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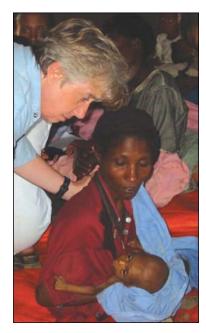
30 June 2003

## Food requirements 100 percent covered

With a donation from USAID, the recently revised cereal food aid requirements for 2003, 1.4 million metric tons (mt), are 100 percent covered. The needs for a total of 128,000 mt of blended food are 94 percent covered. ▶

### "Children pushed over the edge"

Ms. Carolyn M. McAskie, UNOCHA- Deputy Emergency Relief Coordinator visits Ethiopia: food insecurity, economic development and chronic poverty are key issues



Ms. McAskie visits therapeutic feeding center in Sidama

Southern Ethiopia remains in the focus of humanitarian aid activities in the country. The Southern Nations, Nationalities and Peoples Regional State (SNNPR) continues to battle with the after effects of last vears drought, which made 1.4 million people of SNNPR dependent on food aid. Despite accelerated interventions by the Government. UN-Agencies and NGOs, cases of malnutrition were still on the rise in May in some areas. This prompted the government and the humanitarian community to set up more therapeutic feeding centers (TFCs), where children are fed and treated under the guidance of dedicated but overworked medical staff. Medics and material resources were still stretched to the limits in June and all players, the

government, UN-agencies and NGOs were working extremely hard to get on top of the crises and reduce suffering and the threat of death.

The continuing crises also prompted the visit of a high level UNdelegation from New York headquarters headed by Ms. Carolyn M. McAskie, United Nations Deputy Emergency Relief Coordinator in the Office for the Coordination of Humanitarian Affairs (OCHA). Ms McAskie visited Ethiopia from 11 to 13 June 2003, where she met with Prime Minister Meles Zenawi and Commissioner Simon Mechale of the Disaster Prevention and Preparedness Commission (DPPC) and discussed issues of humanitarian concern and the role of the UN in support of the Ethiopian Government. In light of the severity of the situation, special focus of the mission was given to SNNPR, the epicenter of the current crises. The main objective of Ms. McAskie was to raise awareness among the international community about the current situation. She stressed the importance of mobilizing more resources not only in response to the immediate needs of the current crises but - as important - also in a longer-term context.

#### **NEWS**

## Special Envoy comes to Ethiopia

Mr. Martti Ahtsaari, newly appointed Special Envoy of the Secretary-General for the Humanitarian Crises in the Horn of Africa will travel to Ethiopia on an official visit from 2 to 6 July 2003.

#### National standards for management of nutrition adopted

Under the guidance of UNICEF a step-by-step guideline for the identification and management of severe malnutrition has been adopted by Ethiopia in an attempt to standardize the treatment of acute malnutrition.

#### FEWS projects meher production to be average

FEWS reports that rainfall in April – May (169 mm) suggests Meher production will be about average when compared with the last seven years.

## Pastoralists without reserves in Afar

Afar Pastoralists, now without any reserves to fall back on are totally dependent on the rainy season "Karma" expected in July.

#### Bleak future for future generations

Ms. McAskie took note of the fact that early warning systems have greatly improved since the first major crises in 1984 and that millions of lives were saved. However an estimate of the US-Center for Disease Control in Atlanta, which was presented by Tony Hall, US-Ambassador to the UN food and agriculture agencies in Rome, studied a limited and targeted area with a population of 5.3 million and puts the number of "excess" child deaths at 21,000 as a result of lacking food or related diseases. How come? Over the years the humanitarian responses to food shortages in Ethiopia have become more and more professional, efficient and institutionalized, but the underlying causes of why food shortages exist, remain.

The deputy humanitarian relief coordinator stressed that non-food items should be included in future more comprehensive countrywide assessment checklists. Also confronted should be the manifold structural problems that make it still difficult to react quickly and efficiently in emerging crises. But facilitating an increased and better flow of relief is not the only and certainly not a long-term solution. Ethiopia, which suffers under serious chronic food insecurity, already has the highest per capita emergency support of any country in the world. At the same time the country also has the lowest per capita development support.

