /public building /. Furthermore, there is lack of clarity on the situation with type of tenure arrangements that this displaced people has; whether these IDP are hosted or rented or if they have another form of arrangements'. The reflection of people affected by the incident and physical observation at the site shows that, the shelter are destroyed which are completely reduced to truce

beyond an usable condition. IDP confirm that as they have received plastic sheets and jerikans but complained that most of the IDPs as not get the assistance.

4.2.3. Health / Nutrition

In Derashe woreda, currently, there is 1 primary hospital 4 functional health centers, 19 health posts, and 3 HC & 3 HP are under constructions and 39 all type Private health facilities. Gato health post was totally damaged during the conflict and Gato health center is not providing the service, rather it is used as settlement for regional defense force.

Similarly in Amaro woreda, there is 1 functional primary hospital 7 functional health centers, 41 functional health posts excluding other private health facilities. One health post was totally damaged and one partially damaged and robbed. Buniti health post was totally damaged together with what was in it and Abulo health post was partially damaged and materials in it were totally robbed

4.2.3.1. Nutrition Situation & Need

- In both Derashe and Amaro Woredas, nutritional screening and CMAM programs are in place but the coverage is very low and there is shortage of supplies and drugs for the program, and no other partners supporting the program except the woreda health office.
- In Gato kebele in Derashe woreda, even the program itself is not routine due to damage of health post and security condition. In some health Kebeles in both woreda, equipment like anthropometric measuring equipment were burnt and robbed. For example: Gato HP, Bonit HP, Abulo HP. As the key informant said, in Amaro Woreda IDP, due to absence of moderate acute malnutrition treatment program, children are progressing to the severe acute malnutrition and complication within the short period of time, which is the same in Derashe woreda IDP.
- As it is visible from the Derashe woreda health office nutritional screening report of one week before starting this assessment, the nutritional condition is becoming critical among the IDP populations. For example: In Haybena IDP: Out of 63 children screened, 18 were SAM, 27 were MAM and out of 18 SAM children, 2 were edematous which is almost similar in all Derashe IDP sites (Table.2).

Kebele /IDP site/	Nutrition screening					PLW		
	>12.5cm	11.5-12.5cm	<11.5cm	Edema	Total	>23cm	<23cm	Total
Haybena	18	27	16	2	63	47	7	54
K /mashile	7	12	4	0	23	14	2	16
Gato	13	17	7	1	38	0	0	0
GidoleTown adm	5	3	1	0	9	0	0	0

4.2.3.2. Health situation and needs

- In both Derashe and Amaro Woreda, the health condition of IDPs in all age and sex groups (Male +60, Female +60, adult men, adult women, boys, girls, PWD) is worsening after the disaster, compared to what it was before, due to high load of acute illnesses like malaria, diarrhea, scabies, Typhoid fever; lack of safe water supply, poor sanitation and hygiene conditions, lack of enough food supply, weak capacity of health care system to provide the basic health services and the living conditions in the IDP situation.

