

HUMANITARIAN UPDATE


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Improved humanitarian access in eastern Amhara delivers much needed nutrition supplies

Following sustained advocacy by OCHA and partners, several locations in eastern Amhara were reopened for humanitarian access in the past few months, allowing for a scale-up in response efforts. However, the overall situation across the broader Amhara Region remains critical.

Southern regions face a lack of rains as humanitarian teams ramp up response

Spring 2025 rainfall in southern and north-eastern Ethiopia is likely to be below average, although this forecast remains uncertain. This follows an already poor rainy season from October to December 2024. In the Somali Region alone, about 1.9 million people are facing severe water shortages. A US\$18 million anticipatory action plan is underway, providing essential support to about 2 million people.



Tensions in Tigray raise humanitarian concerns

There are growing concerns about potential humanitarian consequences as a result of the growing political tensions. Humanitarian response is already impacted and below target levels. Partners are looking into further mitigation and preparedness actions.

Seismic activity in Afar and Oromia

More than 87,000 people in Afar and Oromia have been evacuated to safer locations following a surge in seismic activity. The earthquakes caused significant damage to homes, health centres, schools, roads. UN and NGO partners are supporting the government-led response, however, critical gaps remain.

Government and partners respond to cholera and malaria outbreaks

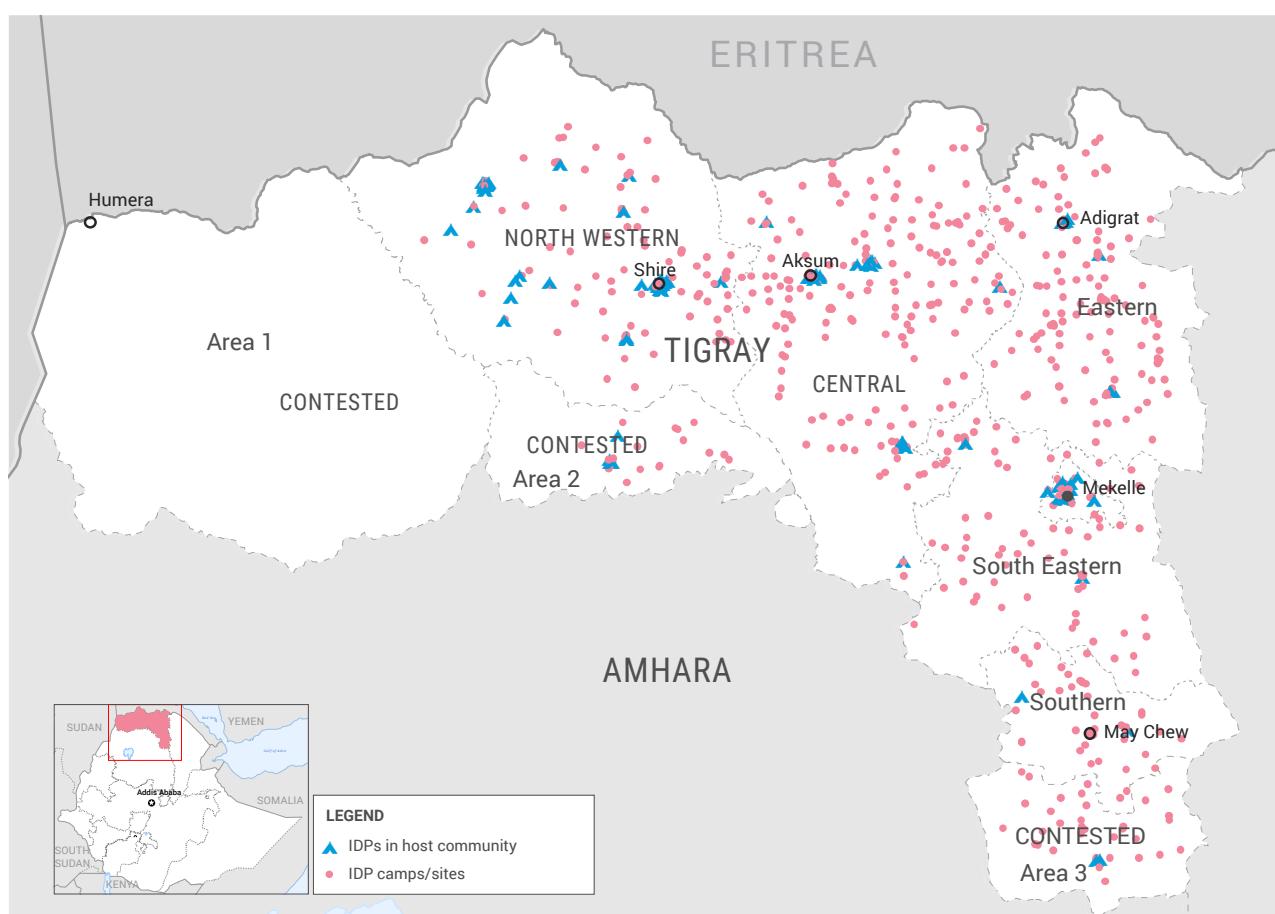
Ethiopia is currently responding to multiple health outbreaks, including cholera, measles and malaria. Although 94 per cent of the cholera-affected woredas had the disease under control by the end of 2024, recent spikes are reported in Gambella and Amhara.