At the time of McAskies' visit the government reiterated its commitment to work towards food security at a workshop, which was organized by the Ministry of Rural Development and attended by the donor community. One of the paths the government currently pursues is resettlement of peasants from highly food insecure areas to areas with greater potential. Prime Minister Meles also reiterated the principles of the governments' policy of Agricultural Development Led Industrialization (ADLI) for better food security.

McAskie stressed during her visit "sustainable improvements of livelihoods are necessary if short-term crises interventions are to become a thing of the past. A serious worry is the long-term deprivation of children that die from acute malnutrition but actually suffer under the chronic problem of food shortage and food insecurity". Ms. McAskie stressed that there is great need to fill the gap between the short and the long-term responses. Generational effects must be addressed, "chronic malnutrition seriously reduces the capacity of the young generation to become the future leaders", McAskie said. "One major difference between the drought of 1984 and the current crises is the fact, that adults can cope, but children die, the weakest are pushed over the edge".

But the children, who recover thanks to the interventions and finally survive, nevertheless face a bleak future. Their ability to creatively handle their own destiny while becoming adults is seriously impaired if shortage of food and an absence of opportunity remain a way of life. UNICEF estimates that almost two thirds of all children in Ethiopia have some kind of deficiency as a result of chronic malnutrition. One out of every ten babies born in Ethiopia dies before the first birthday. According to the World Bank child mortality rate in Ethiopia is 117 per 1000 compared to an average of 61.8 in other developing countries. Overall life expectancy stands at just 42.3 years compared to 64.3 years for other developing countries



"Chronic malnutrition seriously reduces the capacity of the young generation to become the future leaders". Two thirds of all children in Ethiopia have some kind of deficiency as a result of chronic malnutrition. The blame lies to a large extent on the disparity between economic development and population growth.

#### Per capita income sinking - need for food aid increasing

The blame lies to a large extent on the disparity between economic development and population growth. According to the World Bank's Country Assistance Strategy document, the real GDP of Ethiopia has fallen 3.8 percent this fiscal year, higher than the 2 percent, the IMF International Economic Outlook had predicted. Already since a couple of years, commodity exports, mainly agricultural products, have declined according to FAO. 1997 the export of coffee, oilseeds, chat, pulses and the like brought US \$ 600 Million. Five years after, they netted just US \$ 400 Million, this in a country, which as a matter of policy primarily relies on agriculture as a base for industrial development.



Since agriculture is the main pillar of the Ethiopian economy agricultural production is closely linked to GDP. If agricultural production increases or declines, so does the GDP. Unfortunately the Ethiopian agriculture is characterized by stagnation in productivity and fluctuation in production according to an FAO study. From 1981 to 1999 the average recorded agricultural growth rate was just about 2 percent a year, one percent less than the population growth rate, which means that per capita income is declining by an average of about 1 percent a year. At the moment it is a meager US\$ 89.2 or the equivalent to the price for a single ox.

While per capita income declines external debt is increasing. Measured in percentage of GDP it amounted to little over 5 percent at the start of the seventies and reached more than 101 percent in 2001 according to the World Bank, this after massive debt relief and debt rescheduling by creditor nations.

In the southern region SNNPR the annual average gross domestic product between 1995-2000 never grew more than 0.16 percent according to the Regional Statistics and Population Office. Agricultural production more or less stagnated. At the same time the population increased by a conservative estimate of at least 2.7 percent yearly and it is expected that the population growth will exceed 3 percent in the next couple of years.

Last year the population in the whole of Ethiopia grew by an estimated 1.8 Million to 67 million people and it is projected to double within the next 25 years at current growth rates unless a fundamental change of direction takes place! With fluctuating agricultural output due to changing climatic conditions, declining per capita income and declining commodity exports in the main economic sector, the country will be less and less able to feed itself. This is also reflected in the steadily growing need for food assistance, which is not caused by drought alone and which amounts to 4-5 million people considered to be chronically food insecure today.

Although it does not cover all the calorie needs, a full monthly cereal ration for food aid beneficiaries weighs 15 Kilos. Taking this figure as

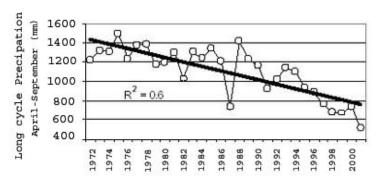
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base for calculation, than the yearly population growth at present adds 330,000 metric tons annually to the national consumption requirement, according to a study recently released by FEWS. This is more than one fifth of the food aid Ethiopia needs in 2003 and does not even include the other ingredients, which are necessary for a complete and healthy food basket.

