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EXPERIENCES FROM THE FIELD

A "PERFECT STORM" HITS ETHIOPIA

A snapshot of present-day Ethiopia reveals a grim situation: a country hosting numerous refugee camps and ravaged by multiple emergencies – drought, internal conflicts, a dire health and food crisis – is on the brink of an unmitigated humanitarian crisis. Reconstruction at every level will require drastic support interventions, including international ones.

TEXT BY / ANDREA ATZORI / DOCTORS WITH AFRICA CUAMM

A recent OCHA report states that more than 20 million men, women and children across Ethiopia – many of whom lost their livelihoods after fleeing from their homes to escape war or drought – now depend on humanitarian assistance for their survival. A lack of water and inadequate nourishment has led to widespread malnutrition in children, many of whom are also suffering from diseases such as cholera due to the scarcity of clean water. Women and children continue to face enormous risk when venturing out into areas of armed conflict or drought-stricken regions in search of water. How did things get to this point?

THE TIGRAY WAR

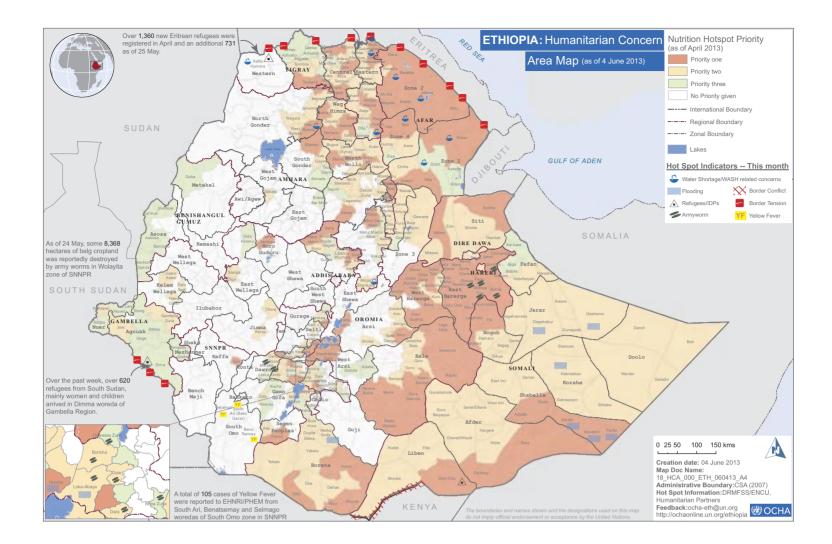
Despite the decision of the federal government in Addis Ababa to postpone Ethiopia's August 2020 national and regional elections due to the coronavirus pandemic, the northern Tigray region went ahead with elections anyway in September 2020. Calling the regional vote illegal, the federal government began withholding welfare funds from Tigray. Then, on 4 November 2020, Prime Minister Abiy Ahmed ordered a military response to an attack on a camp housing federal troops that he believed had been carried out by the Tigray People's Liberation Front (TPLF). Within weeks, due to the involvement of ethnically based militias and Eritrean armed forces, the conflict escalated further. Over the months the course of the civil war shifted considerably; in early November 2021, the federal government found itself in great difficulty when Tigray fighters, advancing toward Addis Ababa, reached the woreda (administrative district) close to it, forcing the Prime Minister to declare a state of emergency. But the capital city then managed to turn the tide, thanks in part to its use of Turkish¹ and Iranian² armed drones.

Raging in what is Africa's second largest state population-wise, as well as a strategic area in terms of the stability of the broader region, the conflict has already claimed hundreds of thousands of lives, driven more than 2 million people from their homes, and brought entire swathes of the country to famine-like conditions. Furthermore, other ethnic groups, including the Oromo Liberation Front (OLF), have relaunched their calls for greater self-determination. Following Prime Minister Abiy Ahmed's 2018 invitation to political groups exiled outside the country, OLF returned to Ethiopia and gained formal recognition as a political party, but when its military faction refused to lay down arms and began to fight federal troops, the government again designated the rebels as a terrorist group in May 2021. A new front had opened. And although the federal government and the TPLF entered into an agreement for a "permanent cessation of hostilities" following peace talks begun in South Africa in October 2022, the situation remains tense and the Oromo front has yet to be resolved; a recent attack on a government military camp in Ambo District allegedly left 19 government soldiers dead and 30 others wounded. Held in place in previous decades by strong leadership from Addis Ababa, the fragile balance required to ensure that Ethiopia remains a federal country is now in shreds. The conflict, the diversion of every available resource to war efforts, and the repercussions of the continuing drought in the Horn of Africa have caused numerous regional crises.