Tensions in Tigray raise humanitarian concerns

Civilians are reportedly queuing for long hours to withdraw their cash from banks and stock essential goods. Across the region, anxiety and frustrations are growing over limited access to essential services, rising prices of basic commodities, a regional liquidity crisis and critical fuel shortages. Reportedly, no fuel has reached the region since 15 March. As a result, ambulance services, public transportation and the transport of humanitarian supplies have been severely impacted. National and international actors are urging restraint, as a further deterioration of the situation would be devastating for a population still recovering from the two-year northern Ethiopia conflict that ended in October 2022.

Serious humanitarian consequences are likely should tensions and uncertainty persist, putting the lives and

livelihoods of millions at risk. At least one million people across Tigray, the bulk of whom are displaced, are in critical need of humanitarian assistance. According to humanitarian partners, most displaced people in Tigray are hosted within communities whose coping capacities are nearly exhausted. An increasing number of IDPs are thus being forced into already overcrowded collective centres, facing health and protection risks due to the lack of basic amenities. Eritrean refugees in Tigray also rely on humanitarian assistance. The neighbouring Afar Region, whose population also suffered from the northern Ethiopia conflict and where many face food insecurity and malnutrition, is also likely to be impacted by the developing situation in Tigray, including population movement.



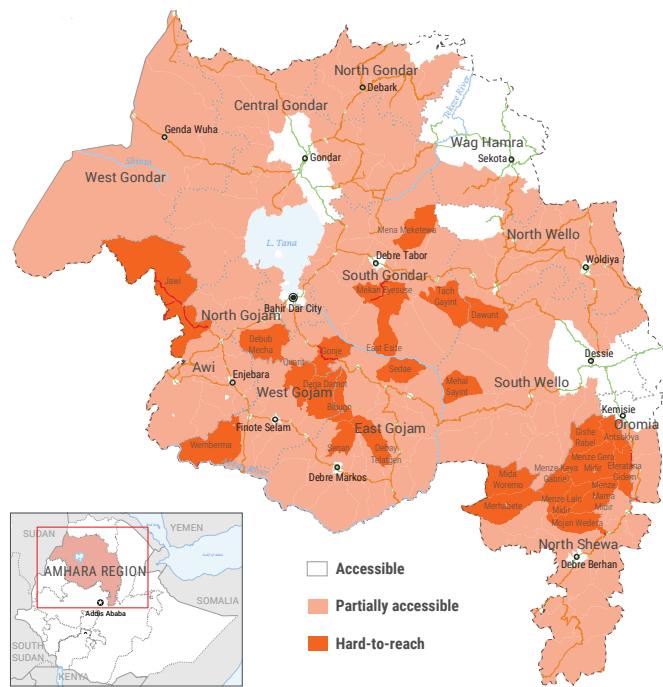
What next?