A study on the Ethiopian agricultural situation which was produced with FAO cooperation and published in April 2000 comes to the conclusion that, unless steps are taken to increase the agricultural growth rate by at least 4 percent annually in the coming years, the food deficit will continue to increase at an accelerating rate. But a sustained increase in agricultural production so far is not happening.

After an exceptionally good harvest in 2001 the cereals prices in Ethiopia dropped way below production cost.<sup>1</sup> The result was a massive debt burden on Ethiopian farmers who availed of credits for agricultural inputs and which many until now cannot repay. As a consequence the use of agricultural inputs, fertilizers and improved seeds has declined. This in turn hurts agricultural production. But worse may be coming.

A newly released study by the United States Geological Service based on data from the Central Statistics Authority measured a strong and consistent drying trend in the long cycle crop growing regions of Ethiopia and concludes that over a period of ten years the cumulative effect results in a loss of 480,000 tons of cereals production, an amount which approaches the average annual food aid of recent years. "Food shortages in Ethiopia may soon pass beyond chronic to tragic" the study says.



April-September precipation in the long cycle crop growing region Source: FEWS

Add to the population growth the pace of soil depletion, forest destruction and erosion with all the impacts - changes in microclimate and local rainfall patterns, sinking of ground water tables, reduced moisture retention in soils and loss of arable land - then you have, within a single generation, the recipe for disasters that could be more devastating than anything we have experienced so far in Ethiopia.

In a press conference at the end of her visit Ms. McAskie stressed that it is important to address issues like the problem of population growth and the need for improvements of basic systems, education, health care, environmental awareness, etc. at communal levels, "Power sharing and

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 $<sup>^{\</sup>rm 1}$  UNOCHA-EUE mission report on fewer surpluses in Gojam and Awi, Oct. 2002

the decentralization policy of the government is fundamentally right", Mc.Askie commented to the governments recent decentralization efforts. However, equally important is an improvement in capacity at the lower levels, not least in the early warning system, which is still hampered by a lack of means, know-how and as a result sometimes dedication. DPPB officials in the woredas for example often don't even have means of transport, to visit remote areas.

But remoteness and lack of infrastructure deprives the most vulnerable not only of monitoring, basic services and opportunities. Often too they lose a large portion of their food rations to transport costs for pick up at far away distribution sites by others who own pack animals. They also benefit less from crisis interventions and development programs. For logistics reasons, most therapeutic feeding centers for example, which were put up in SNNPR, are located along major roads and in urban centers, far away from many of the most vulnerable.

#### Therapeutic feeding a last resort, costly and painful

The OCHA Deputy Emergency Relief Coordindator Ms. McAskie visited Sidama zone in SNNPR where she witnessed the ongoing relief operations in a Therapeutic Feeding Center (TFC) for severely malnourished children in Yirba village, Boricha Wereda, which is run by ADRA (Adventist Development and Relief Organization) with the support of UNICEF and the local health clinic. She also observed the distribution of supplementary food to pregnant and lactating mothers and their children, which is organized by the Irish NGO Goal in Boricha Woreda. During meetings in Awassa, McAskie asserted the NGO's that the UN has a responsibility to provide NGO partners with the opportunities and access they require to ensure the effectiveness of their programs.

By mid-June NGOs in cooperation with UNICEF and Government health services operated 15 TFCs in SNNPR with 1050 patients while another five TFCs were planned. Countrywide, 33 TFCs were in operation and 20 were in the making. According to SNNPR's Regional Head of the Bureau of Health about, 25,000 children are suffering from malnutrition related problems in this region alone. Their agony is the result of the cumulative effects of all the mentioned shortcomings towards sustainable development. The healing process is painful in many aspects and costly as well.

Most newly admitted children suffer from severe malnutrition, the worst form of acute malnutrition, a condition that leads to death without treatment. An alarming number of children also suffer from permanent and chronic malnutrition. Many of them are in a pitiful state, some skinny to the bone due to constant hunger, others bloated and suffering from the deficiency syndrome Kwashiorkor. A number of children were admitted too late and died of septic shock and disease.

