

Humanitarian **Action for** Children

unicef

Eritrea

Eritrea is vulnerable to recurrent drought due to its geographic location. The rural population is particularly affected, with fewer than 50 per cent of rural households able to access safe drinking water, and only 28 per cent accessing improved sanitation. 1 Over the past two years, climatic conditions have tested the coping capacities of the population, which is largely (80 per cent) dependent on subsistence agriculture.² Data from the Nutrition Sentinel Site Surveillance system indicate an increase in malnutrition rates over the past few years in four out of six regions of the country, and projections estimate that 23,000 children under 5 years will need treatment for severe acute malnutrition (SAM) in 2018.3 Children are also affected by sporadic outbreaks of diarrhoea and measles. Despite the Government's efforts, landmines and explosive remnants of war continue to affect border communities. Children are at particularly high risk when they leave their communities to seek out livelihoods. According to the Education Management Information System 2014/15, some 377,000 children are out of school, and the majority of these children are from nomadic communities that are vulnerable to natural disasters.

Humanitarian strategy

UNICEF and partners, including the Government and United Nations agencies, will continue to mainstream humanitarian preparedness planning and response within the regular development programme. This includes an integrated and multi-sectoral approach to life-saving interventions. UNICEF will focus on supporting the Government's efforts to provide safe water for droughtaffected populations, mainly through the rehabilitation and construction of water points, and reduce stunting and other forms of malnutrition in children under 5. Given the high maternal mortality and stunting rates, UNICEF will support efforts to strengthen the national health system and health service delivery, emphasizing building community capacities to manage acute malnutrition and common childhood illness (e.g. diarrhoea, pneumonia and malaria), reinforcing health seeking behavior, and promoting safe and appropriate sanitation and hygiene practices. Mobile outreach clinics will provide integrated services for children under 5 and women, including lactating mothers in hard-to-reach communities. UNICEF will support the procurement of routine and life-saving commodities to ensure the availability of buffer stock. To prevent family separation and received psychosocial support and physical protect children on the move, UNICEF will provide communities at risk with basic services, including support for out-of-school children and cash transfers. Schoolchildren and communities will also be targeted with information and services on mine risk.

Results from 2017

As of 31 October 2017, UNICEF had US\$2.9 million available against the US\$12 million appeal (25 per cent funded).⁴ With UNICEF support,⁵ 44,700 people benefitted from improved access to safe water. UNICEF trained 152 community hygiene promoters, who supported some 50,000 people to adopt appropriate hygiene practices. Although UNICEF focused on prevention and treatment of acute malnutrition, reaching 22.332 children with moderate acute malnutrition (MAM) and 9,424 severely malnourished children with treatment, targets were not met due to funding constraints. In addition, 364,616 children received vitamin A and 48,470 children and women received supplementary feeding. Through static and mobile health services, 116,214 children were immunized against measles and 64,105 children received life-saving diarrhoea treatment. UNICEF reached 12,845 pregnant and lactating mothers with antenatal and postnatal services. UNICEF mine risk education support surpassed its target, reaching 90,000 children (49 per cent female) with information to prevent injuries. Some 5,000 survivors of mines and unexploded ordnance (35 per cent female) rehabilitation, and 40 children living with disabilities (30 per cent girls) received donkeys to facilitate access to education. Some 7,500 children from nomadic communities accessed basic education, and 300 schools with 90,000 children received fire safety equipment.

Total people in need: Not available Total children (<18) in need: Not available Total people to be reached:

Total children to be reached: 542,000

2018 programme targets:

Nutrition

- 15,000 children under 5 with SAM admitted for treatment
- 40,000 children under 5 with MAM admitted for treatment
- 477,000 children aged 6 to 59 months provided with vitamin A supplementation
- 70,000 children aged 6 to 59 months and pregnant and lactating women benefitted from supplementary feeding

Health

- 110,000 children under 5 immunized against measles
- 65,000 children affected by diarrhoea having access to life-saving curative interventions
- 35,000 pregnant and lactating women and newborns in hard-to-reach areas reached with comprehensive antenatal and postnatal services

WASH

- 65,000 people accessing safe water for drinking, cooking and personal hygiene 60,000 people supported to adopt
- appropriate hygiene practices

Child protection

- 90,000 children in areas affected by landmines and other explosive weapons provided with relevant prevention interventions
- 10.000 children with disabilities including those affected by landmines accessing appropriate services and care
- 600 households receiving cash grants to build resilience

Education

15,000 children aged 3 to 18 years accessing formal or non-formal basic education (i.e. early childhood development, primary and secondary education)

	UNICEF 2017 target	UNICEF total results
NUTRITION		
Children under 5 and lactating women benefitted from blanket supplementary feeding	30,000	48,470
Children under 5 with SAM admitted into therapeutic feeding programmes	16,000	9,424
Children under 5 with MAM benefitted from targeted supplementary feeding programmes	42,000	22,332
Children aged 6-59 months provided with vitamin A supplementation	477,000	364,616
HEALTH		
Children immunized against measles	120,000	116,214
Children affected by diarrhoea having access to life-saving curative interventions	54,000	64,105
Pregnant women and lactating mothers in hard-to-reach areas reached with comprehensive antenatal and post-natal services	31,000	12,845
WATER, SANITATION AND HYGIENE		
People accessing 15 litres of water per person per day for drinking, cooking and personal hygiene	45,000	44,700
People reached with appropriate hygiene messages	45,000	50,000
CHILD PROTECTION		
Children and young people in and out of school in high-risk communities provided with integrated mine risk education programmes on injury prevention	30,000	90,000
Vulnerable children reached and supported with basic social services during emergencies	15,000	5,000
EDUCATION		
Out-of-school children from nomadic communities provided with access to basic education	15,000	7,500

Results are through 31 October 2017 unless otherwise noted. There is no cluster system in Eritrea. Underfunding constrained the required scale up for treatment of acute malnutrition and the achievement of some of the results in education, child protection and health.

Funding requirements

In line with the country's inter-agency 2018 Strategic Response Plan, UNICEF is requesting US\$14,000,000 to meet the humanitarian needs of children in Eritrea in 2018. Without this funding, UNICEF will be unable to support the national response to the continuing needs of children and women in the areas of health, water, sanitation and hygiene, child protection and education, especially in the most vulnerable communities.

Sector	2018 requirements (US\$)
Nutrition	7,350,000
Health	2,400,000
Water, sanitation and hygiene	2,900,000
Child protection	850,000
Education	500,000
Total	14,000,000

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¹ Data from the Government of Eritrea Ministry of Health, 2016. ² Food and Agriculture Organization, 2015. ³ UNICEF projection.

⁴ Available funds include US\$759,910 raised against the current appeal and US\$2.2 million carried forward from the previous year. In addition, €1 million from TrishAid, received in early December, will be carried forward to support 2018 humanitarian programme.

Other resources-emergency through thematic allocations totalling US\$1,691,198, including carry-over, was used. Supplies procured in December 2016

were used in 2017.