Humanitarian partners are looking into possible scenarios and readiness measures: availability of supply stocks, continuation of pipelines, partner capacity, security, and operational set up. Limitations include a reduced humanitarian presence in Tigray since the end of the northern Ethiopia conflict, food and nutrition resources in short supply due to dwindling funding since 2022 and the recent US funding cuts, critical fuel shortages, and staff reductions or suspension of operations by some agencies.

Improved humanitarian access in eastern Amhara delivers much needed nutrition supplies to those in need

Throughout 2024, movement and access restrictions have obstructed humanitarian operations in conflict-affected areas, leaving populations without basic services like health care, education, and clean water. Bugna woreda was one such location, identified as severely food insecure and needing emergency response by the Amhara Disaster Risk Management Commission in April 2024, due to the **combined impacts of conflict and climatic shocks**, prolonged drought, recurrent floods and snowstorms.

An access breakthrough was achieved in December 2024, following sustained advocacy by OCHA and humanitarian partners, which led to the reopening of the road to Bugna after months of impasse. This allowed for a rapid scale-up in response efforts and partners have been providing life-saving assistance since.



What next?

Nutrition partners are urgently calling for scalable action, with a focus on **expanding assessments and response efforts**. Key recommendations include providing blanket nutrition supplies (BSFP, TSFP), deploying 19 new mobile health and nutrition teams in hard-to-reach areas, providing meals for caretakers of severely malnourished children, offering training to health workers, supplying essential equipment and implementing integrated support interventions.

More broadly, sustaining humanitarian access is critical. By March 2025, OCHA negotiated a significant expansion of humanitarian access in West Gondar, Central Gondar, South Gondar, East Gojam, West Gojam and, most notably, North Wello. However, criminal activity in the region also poses significant risks to humanitarian workers, with eight fatalities and 24 kidnappings reported in 2024, and three fatalities and three kidnappings in early 2025. In North Wello, some groups are exploiting the breakdown of law and order to extort both local populations and aid workers, particularly in hotspots like Mehal Sayint, Habru, and Gidan woredas, though incidents against aid workers have markedly diminished as a result of intensive access negotiations.

An immediate, scaled-up humanitarian response, coupled with a long-term commitment to peace and development, particularly in revitalizing agricultural production and rebuilding livelihoods, is essential to address the root causes of food insecurity and break the cycle of crisis.

Among others, UNICEF provided Severe Acute Malnutrition (SAM) supplies; the Ethiopian Red Cross Society allocated resources to restart ambulance services and provide ad hoc food items; WHO delivered medical supplies; WFP delivered nutrition supplies; while Plan International (PI), the Organization for Rehabilitation and Development (ORDA) and Afro-Ethiopia Integrated Development (AEID) supported the delivery to the most remote locations.

Major progress was also achieved for Raya Kobo woreda in March 2025, allowing humanitarian partners to access health centers in dire need of support. Two health centers have received long-awaited nutrition supplies, albeit limited, and further support is expected to follow.

However, the overall situation across the broader Amhara Region remains critical, with malnutrition worsening in other parts of North Wello, as well as in South Wello, North and South Gondar, and Wag Hamra. Some woredas were initially classified as lower priority (per mainstream Household Economy Analysis), but the number of people in need of urgent food assistance is growing rapidly. Screening coverage is very low suggesting the true scale of the crisis may be even worse. Despite signs of a better harvest this year compared to last, food markets are under strain, with rising prices and a reduced availability of essential items. Challenges in the implementation of the Productive Safety Net Program and the US funding suspension have left many without regular food support. Additionally, the combination of limited nutrition funding, insufficient partner presence, insecurity and access constraints (with increased fighting reported in recent weeks) is severely impacting the response.