Many of the children who are suffering from acute malnutrition, are under five, come from large families with five and more children, and have parents with limited or no access to land and other resources. Ration dilution is a serious problem particularly among large families who share supplementary foods amongst all of them even if it is intended for the youngest only.

So far only small numbers of children could be released back home after treatment, this mainly in areas where blanket supplementary feeding took

25,000 children are suffering from malnutrition related problems in **SNNPR** alone. Their agony is the result of the cumulative effects of all shortcomings towards sustainable development. The healing process is painful in many aspects and costly as well. Many children who are suffering from acute malnutrition, are under five, come from large families with five and more children. and have parents with limited or no access to land and other resources.

place earlier and is now gradually replaced with targeted supplementary food distribution to optimize the use of resources.

Targeted distribution of supplementary food is vital to ensure the children are able to recover after receiving treatment for severe malnutrition, reducing the chances of relapsing or re-admission to TFCs. It also prevents the moderately malnourished from becoming severely malnourished. In areas with strong intervention, the situation is stabilizing but a problem remained the availability of supplementary food, especially in remoter areas. UNICEF has purchased 1000 tons of FAMIX locally and 4000 tons of UNIMIX abroad to reach more than 145,000 children and pregnant and lactating mothers. The problem remains to get it to the most in need.

Aside from supplying large amounts of F75 and F100, the mix of mineral and vitamin enriched therapeutic milk needed to treat severely malnourished children UNICEF also contributes to the strengthening of the health system. Under the expertise of expert nutritionists a protocol has been developed, outlining step-by-step guidelines for the management of severe acute malnutrition. The introduction of this protocol and the training of health workers in how to use it have been crucial in saving the lives of hundreds of children who might not have survived even when they reached a feeding center. To date, this year UNICEF has trained 530 health workers.

A serious danger to the lives of weakened children is measles, a disease whose spread is exacerbated by drought. Already in April, 947,246 children between the ages of 6 months and 14 years were targeted in as measles and Vitamin A campaign in Guraghe and Silti Zones, while another 1,885,200 children were targeted this month in Sidama and Welayta. Another campaign targeting 2 million children will be held in four zones in July.

A move to help the government improve coordination of efforts in the South was also made by the UN OCHA-EUE, which together with other UN agencies has helped to set up a UN Support Office (UNSO) in Awassa. This office helps address the current crises in a more coordinated manner across all sectors. Main purpose is the gathering and dissemination of information from the field and sharing of resources in the actual crises management. Office staff is deployed from UNOCHA-EUE, UNDP, UNICEF and WHO (in all 12 field officers, 2 nutritionists, 2 logisticians and one information officer, IT expert and area project officer). The field officers attached to this office will try to locate and investigate potential new hotspots and supplement the WFP food monitors that are active in the Region. WFP also funds a nutritionist, who is part of the regional office of the Emergency Nutrition Coordination Unit (ENCU), based in Awassa.

#### New hotspots, hundreds of deaths, same underlying problems

New centers with acute and severe food shortage and malnutrition still emerge in areas that are remote, hardly accessible by road and without NGO presence. Two such hotspots that emerged in SNNPR in May and June were Offa Wereda of southern Welayta and the kebeles along the Omo river in Dawro zone.

In a small hamlet of Dekaya kebele in Offa wereda, houses were full with sick and emaciated villagers who reported to a mission from UN OCHA-



New centers with acute and severe food shortage and malnutrition still emerge in areas that are remote, hardly accessible by road and without NGO presence. Some had to carry their relief supplies for 70 kms.

EUE that from a population of 250 people 60 have died within the last couple of months, a figure, which could not be confirmed. The deaths were caused by a combination of lack of food, malaria and unhealthy diet. Major food source for months were the cooked stems of immature false Bananas (ensete ventricosum) which causes diarrhea and in effect increases the health risks posed by malnutrition.