- Even though there is logistic shortage like drugs and medical equipment's, routine health services were given for all age and sex groups in the existing health centers and mobile clinics in both woredas. Immunization service is available for target children and mothers except for those children who were displaced from the Segen zuria woreda, in Derashe woreda, because they were not included in the Derashe woreda target at the beginning. Due to that they were excluded from the service. Similarly, in Amaro woreda measles immunization coverage is very low (67%). Clinical treatment of neonates, infants and young children in place in both woredas, but there is shortage of drugs and trained health professionals. Vitamin A and deworming supplementation services are available for all targets in both woredas.
- In both Derashe and Amaro woredas, there are loads of malaria cases, but shortage of malaria treatment drugs and RDTs. For example: In Derashe woreda, Hyabena IDP site, once out of 12 RDT tests conducted, 10 of them were positive for plasmodium falciparum, and in Amaro Woreda, within the first four days of establishment of IDP mobile clinic during the assessment week, 24 malaria positive cases were registered only from IDP site. Still now, there were no any malaria preventive activities done, no ITN distributed and no chemical sprayed in both woredas.
- In both woredas in the IDP sites, there are newly established mobile clinics, but which are not giving the intended service for the IDPs, due to the shortage of supplies of drugs and medical equipment like BP apparatus, statoscope, thermometer, microscope, disinfectants, delivery sets, autoclaves, dressing materials, gloves, anthropometric measurements, weight scales and transport.
- In both woredas, the majority of IDPs and host communities are not accessing to routine health service due to complete damage of health facilities (Gato and Bonit health post) and loss of medical equipment (Abulo HP), shortage of drugs and medical equipment and security problem (Gato health center).
- In both woredas, at IDP site there is no Sexual and reproductive health services, like ANC, PNC, Assisted child birth, contraceptive services, clinical management of rape and SGBV, which are only available in the health centers. HIV treatment service is not available for IDPs and there is no mental health service at IDP site which were only available in health centers. In Derashe Woreda, there is shortage of contraceptives for IDPs and hosts.
- In both woredas, the COVID-19 prevention activities were totally left.
- In both woredas, ambulance service is available to IDP sites for both women/girls and men/boys, but still there is shortage of vehicle and fuel for vehicle it is not enough in relation to the distance from the IDP site and woreda town or referring facility.

4.2.4.WASH

4.2.4.1. Main Sources of Water Supply

Both of the affected woredas, in combination, hosts a total of 393,249 (Derashe = 152,454 & Amaro = 240,796) people. Out of this total population, vast majority (92.4 percent) resides in rural areas and the remaining 7.6 percent settle in urban areas of the two woredas. This settlement pattern, as sources indicated, has found unmatched in comparison to the regional one (10.7% = Urban & 89.3% = Rural).

Such settlement pattern, for obvious reasons, creates a puzzle in addressing all kinds of socio – economic services including creating access to clean potable water supply. The more people lives in scatter residing settlements, the higher efforts and resources are required to furnish proper infrastructure. For example, the average water supply coverage, as the assessment showed us, is much better in urban areas than in rural areas.

Aligning to the aforementioned fact, urban residents of both Amaro and Derashe Special woredas found with better access than their counter rural residents. Urban water supply coverage, to be specific, is 43.61 % in Derashe and 43.7 % in Amaro Woreda. On the flipside, the coverage in rural areas in both woredas (30.4% = Derashe & 32.9% = Amaro) have found far below in comparison with the urban one. These disparities, for notable reasons, the Woredas’ average access coverage (32.03% = Derashe & 34.1% = Amaro) pulled down to less than 35 percent. This level of coverage has found far below even to the regional one, which is set at nearly 54 percent.

Based on this, the team found out that vast majority of the population (67.97 % = Derashe & 65.1% = Amaro) have forced to use open and unprotected water supply sources including unprotected springs, rivers, ponds, etc.

30,561 People (18,004 = Derashe & 12,557 = Amaro) displaced internally from conflict induced emergency, like the host community, have found using open and unprotected water supply sources. This, as noted by the team, may led to WASH related to health outbreaks including cholera and COVID_19.

The people who gained proper access to clean potable water supply, as per the assessment, are using multiple sources including deep wells, hand dug wells, shallow wells, on spot springs and springs with gravity distributions.

Status of Water Supply Schemes by Woreda and Type			
Scheme Type by Woreda	Functional	None-Functional	Total
Amaro	196	65	261
Borehole	3	1	4
Hand Dug Well	22	18	40
On Spot Spring	10	4	14
Shallow Well	14	8	22
Spring With Distribution	25	1	26
Water Point	122	33	155
Derashe	77	39	116
Borehole	4	4	8
On Spot Spring	9	2	11
Shallow Well	16	9	25
Spring With Distribution	34	12	46
Water Point	14	12	26
Total	273	104	377

Out of the total water supply sources, as depicted in the table above, significant sources (104) have found non-functional ones. Inferring from this, it is possible to see how high the non-functionality

rate of schemes in the woredas. The average non-functionality rate of the woredas, to be specific, has found as 27.6 percent, which is higher than the regional average (21%). Out of the non-functional schemes, depicted above, 20 schemes (9 = Amaro & 11 = Derashe), as notified by government officials, have damaged due to the conflict.

