

Humanitarian Action for Children

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Eritrea

Globally, climate change has resulted in changing human, animal and environmental situation. Moreover, the world is shaken by lack of adequate peace, security, social services and other needs. Similarly, Eritrea is affected by those situations and is characterized by harsh climatic conditions, including cyclical drought affecting groundwater resources and flooding during rainy seasons. These conditions erode the resilience of communities, making it difficult for families to recover from one emergency before another strikes. In recent years, climatic conditions have tested the coping capacities of the population, which is largely dependent (80 per cent)¹ on subsistence agriculture. This has negatively impacted child nutrition, and acute malnutrition among children under 5 years is a major concern. However, the Government-led accelerated high-impact nutrition programme has curbed the malnutrition situation; and the country has achieved significant progress in reaching malnourished children with quality interventions, resulting in an over 90 per cent cure rate. Key drivers of malnutrition include poor dietary diversity and low parental awareness of appropriate nutrition and infant and child feeding practices. Climatic hazards also impact water supply, hygiene, sanitation and health services. Open defecation is a major public health issue, with faecal contamination of the environment and poor hygiene practices linked to child mortality and morbidity. In addition, between 220,000 and 340,000 children are out of school in Éritrea.2

Humanitarian strategy

Given the complexity of the humanitarian situation in Eritrea, in 2020, UNICEF will support Government-led accelerated highimpact interventions and apply an integrated approach to addressing malnutrition particularly in remote and hard-to-reach communities - that involves multiple sectors and enhances programme convergence. This will include an integrated effort on the detection, treatment and prevention of malnutrition, focusing on nutrition-sensitive and nutrition-specific actions, including preventative programmes that circumvent malnutrition through early action interventions for those most at risk. UNICEF will support community-based life-saving health interventions, postnatal maternal and newborn Roadmap to End Open Defecation by 2022. care and mobile outreach services to communities in remote and hard-to-reach locations. The strategy will also embrace sustainable and climate-resilient water supply systems and water safety. Access to improved Education also established 54 temporary sanitation and hygiene services will be supported through the Community-Led Total Sanitation approach. To promote community resilience and reduce vulnerabilities, UNICEF will facilitate the development of multisectoral, sub-national risk communication tools that provide guidance on emergency communication and early warning. Additional priorities for 2020 include UNICEF's focused programmatic work and advocacy regarding female genital mutilation/cutting and underaged marriage, as part of the broader gender and child rights policy focus in Eritrea.

Results from 2019

As of 31 August 2019, UNICEF had US\$8.4 million available against the US\$14.2 million appeal (59 per cent funded).³ As of July 2019, UNICEF supported the Ministry of Health to strengthen systems to improve service delivery, facilitating the quality treatment of 34,000 children with severe acute malnutrition (SAM) and moderate acute malnutrition (MAM). Significant progress led to an over 90 per cent cure rate. Some 3,000 people gained access to safe drinking water through climate-resilient water supply systems. Thirty-nine communities (44,000 people) were declared open defecation-free through the Community-Led Total Sanitation approach, following the roll-out of the National UNICEF supported the Ministry of Education to develop the capacities of 27 school health teachers using the Emergency and Safety Manual. With UNICEF support, the Ministry of classes for the Complementary Elementary Education programme, and enrolled 2,200 out-of-school children. UNICEF developed integrated information, education and communication materials for mine risk education to prevent violence and disability in schools and communities. Some 330 vulnerable households received cash stipends to strengthen income generation and livelihoods. Underachievement is due to lack of funds (at mid-year, the 2019 appeal was 4 per cent funded).

Total people in need

Total children (<18) in need

Total people to be reached

Total children to be reached 583,3<u>00</u>5

2020 programme targets

Nutrition⁶

- 23,300 children under 5 years treated for
- 47,600 children under 5 years treated for
- 400,000 children under 5 years provided with vitamin A supplementation

- 115,500 children immunized against measles and rubella
- 85,000 children affected by diarrhoea having access to life-saving curative interventions

WASH

- 60,000 people accessing safe water for drinking, cooking and personal hygiene
- 160,000 people accessing safe and appropriate sanitation and hygiene service facilities

Child protection

• 100,000 children receiving mine risk

Education

• 4,800 school-aged children accessing quality education, including through temporary structures

Cash-based transfers

• 1,000 vulnerable households receiving cash transfers

	UNICEF 2019	UNICEF
	targets	total results
NUTRITION		
Children under 5 years with SAM admitted for treatment	15,000	8,420 ⁱ
Children under 5 years with MAM admitted for treatment	40,000	25,719
Children under 5 years provided with vitamin A supplementation	300,000	112,996
HEALTH		
Children immunized against measles	110,000	42,658
Children affected by diarrhoea having access to life-saving curative interventions	65,000	64,390
WATER, SANITATION AND HYGIENE		
People accessing safe water for drinking, cooking and personal hygiene	60,000	2,979
People accessing safe and appropriate sanitation facilities	60,000	43,960 ⁱⁱ
CHILD PROTECTION		
Children receiving critical protection services / mine risk education	100,000	92,000 ⁱⁱⁱ
EDUCATION		
School-aged children accessing quality education, including through temporary structures	4,800	2,160 ^{iv}
CASH-BASED TRANSFERS		
Vulnerable households receiving cash transfers	1,000	330 ^v

^{*} Results are as of 31 July 2019.

UNICEF is requesting US\$18.8 million to meet the recurrent and critical humanitarian needs of children in Eritrea in 2020,7 particularly in the area of nutrition. Without this funding, UNICEF will be unable to meet critical humanitarian needs and impact children as envisaged in the humanitarian strategy. This includes addressing high levels of stunting, wasting and acute malnutrition, improving access to health care, immunization, clean water and sanitation, promoting healthy water, sanitation and hygiene practices, and addressing school dropout and other major problems, especially in remote and hard-toreach communities.

Sector	2020 requirements (US\$)8
Nutrition	9,500,000
Health	2,000,000
Water, sanitation and hygiene	4,200,000
Child protection ⁹ (including cash transfers)	1,650,000
Education	1,167,000
Communication for development/risk communications	129,000
Sector coordination	165,000
Total	18,811,000

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The average percentage of girls and women reached is between 40 and 60 per cent.

Approximately 55 per cent are women.

Forty per cent are girls; 10 per cent of the total number are children with disabilities.

Vover 60 per cent are women-headed households, benefiting 4,000 children, out of which 45 per cent are girls.

¹ Eritrea Population and Health Survey, 2010.
² Ministry of Education study on out-of-school children, 2016; and Government of Eritrea assessment, 2018.
³ Available funds include US\$6.1 million received against the 2019 appeal and US\$2.4 million carried forward from the previous year.
⁴ This includes the target figure of people accessing sanitation plus the total children to be reached (83,200 + 583,340 = 666,540). At least 55 per cent of the population and children to be reached

are women and girls.

This includes the following child populations to be reached: children provided with vitamin A (400,000); children immunized against measles and rubella (78,540); children receiving mine risk education (100,000); and children assessing quality education (4,800). Total is 400,000 + 78,540 + 100,000 + 4,800 = 583,340 children to be reached. At least 55 per cent of the target numbers for

education (100,000); and children assessing quality education (4,000). Total is 400,000 + 70,040 + 70,