Offa zonal officials reported hundreds of deaths, but had no precise figures. A joint mission comprised of WFP, ENCU (Emergency Nutrition Coordination Unit) and UNICEF found that there was a huge problem of targeting within Offa Wereda. 15 kebeles had been previously identified as in need of food, but the woreda actually distributed the food over 26 kebeles, claiming everyone was hungry, but thereby seriously diluting the rations in the 15 vulnerable kebeles. What has made matters worse was that all households received the same amount of grains (50kg bags), regardless of the family size.

The NGO Concern conducted a nutritional survey in May and found that the prevalence of global acute malnutrition (GAM) reached 16.7% and severe acute malnutrition (SAM) was 4.5%, which is serious. According to Concerns' survey 6.7% of the households were eating only 1 meal, and half of all households only 2 meals a day. The price of daily wage labor was as low as ETB 3. During bad times ETB 5 is usually a minimum wage for which peasants are willing to work. An unusually large number of men have migrated in search of work and high numbers of pupils dropped out of school, which is a new phenomenon to the area.

As in many other vulnerable areas of Ethiopia part of the problem is a growing number of peasants competing with a limited area of arable land. The annual growth rate of Offa Wereda is estimated at 2.96% and the average family counts almost six people, which is above the national average of five persons per household. Almost one out of four persons is below five years old. The increase in food production even in good years can hardly cope up with the population growth. Some midland woredas in SNNPR have a population density of over 600 people per square kilometer of agricultural land!

Another hotspot of food shortage and severe malnutrition was detected by UN OCHA-EUE in ten kebeles in Genna-Bossa wereda of Dawro zone, in the gorge along the Omo river valley. By the end of May the whole community was suffering from malnutrition and the condition of mothers and children was particularly bad. An unknown number of people died. Their suffering began already in the year 2000 when they lost an estimated two thirds of their harvest to drought and a large number of livestock due to a combination of drought and Foot and Mouth disease.

The food crises in the ten affected villages, is the result of a combination of several factors: drought, lack of monitoring, communication and infrastructure. The main problem in terms of assessing and relief is the remoteness of the area and inaccessibility by vehicle. Representatives of the local woreda and zonal authorities have never visited the area and firsthand information about the long standing difficulties came only from peasants who voiced their grievances during the "Small Holder Farmers' Conference" in December 2002. It took four months until help arrived in form of a one-time delivery of maize and faba beans purchased by the zonal administration with ETB 53,000 diverted from the annual budget.



As in many other vulnerable areas of Ethiopia part of the problem is a growing number of peasants competing with a limited area of arable land. The increase in food production even in good years can hardly cope up with the population growth. Some midland woredas in SNNPR have a population density of over 600 people per square kilometer of agricultural land!

After that, only one round of relief food was sent from the central DPPC. However due to the inaccessibility of the area, the distribution was made in a place called Gessa-Chere located along the Sodo-Chida main road in the nearby Looma Woreda and most of the weaker beneficiaries were unable to make the journey which was as far as 70 km. Others had to make transport arrangements with highland farmers who own donkeys and charged 1/3 of the relief ration as a transport fee. The destitute beneficiaries were left with a ration, depending on the family size, of maximum 8 kg of cereals per person, far too little for survival in the long run.

The current crises in SNNPR, is the result of underdevelopment, lack of alternative sources of income, structural deficiencies and rapid population growth. Last years drought only magnified the problems. A similar fate as the peasants in Dawro Woreda confronts the farmers in many corners of Ethiopia. Deforestation, agricultural activities in steep valleys and on mountain slopes lead to severe erosion of soils with the result that rains, even if they are sufficient, run off and moisture cannot be retained long enough for plants to mature. Food insecurity becomes almost irreversible and permanent.

#### Resettlement does not remove the underlying causes

One way out of this dilemma is relocation or resettlement of the peasants to more stable and fertile grounds in areas with relatively low population density. But resettlement is only one possible solution, which is highly controversial since it involves the uprooting and movement of large masses of people and has a wide number of inherent risks, which may lead to humanitarian crises if not properly addressed. Resettlement also does not remove the underlying causes of Ethiopias problems, but poses the danger of transferring them from one place to another.

However, in response to the current emergency, the national government is presently pursuing a resettlement policy on a countrywide level. For SNNPR the plan is to resettle a total of 100,000 heads of households within three years (2003–2005), out of which 20,000 will be resettled this year.