Table – 2: Types of Schemes Damaged by Woreda & Kebele

Woreda	Kebele	Damaged Scheme	Quantity	Remark
Amaro	Abelo	Hand Dug Well	1	
	Abelo	Borehole	1	
	Abelo	Shallow well	1	
	Alfacho	Shallow well	2	
	Boniti	Borehole	1	
	Boniti	Spring With Distribution	1	
	Boniti	Shallow well	2	
Sub Total			9	
Derashe	Gato	Spring With Distribution	4	2 have rehabilitated by Woreda
	Gato	Shallow well	3	
	Hybena	Spring With Distribution	1	
	Kolla Mashile	Borehole	1	
	Kolla Mashile	Shallow well	2	
Sub Total			11	
Total			20	

4.2.4.2. Major Problems Posed by the Public

The entire public of the affected woredas, as per the officials, posed multiple issues designated as problems. The public, as outline by the officials, pinning out reduction of water, use of unsafe water for drinking, use of open & unprotected water supply sources, etc.

From the IDPs perspective, the issue goes far worse than the host community. The IDPs, based on the discussions held by the team, indicated various problems that adhere towards access to water, hygiene and sanitation services in both the collective centers and the host community. The problems, as point-out by all the IDPs communicated, include the following as the most notable ones: -

- Insufficient water storages such as Roto Tanks, Jerri cans, Buckets
- Use of unsafe water sources for drinking water
- Personal hygiene products (bathing & laundry soaps, shampoo, toothbrush, soap)
- Female hygiene products (sanitary pad)
- Hygiene kits for infants/toddlers
- Absence proper sanitation facilities such as bathing rooms, latrines, waste disposal points, etc
- Inability of getting both communal and HH level point of use water treatment chemicals.

4.2.4.3. Reasons for unavailability of Clean Water

Respondents of the KIIs and participants of focus group discussions in both woredas indicated similar reasons that led towards unavailability of clean water. Almost all indicated that unavailability of water supply sources and lack of chemicals for treatment at both community and household level as primary reasons. Further, the other reason pointed out and placed as third one is damage of schemes in the environ due to conflict and non-functionality of schemes from different technical difficulties in areas where relatively nears to the collective centers.

On top of these, officials of Amaro Woreda added two more reasons to the list. Constraints of containers to collect / store water and lack of operational costs such as fuel for generators / consistent interruption of electricity.

4.2.4.3.1. Factors that Limit Access to Clean Water Supply

Distance to functional water points / sources and queuing time have placed at the top of the factors that limit access to clean potable water. In Derash Woreda the average distance and queuing time have indicated as 5 KM and 150 Minutes respectively. Where as in Amaro Woreda, a little bit better, the distance reduced to 2 KM and the queuing time to 90 Minutes.

Following the aforementioned primary factors, participants of the focus group discussions pointed out security constraints as another limiting factor in accessing clean water supply. This, as reasoned out by the IDPs, has resulted from the ongoing attacks.

4.2.4.3.2. Responsibility of Water Collection

Culturally, women and young girls have supposed to assume responsibility of fetching / collecting waters in Ethiopia. In the assessment areas, like any part of the country, these segments of the society are responsible to collect water. Both the Key informants and IDPs unanimously indicated that women and girls are responsible to the task.

4.2.4.3.3. Safety Concerns for Water Collectors

In both woredas, as per the assessment, the IDPs and representatives of the host community disclosed that there are some safety concerns for the water collectors. Both IDPs and the host community list risk of kidnapping / abduction, violence against women and girls as well as poor road conditions from top to bottom part of the table in consecutive order.

The team, as a conformation to the concerns, able to learned that a women in Hybena IDP site have abducted and sexually violated by unknown individuals while collecting water from a nearby river. Several members of the IDP community in the site witnessed and confirmed this incident to members of the team who have visited and held focus group discussion at the site.

4.2.5. Education

In both affected woredas, there used to be 1 pre-primary, 11 primary and 4 high schools. Based on this, one can see that all sorts / levels of education institutions, excluding higher learning centers, exist in the Woredas.

