

# Federal Democratic Republic of Ethiopia



## Case study

### 'Acute Watery Diarrhoea' 2006-7

# Ethiopia

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- ❑ Diverse – people, cultures, topography – 75.6 million (2005)
- ❑ 170 out of 177 countries – UNDP HDI (2006)
- ❑ Federal country - 11 Regional National States & 2 City Admins.

## **Features which pose challenges for the response:**

- ❑ Regional - Federal
- ❑ Hierarchical
- ❑ Regular, continual emergencies - poor emergency preparedness
- ❑ Limited trust Govt – NGOs

Coverage sanitation – 13% [2004 in UNDP HDR, 2006]

Coverage water supply – 22% [2004 in UNDP HDR, 2006]; 47.3% [Eth. Govt, 2006]

# ‘AWD’ in Ethiopia

Outbreak from March 2006 – to date

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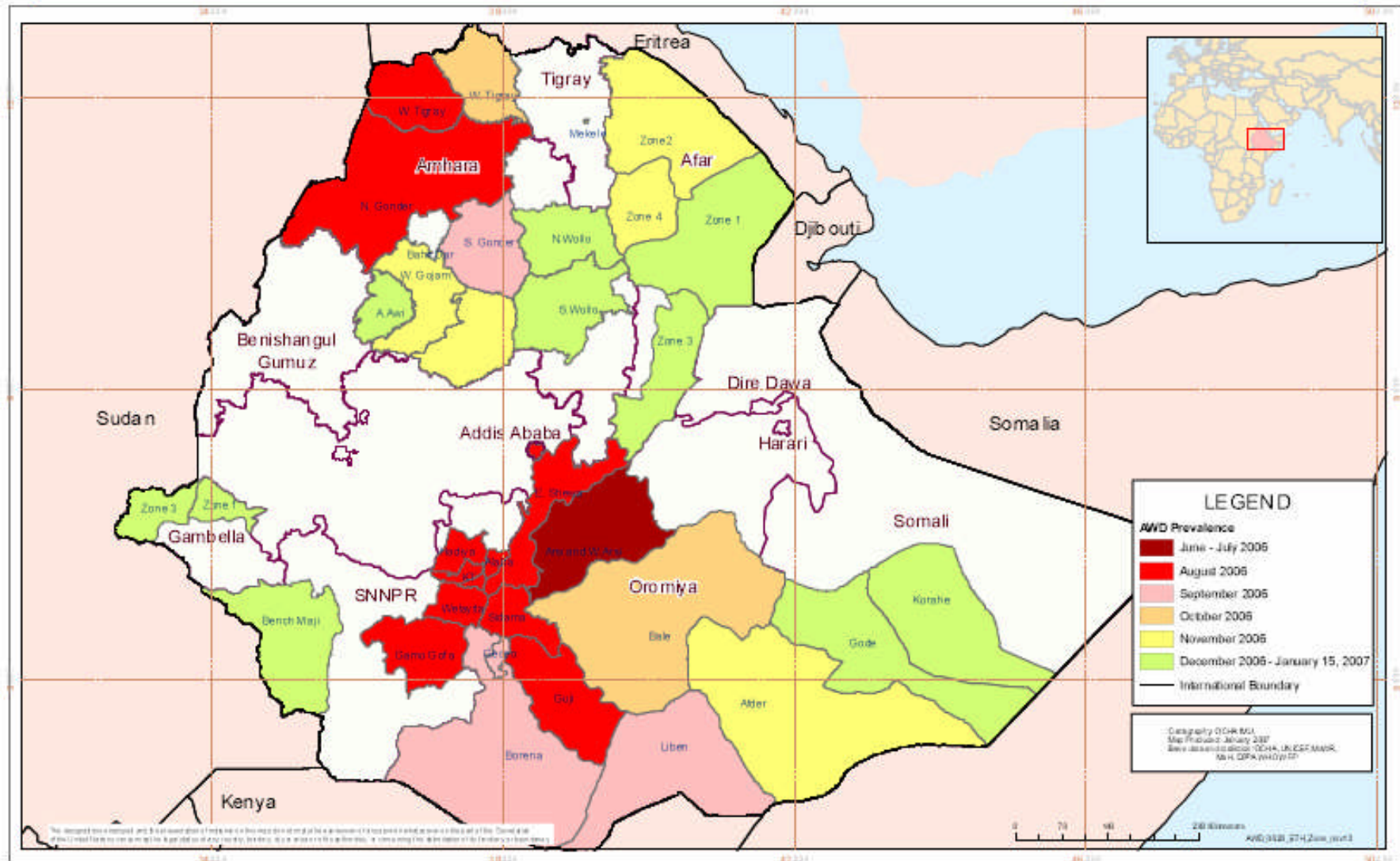
- The Government staff on the ground - Zonal and District level (& some from Regional & other levels)
  - many working very hard
  - doing their best, often with few resources
  - some committed people doing a good job in difficult circumstances
  
- Various sectoral actors – Govt, UN, NGOs, Red Cross Movement, have made significant contributions:
  - to save lives
  - to try & prevent the outbreak spreading



UN Office for the Coordination of Humanitarian Affairs (UNOCHA)

## Acute Watery Diarrhoea (AWD) Prevalence by Zone

Jan 15, 2007



# Overview of presentations

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1. WES Cluster coordination
2. Examples of UNICEF's support
  - Joint assessments
  - Multi-disciplinary training
  - Decentralised CTCs – isolation, hygiene & sanitation training
3. Pooling together for community engagement – GIS mapping & appropriate messaging