FRAGILE BALANCES

Following the cessation of hostilities, three-quarters of the Tigray region in northern Ethiopia can now be negotiated in relative safety, but getting humanitarian assistance there remains difficult. Some 5.2 million people in the region need aid and have little or no access to money, fuel, communications or electricity, limiting the humanitarian assistance and deliveries of essential supplies that can get through. Food insecurity and malnutrition have worsened, with more than 13 million people in need of assistance in the Tigray, Amhara and Afar regions. There are increasing outbreaks of diseases like malaria, measles, acute respiratory tract infections and other diseases for which vaccines already exist, as well as an extremely high risk of cholera.

Over 2.8 million people have been displaced and now live in crowded conditions with limited access to food, generating problems in terms of water, nutrition, health and health facilities. The situation has led to the collapse of the Tigray region's health system, and in the absence of immunization services, only one in ten children are now protected from infectious diseases. The conflict has also led to a severe reduction in maternal health services, resulting in an elevated regional maternal mortality rate. Drug shortages are limiting required follow-up for patients affected by diseases including HIV and diabetes. It has been estimated that only 3% of Tigray's health facilities are currently functioning, meaning that most are unable to meet the medical needs of the local population.



The Oromia region is also facing several crises requiring humanitarian assistance. Hostilities in Wollega are generating a drastic increase in the number of internally displaced people (IDPs) in the area, with 106,000 confirmed in West Wollega and 116,000 in Horo Guduru Wollega. Malnutrition is also a growing problem in Oromia, particularly in drought-affected areas. A recent survey reported that 1.96% of screened children were found to be severely malnourished and 18% moderately malnourished.

Findings in the Guji zone are also alarming, with a proxy global acute malnutrition (GAM) rate now at 38%, and some *woredas* recording GAMs up to 67%. Food shortages and the limited presence of humanitarian organizations in several drought-affected *woredas* are complicating interventions.

In the Somali region, drought continues to destroy people's livelihoods in the Afder, Dawa, Liben, and Shabelle zones. The situation is especially severe in Afder, where at least 230,000 livestock have died. The overall malnutrition rate is rising: more than 100,000 patients have been hospitalized for severe acute malnutrition (SAM) since January 2022, with an average of 11,400 hospitalizations per month – a 21% increase from the same period (January-September) in the previous year.

NOTES

- 1 https://www.reuters.com/world/africa/exclusive-us-concerned-over-turkeysdrone-sales-conflict-hit-ethiopia-2021-12-22/
- 2 https://home.treasury.gov/news/press-releases/jy0443

In the Southern Nations, Nationalities, and Peoples' region (SNNP), malnutrition is worsening in the areas most heavily affected by drought, including Sidama and other Southwest regions.

In the Gambella region in the west, heavy rains fell from August to October, causing flooding in 12 *woredas* as well as the region's capital; at least 185,200 people (37,040 households) were displaced and an additional 79,631 people (15,926 households) were otherwise affected. Cholera outbreaks have been reported throughout the country, including in four *woredas* of the Bale zone, Oromia region, and two in the Liben zone, Somali region, which are still not contained. There is also a measles outbreak across 20 *woredas* in five regions, with more than 7,359 cases reported since the beginning of the year. Malaria, scabies and other diseases are also on the rise.

A survey of the multiple emergencies now ravaging Ethiopia reveals a grim picture of a country on the brink of an unmitigated humanitarian crisis. Starting with pre-existing factors such as the refugee camps on its borders, severe droughts, and poor harvests due to climate change and conflict in the north, the ensuing "perfect storm" calls for drastic, perhaps unprecedented, changes in terms of international aid and the role of implementing partners in the country. Tailor-made, multi-crisis interventions and mitigation projects are needed to complement development programs, implementing actions to help safeguard the dignity of human lives as well as projects to help pave the way toward the rebuilding, both physical and human, of the country's health care system.