Out of these education centers, 11 primary and 3 secondary schools registered over 7,834 (6,730 = Darashe and 1104 = Amaro) students for the 2013EC academic year. However, due to the crisis only one Secondary and 4 primary schools are operating and enrolling 2,937 (1737 male and 1200 female) students.

Out of the total schools in both woredas, only one school in Amaro Special woreda – Buniti Kebele have completely damaged. Even though vast majority of the schools are intact, due to fear, only 4 primary and a high school are in operation. For the same reason, the larger segment of the students have found displaced with their families and unable to attend schools.

Since the onset of the emergency an average of 40.90% of boys (Derashe = 40.99% and Amaro = 40.24%) and 33.45% girls (Derashe = 32.83% and Amaro = 36.54%) have found attending schools. Inversely, 59.1 % boys and 66.17% girls in both Woredas have found out of school.

During the assessment, the team tried to find the most pressing reasons for the dropouts. Based on this, girls dropout schools due to safety issues and intensive domestic works in both woredas. In terms of boys' dropout, the woredas agree in safety issue but differ in the second reason. Responds of Derashe Woreda, the second reason for boys' dropout is distance to school. Whereas, boys in Amaro Woreda have found dropping out from schools due to work for income.

In both target woredas, multiple problems have posed by both the key informants and the IDPs as well as the host community. However, the five top problems pointed out includes the following ones: -

- √ Education institutions are closed after disaster
- √ Lack of safety for children on their way to and from school
- √ Safety and security concern for boys and girls at school
- √ School vulnerable to attack
- √ Health Risk due to inadequate sanitation

In terms of WASH facilities, Buniti primary school, which has damaged by the conflict, has found without access to clean water supply. Further, the latrine facilities and school materials have found completely damaged.

In the same line, Abulo primary school that has damaged from previous conflict has lost its water supply source. On top of this, this school and the school at Alfacho Kebelle have found without access to improved latrine facilities. Even though the team found a structure of latrine facilities, they are not segregated and hand washing services.

4.2.6. Protection

The woreda officials participated in the assessment as key informants & the people displaced at Hyabena IDP sites (Visited by the team) have reflected their interest to return to their original residences if the security problems are resolved. IDPs are in greater risks due to: the lack of securities, basic needs & NFIs. Specially, women & children are in more risk in relation to the security problems as the men & boys are not around their homes to securer themselves from the special forces of the region.

Hyabena IDPs (Visited by the team) reported that IDPs have shortage of food, affected by malaria & other water borne diseases. Sexual harassment by unidentified parts, killing of children, girls, boys, women, & men by unidentified groups and rape case were also reported. The 12-year girl in Duya kebele & the 10-year female child from Becho kebele killed by the unidentified groups near the Hyabena IDP site.

Moreover, in the IDP sites it is common to see sexual abuse, premature delivery due to an anxiety, robbed material & house property, killed children, girls, boys, men & women, movement restricted, food & water shortage & other related problems as the reports from the woreda officials & reflection from the IDPs enlightens.

In general, the KI (Key Informant), the woreda government officials & the displaced peoples informed that to be secured by the government bodies are their primary need, secondly, to get basic needs (food, water, NFIs & shelter) & lastly, to access their land for agriculture based livelihood activities.

4.3. Emergency Response so far.

4.3.1. Food Security Response

Given the magnitude of the situation, as per the team's evaluation, the IDPs have not received adequate support so far. Neither the government nor the humanitarian community have supplied sufficient food supplies to the affected community. Even though the conflict has erupted at the beginning of September, the IDPs received little support over the past months. This is not difficult to imagine how hard life has been to the IDPs

Support Type	Quintal by Woreda			Beneficiaries	Remark
	Amaro	Derashe	Total		
Maize		200	200	1,333	
Supplementary Food	183	277	460	1,845	
Wheat	1,752	1,737	3,489	21,978	
Total	1,935	2,213	4,148	25,156	

Though limited and inadequate, both the regional and federal government distributed some food items to the IDPs in both Woredas. So far, as per the data collected, some 25,156 people, as depicted in the table above, have received food items for just a single round.