The resettlers come predominantly from eastern zones and special woredas of the region where population pressure is greatest and food insecurity is most chronic (e.g. Sidama, Gedeo, Wolaita, Kambata & Tambaro, and Hadiyya Zones as well as Konso and Derashe Special Woredas). Selected resettlers will be mainly hosted in the zones and special woredas in the western parts of the region, considered as possessing ample space with productive land (Sheka, Kefa, Bench-Maji, and Dawro Zones as well as Basketo and Konta Special Woredas).

The first new resettlement scheme in SNNPR started to be implemented in Wolayta Zone on May 15, 2003 when 618 heads of households were resettled. It is part of the zone's intra-zonal resettlement scheme, planned to resettle 2000 heads of households from food insecure areas to weredas (Humbo and Ofa) within the same zone, where land resources are not yet exhausted. However the host weredas Humbo and Ofa presently also depend on food aid on a massive scale.

For the latest report on resettlement click here: Resettlement as a Response to Food Insecurity or check our website at www.uneue.org

Your comments are welcome: un-eue@un.org

The current crises in SNNPR, is the result of underdevelopment, lack of alternative sources of income. structural deficiencies and rapid population growth. Last years drought only magnified the problems. In some places food insecurity becomes almost irreversible and permanent.

#### **NEWS**

#### Special Envoy comes to Ethiopia

Mr. Martti Ahtsaari, newly appointed Special Envoy of the Secretary-General for the Humanitarian Crises in the Horn of Africa will travel to Ethiopia on an official visit from 2 to 6 July 2003. The main objective of Mr. Ahtsaari's visit is to review the overall humanitarian situation in Ethiopia with a special focus on chronic food insecurity and strategies on how to reduce the dependency on food aid and the countries vulnerability to drought through long-term development. After meeting high-ranking officials Mr. Ahtsaari will travel to SNNPR to witness first hand the humanitarian efforts of the government, UN agencies and NGO's.

#### Food requirements 100 percent covered

With a donation from USAID, the recently revised cereal food aid requirements for 2003, 1.4 million metric tons (mt), are 100 percent covered. The needs for a total of 128,000 mt of blended food are 94 percent covered. This unprecedented level of response is an admirable reflection of the deep commitment of the many donors to the relief operation. The breakdown of the latest USAID donation is as follows: to WFP, 60,000 mt wheat, 3,800 mt CSB; for the Joint Emergency Operation (JEOP) and NGOs, 179,630 mt wheat and 6,580 mt CSB. Total food donations to the relief operation, including vegetable oil and pulses in addition to the cereals and blended food, are 1.55 million mt. On the basis of the results of the current Belg assessment mission, which are to be released in mid-July, some additional needs for the remainder of the year may be identified.

#### Risk and vulnerability in Ethiopia

Tufts University in cooperation with Clark University convened a meeting in Addis Abeba's Ghion Hotel on 27 June 2003 that brought together national and international humanitarian and development practitioners, researchers and policy makers to hold discussions on how best to learn from Ethiopia's long experience with risk and vulnerability. In order to enable effective response to the present crisis and plan for the future the participants reviewed Ethiopia's past experiences with Coordination the lessons from this experience was shared along with views on future strategies for Food Security and Livelihood Protection, Resettlement, Internal Migration and trends and patterns in ecology and environment.

#### FEWS projects meher production to be average

FEWS reports that rainfall in April – May (169 mm) suggests Meher production will be about average when compared with the last seven years. According to the report, yields for the 2003 Meher season are estimated at 10.8 Quintals/hectare, with a standard error of 0.4 Qt/ha. This projection falls in between forecasts for normal-to-above- normal rainfall during June-September from the International Research Institute for Climate Prediction (IRI) and from the Ethiopian National Meteorological Service Agency (NMSA) and normal-to-below-normal rainfall from the Drought Monitoring Center in Nairobi (DMCN). April-May rainfall thus appears to give a fair indication of September December Meher yields including both long and short cycle crops.