4.3.2. NFIs/Shelter Response

Even though the Number of IDPs, as disclosed in the sections above, is huge, the anticipated support from shelter / NFI perspective has found very limited. Only 30.5 percent of the IDPs have reached by the government through provision of limited supplies.

NFI Type	Quantity by Woreda			Beneficiaries	Remark
	Amaro	Derashe	Total		
Cups	1,913		1,913	1,913	
Plastic 200m2	233	211	444	444	
Water Jerri Cans	1,273	1,518	2,791	6,978	
Total	3,419	1,729	5,148	9,335	

Most of the IDPs, even the ones who received the limited support, have huge burden in terms of shelter / NFI. They received nothing that better their lives and NFIs relevant for daily utilities including mattress, blankets, sheets, etc.

4.3.3. Health /Nutrition Response

4.3.3.1.Nutrition

In both woredas, mobile clinics were established and providing service for IDPs. Even though there is gap, mobile clinics and health centers are conducting nutritional screening and linking the children to OTP and SC.

4.3.3.2.Health

In Derashe woreda, four mobile clinics (Gatu, Haybena, Kelamash and Gidole town) supporting the IDP site which were formed by the woreda health office by daily relocation of the health workers from their routine activity in the health centers. But their functionality is limited due to shortage of resources and health workers. Similarly in Amaro Woreda, there are newly established clinics currently starting the work still the problem is shortage of supplies and transport. Health facilities in the both woredas are giving free health service for IDPs but still the problem is shortage of supply.

4.3.4. WASH Response

Both the regional government along with its line offices at different levels and humanitarian organizations have been delivering responses since the onset of the conflict in all affected woredas. However, the response in both Amaro and Derashe Woredas has found very limited and only limited number of people have reached so far. Vast majority of the responses have delivered through Regional Water Mine & Energy Development Bureau and UNICEF.

The only support supplied by the federal government, in terms of WASH, has found provision of 1,518 pieces of Jerri Cans that have distributed to IDPs who have settled in Derashe Special Woreda.

NFI Type	NFIs Qty			Beneficiary	Remark
	Amaro	Derashe	Total		
Calcium Hypochlorite (HTH), drum	2	1	3	13,500	For 6 Months
Sanitary Pad - Packs	2,160	648	2,808	936	For 3 Months
Soap - Bathing(250 & 75gm) - Bars	7,200	2,160	9,360	3,120	For 3 Months
Soap - Laundry 250g - Bars	2,500	1,500	4,000	1,333	For 3 Months
Squatting plate, plastic, with lid - Pieces	20	10	30	2,100	1 per 100 people
Water Container - Bucket 20 & 15 L - Pieces	200	60	260	1,300	1 per HH
Water Container - Jerry can 20ltr - Pieces	200	1,578	1,778	4,445	1 per HH
Water disinfectant tablets (20LTr) 67g tabs - strips	5,600	2,520	8,120	2,707	For 3 Months
Water Purification Powder - Sachets	48,000	21,600	69,600	1,024	For 3 Months
Grand Total	65,882	30,077	95,959	30,465	

Further, Derashe special Woreda, using its own resources and technicians, managed to rehabilitate 2 spring with gravity distributions in Gato Kebele.

In terms of hygiene promotion and execution of sanitation activities, both woredas have done very limited interventions. According to the team's observation, the IDP sites have no proper access to latrine, waste disposal points, washing and bathing facilities. Furthermore, the team observed nothing that foster the awareness of the IDPs such as posters and flyers.

4.3.5. Education Response

Following the conflict, Education office in both Woredas tried to respond to the incident by executing multiple activities. The woreda education offices, in coordination with relevant government sectors, firstly learned the situation of the schools in the affected areas. This was done through establishment of teams and conducting proper assessment.

Based on the assessment, the education offices in both woredas submitted the findings including the physical statuses of the schools' infrastructure and students' enrolment situation to their respective regional offices and woreda stakeholders. Further, the education offices tried to stabilize the general panic of the public and students. Even though all the schools closed and all students stop attending schools at the beginning of the conflict, due to intensive efforts exerted by the offices, considerable number of students started to attend schools.

4.3.6. Protection Response

The Derashe woreda WCYA office v/head reported that, 1 quintal sanitary pads, 310 lt liquid soap, 305 lts cooking oil, 10 hoop (bonda) cloths, 60 plastic bucket, 60 Jerry Cans, 50 laundry soap, 50 body soap, & 400 kg millet flours are on distribution by prioritizing the pregnant, & lactating mothers, girls & children. In the case of Amaro woreda, the woreda has reported that, about 1752 quintal of wheat distributed for 2010 HHs (11680 families), nutritional food about 183 quintals, water jerry cans about 1273 plastic sheet(200m²) about 233 & cups 1913 pcs.

In addition, the woredas officials have tried to coordinate to organize data & the identification of the number of peoples in the specified IDP sites are completed. Totally displaced people by sex disaggregation, household by male headed & female headed total number of children by sex disaggregation, disabled person by sex disaggregation, unaccompanied children, pregnant & lactating women

4.4.Gaps and Recommendations

4.4.1. Food Security Gaps

The IDPs, as indicated in the situation and responses section, have suffered a lot from getting food supply at least at the minimum humanitarian standard. Intending to save the lives of the affected population, an immediate and uninterrupted provision of food supply has found in a great demand. Based on this, the team identified the following gaps related to food for the coming six months: -

- √ Distribution of Wheat, Maize and food oil to 30,561 internally displaced people in both Woredas as per the national standard.
- √ Supply of supplementary food to 5,826 under five children, pregnant and lactating women as well as disable people – as per the national standard.
- √ Transfer cash to 5,534 households so that they start life again and establish themselves a sustainable and better livelihood.

4.4.2. NFIs/Shelter Gaps

From the assessments results of 6/six/ kebeles of Derashe and Amaro it is clearly noted that there are outstanding gaps and needs. The presence of humanitarian actors is limited, only regional governments plus woredas struggling with the situation. And therefore there are gaps in the coverage of humanitarian needs as it is above the capacity of the government bodies.

4.4.3. Health / Nutrition Gaps

4.4.3.1. Gaps in Nutrition

- Number of malnourished Children is increasing in IDPs site and as woreda health office report shows GAM and SAM rates are also very high and shows the critical conditions in the IDPs especially in Derashe woreda.
- There is gap on CMAM and IYCF trained health professionals in both woredas.
- There is shortage of SC KIT, plump sup, CSB++, Essential and rooms in both woredas
- There is no IYCF service totally in both woredas
- Very low coverage of nutritional screening in IDP in both woredas
- MAM children are not treated based on the protocol for e.g. there are MAM children who are treated in OTP in Derashe woreda.
- Medical equipment were destroyed together with the HPs both woredas.
- There is no supporting partners involved in emergency response and CMAM program in both woredas
- There is financial shortage (budget shortage to fulfill all this gaps) in both woredas
- MAM children are not treated based on the protocol and shortly progressing to the complications in Amaro woreda

4.4.3.2. Gaps in Health

- There is no enough mobile clinics in IDP sites the existing ones are not well functioning due to shortage of the supplies in both woredas
- Available mobile clinics doesn't include FP, ANC, PNC, clinical management of rape in both woredas
- Psychosocial service not available in both woredas
- Immunization services doesn't include IDPs from Segen Zuria woreda in Derashe woreda and low measles coverage in Amaro.
- Patient referral system is poor and associated with the distance from the woreda and security situation is very difficult in both woredas
- Poor surveillance activity in both woredas IDPs
- There is shortage of IMNCI trained health workers in health facilities and mobile clinics in both woredas

- Shortage of Essentials drugs and contraceptives in health facility and IDP sites in both woredas
- There is no supporting partners involved in emergency response in both woredas
- There is high load of Malaria cases, but no ITN provided for the IDPs or IRS spraying in both woredas
- Shortage of malaria drugs and RDT for diagnosis of malaria specially in Amaro woreda
- IDPs are using unprotected well water for drinking purpose and there is high load of diarrhea, malaria and scabies among the children and adults in both woredas
- COVID-19 prevention activities are not in place in both woredas
- Some health facilities were burnt and damaged totally including medical equipment in it, like Gatu health post in Derashe and Bonit health post in Amaro and some were robbed and left empty (Abulo health post in Amaro) and other was used settlement of regional police force (Gatu HC).