## National standards for management of nutrition adopted

Under the guidance of UNICEF a step-by-step guideline for the identification and management of severe malnutrition has been adopted by Ethiopia in an attempt to standardize the treatment of acute malnutrition. Developed over 10 years ago by world renown nutritionist Professor Mike Golden and Dr Yvonne Grellety and already used in Africa, Ethiopia's new Protocols on the Management of Acute Malnutrition was announced on 20<sup>th</sup> June following a two-day National Consultation meeting by members of the Regional Health Bureaus, Ministry of Health, DPPPC, WHO, WFP, GOAL, IMC and members of the medical faculty from Ethiopia's five Universities. Now operational in 34 therapeutic feeding centers across the country, the protocol is credited with directly reducing the child mortality rates and saving lives.

#### Not too late for seed distribution

In early June 2003, the Ethiopian Ministry of Agriculture in conjunction with FAO pointed out the sizeable need for additional seeds, particularly for late planted crops, for this Meher season. In need are especially Amhara, Tigray and Oromiya Regions. The Ministry of Agriculture measured outstanding cereal seed requirements for Meher crops at approximately 24,000 MT. Additional 7,000 MT of seeds are needed for late planted crops. In response to requests from Amhara, Tigray, Oromiya and SNNPR for late planting seeds (horse bean, chick pea, haricot beans lentils millet, peanut), the Canadian Government's CIDA has pledged US\$800,000 through FAO.

#### Pastoralists without reserves in Afar

Since May 2002 Afar and neighboring lowlands have been facing a drought emergency with recovery proving to be a challenge. Afar Pastoralists, now without any reserves to fall back on are totally dependent on the rainy season "Karma" expected in July. Any delay in the Karma rains is expected to result in stress and large scale loss of livestock unless closely monitored by government bodies, national and international agencies currently providing relief and rehabilitation support in the region. Already a serious threat to the livelyhoods of many pastoralists is a disease that kills goats – their lifeline – on a large scale. Restrictions to movements due to conflicts between rival ethnic groups Afar and Issa over resources are another problem.

#### World Vision donates essential erugs to Afar

Afar is one of the regions in Ethiopia where social services are inadequate to meet the needs of the people. Health service coverage in the area is only 28.9%, while the national average is 50.6%. Prevalence rates of infectious diseases among children under five are extremely high: Diarrhoea 23.6%, ARI 24.4% and Fever 24%. Immunization coverage in Afar of DPT3 is only about 2.6% while the national DPT3 coverage is 41.9%. According to the DHS report of 2000, the percent fully immunized in Afar is negligible. The need for emergency health interventions is very high as there are many pockets areas with outbreaks of malaria, whooping cough and measles. To assist Zone 1 health department in controlling outbreaks, World Vision purchased and donated essential drugs worth of US\$ 30,000 to the zone's health department. Anti-microbial and anti malarial drugs constitute the major portion of the consignment.

## GOAL Launches school feeding program for 60,000 students

In Awassazuria and Boricha woredas of Sidama Zone (SNNPR), the GOAL Rapid Response Unit launched targeted supplementary feeding for 6,869 beneficiaries in order to stem a current GAM rate of 14.2%. GOAL's most wide-ranging and ambitious venture is an emergency school feeding program for over 60,000 students at rural schools in five regions across the country in partnership with SCF-US, CARE, and World Learning Ethiopia. In West Hararghe GOAL is expanding operations to a zone—wide targeted supplementary feeding program alongside CARE and IMC.

## Concern-Ethiopia Emergency Nutrition Intervention: CTC approach

Concern Ethiopia is currently implementing a Community Therapeutic Care Program (CTC) in Dessie Zuria and Kalu Woredas, South Wollo to address critical levels of acute malnutrition. According to the nutrition surveys conducted in August 2002, December 2002 and March 2003 the Global Acute Malnutrition (GAM) levels were 17.8%, 17.2% and 15.8% respectively in Dessie Zuria. In Kalu Woreda GAM levels in July 2002, November 2002 and March 2003 were 17.4%, 16.6% and 9.2% respectively. Concern is also implementing a CTC program that adopts a holistic approach to reduce malnutrition, in its program areas in SNNPR. Concern is encompassing a Supplementary Food Program (SFP) for moderately malnourished children, Outpatient Therapeutic Feeding (OTP) for severely malnourished children without complications, and inpatient care at Phase 1 stabilization centers for severely malnourished children with complications (mainly lack of appetite, or severe infections).