4.4.4. WASH Gaps

Given the magnitude of the problem and the limited responses delivered by the government and partners, it is easy to figure out the gap is huge. Very few displaced people in both woredas, as disclosed in the response section, have reached through distribution of water treatment chemicals (WTCs) and WASH NFIs.

Out of the total 30,561 IDPs, 3731 have provided with Point of Use WTCs, 5745 with Jerri Cans & Buckets, 4453 with bathing and laundry soaps. Further, almost all the IDPs in both Woredas have no access to clean water supply sources and currently using open / unprotected water supply sources.

On top of the aforementioned defies, the IDPs are not accessing proper sanitation facilities including proper latrine, waste disposal points, hand washing and showering services. Further, neither the government nor the humanitarian organizations are responding to hygiene promotion needs of the government.

For this reason, the assessment team noted that there are multiple WASH gaps. The team identified the following gaps as the most notable ones: -

- √ Construction, rehabilitation / maintenance and expansion of 16 water supply schemes
- √ Deployment of 1 water truck and installation of 7 communal water storage tanks
- √ Distribution of nearly 6000 squatting plates, Construction of 306 stances of latrine and showering points as well as 8 waste disposal points
- √ WASH NFIs including soaps, HH water containers, sanitary pads, etc to 5,534 HHs
- √ Training of 62 hygiene promoters

NB: - Please Refer annex – I for the detail needs, available resources and gaps.

4.4.5. Education Gaps

The team found out that there are multiple gaps in the schools. These gaps adhere towards the physical structure of the schools and students. Generally, the team identified the following as the most notable ones: -

- √ Reconstruction of the damaged school at Buniti and renovation of the school at Abulo Kebele of Amaro Woreda.

- √ Expansion of water supply system in both the aforementioned schools and reconstruction / improvement of the latrine and waste disposal points in the schools as well as Alfacho primary school
- √ Crating stable condition and calm environment that enable students to attend classes and follow their lessons in undivided attention.
- √ Provision of supplies including exercise books, pens, pencils, text books to students affected in both Woredas.
- √ Supply of NFIs including facemasks and sanitizers that enable students to prevent themselves from COVID_19

4.4.6. Protection Gaps

- Identification of child protection related data not well organized. Moreover, we have seen technical gaps in major working terms; like separated children, unaccompanied children, child labor, child marriage, and others during the assessment & not included in the previous quarter reports as an activities & the included activities are also poorly performed (0%).
- The general response covers about 50% of the required/ demanded response & the remaining 50% are recorded as a gap & the children, girls, boys & women, disabled person are in risks to the response gaps.
- Children, girls, women, & disabled person are exposed to different harms; like sexual abuse, diseases, malnutrition, psychosocial problems, due to lack of shelters, lack of drugs for the malaria & water born disease, food shortage, searching of drinking water in unsecured environment & at long distance.
- The following are the major gaps the Amaro woreda officials reported as a gap;
- Shelter- for 3179 families.
- Cloth- for 5189 families.
- NFI – for 3179 families.
- Mat (floor- covering) – for 5189 families.
- Food – 5261 quintal.
- In the same way, at Derashe woreda about 3216 HHs are in immediate humanitarian needs as they have lost the whole assets during the conflict, including their house.

Annex – I
WASH Needs, Available Resources and Gaps

Target Population		30,561		HHs		5,534			
Activity	Unit	Needs & Estimated Cost (USD)			Available		Gaps		Remark
		Needs (Qty)	Unit Price	Total Cost	Qty	Total Cost	Qty	Cost	
Water Supply									
Emergency Water Trucking (For 3 Months)	Trucks	2	19,055.56	38,111.11	1	19,055.56	1	19,055.56	
Water Scheme Repair/Rehabilitation of Shallow / HDWs	schemes	11	2,083.33	22,916.67	5	10,416.67	6	12,500.00	
Water Scheme Repair/Rehabilitation of Spring WGD	schemes	6	6,944.44	41,666.67	2	13,888.89	4	27,777.78	
Water Scheme Repair/Rehabilitation of Borehole	schemes	3	6,944.44	20,833.33	1	6,944.44	2	13,888.89	
Water Scheme / System Expansion	schemes	2	13,888.89	27,777.78	1	13,888.89	1	13,888.89	
Shallow Well Drilling and Construction	Shallow Wells	4	6,944.44	27,777.78	1	6,944.44	3	20,833.33	
Provision and Installation of Water Storage Tanks (10M3)	Rotos	8	606.77	4,854.12	2	1,213.53	6	3,640.59	
Provision and Installation of Water Storage Tanks (5M3)	Rotos	2	303.38	606.77	1	303.38	1	303.38	
WASH Committees Trainings (26 committee - 182 people for 3 days = 546 People)	Days	546	9.00	4,914.00		0.00	546	4,914.00	
Sub Total			584.00	189,458.22		72,655.80	570.00	116,802.42	
Sanitation									
Emergency latrine construction	Stances	306	27.23	8,332.38		0.00	306	8,332.38	
Emergency shower facilities	Stances	306	27.23	8,332.38		0.00	306	8,332.38	
Latrine slabs/squatting plates distribution for 6,112 HHs	Slabs	6,112	31.38	191,794.56	130	4,079.40	5,982	187,715.16	
Emergency Latrine decommissioning	latrines	38	694.44	26,388.89		0.00	38	26,388.89	
Waste Disposal point construction	Points	8	2,777.78	22,222.22		0.00	8	22,222.22	
Sub Total			6,770.00	257,070.43	130.00	4,079.40	6,640.00	252,991.03	
Hygiene Promotion									
Hygiene Promoters Trainings (62 Trainers/for 5 days = 310 days)	Days	310	9.00	2,790.00		0.00	310	2,790.00	

Jerrican	pieces	11,068	2.81	31,101.08	1778	4,996.18	9,290	26,104.90	
Bucket	pieces	5,534	1.96	10,846.64	260	509.60	5,274	10,337.04	
Basin	pieces	5,534	1.96	10,846.64		0.00	5,534	10,846.64	
Bathing / Body Soap	pieces	91,683	0.36	33,005.88	130	46.80	91,553	32,959.08	
Laundy Soap	pieces	91,683	0.31	28,421.73	80	24.80	91,603	28,396.93	
Sanitary Pads	Packs	21,362	0.61	13,030.90	2808	1,712.88	18,554	11,318.02	
Water treatment chemicals (3 drum/woreda)	Drums	6	153.76	922.56	3	461.28	3	461.28	
Water treatment chemicals (Aquatabs - for 70% of IDPs -3.5strip/person/for 3 months)	Box	54	56.18	3,033.72	6	337.08	48	2,696.64	
Water treatment chemicals (PUR - for 30% of IDPs - 68 sachets/person for 3 months)	Box	2,598	9.03	23,459.94	290	2,618.70	2,308	20,841.24	
Sub Total		229,832.14		157,459.09	5,355.00	10,707.32	224,477.14	146,751.77	
Institutional WASH									
Water Supply/ provision to Health facilities	health facilities			0.00		0.00	0	0.00	
Permanent latrine construction - Health facilities	latrines			0.00		0.00	0	0.00	
Installation of Waste Disposal points in Schools	points	3	694.44	2,083.33		0.00	3	2,083.33	
Water Supply/ provision to Schools	schools	2	8,333.33	16,666.67		0.00	2	16,666.67	
Permanent latrine construction - Schools	latrines	3	5,555.56	16,666.67		0.00	3	16,666.67	
Sub Total		8.00		35,416.67	0.00	0.00	8.00	35,416.67	
Grand Total		237,194		639,404	5,485	87,442.52	231,695	551,961.89	