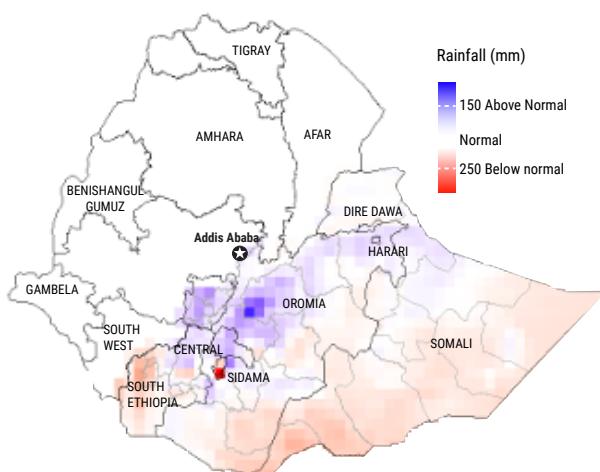
4 Southern regions face a lack of rains as humanitarian teams ramp up response

As expected, southern and south-eastern parts of Ethiopia received poor rainfall during the October–December 2024 rainy season. The Deyr rains were delayed by over three weeks and were both below normal and erratic, with poor geographical distribution. As a result, surface water sources have run dry in several locations, leaving the population unable to access sufficient and safe water for both human and livestock consumption.

Spring 2025 rainfall in southern and north-eastern Ethiopia is anticipated to be below average, according to the spring forecast from the IGAD Climate Prediction and Applications Centre. Projections also indicate a higher likelihood of warmer-than-normal conditions, which could increase soil moisture loss from evapotranspiration. As a result, the need for food and water assistance would likely rise significantly by mid-2025.

In October 2024, the Ethiopian government, along with humanitarian partners, issued a Call for Anticipatory Action to ensure that timely support reached affected communities before the full impact of the drought. The United Nations allocated US\$18 million to support the response, with US\$10 million from the Central Emergency Response Fund (CERF) and US\$8 million from the Ethiopia Humanitarian Fund (EHF).

As a result, 12 NGO partners and five UN Agencies have been working closely together since October 2024 to deliver a comprehensive response across Somali, Oromia and South Ethiopia regions. More than two million people are expected



to benefit from these anticipatory action projects.

In Somali region, about 1.9 million people are already facing severe water shortages, according to regional authorities. The water demand has been further exacerbated by malfunctioning water infrastructure, largely due to the long-term degradation of boreholes' performance. Livestock are migrating because of lack of water and pasture, and production, especially milk yield, is declining due to the animals' poor health and the long-distance travelled in search of water and grazing land. Localized diseases like Foot-and-Mouth issues are reported. Sufficient nutrition supplies are available, but transportation to remote facilities is a challenge. UNICEF is making progress on water scheme rehabilitation, but pressure on existing water schemes is expected to increase. Diarrhea, measles, and dengue outbreaks are ongoing public health challenges.

Similar dry conditions are reported in southern areas of Oromia Region, particularly Borena Zone. As a result, pastoralists have been forced to migrate in search of water and pasture. A report from the Oromia Region Water and Energy Bureau (ORWEB) dated 6 March 2025 confirmed drought-like conditions in Borena, East Borena, Bale, and East Bale zones where some 918,000 people (67 per cent of the population in the affected zones) are facing critical water shortages, while an estimated 490,000 students in 1,040 schools across the four zones are at risk of dropping out. A December 2024 report from FEWS NET highlighted the cumulative effects of the drought since 2020, noting significant shifts in livelihood strategies, with many households transitioning from pastoralism to agriculture. But agricultural production has also been impacted by the failed rains, worsening the crisis. In addition, the spread of Foot-and-Mouth disease has affected livestock across all woredas. Emergency screenings indicate rising levels of acute malnutrition across Borena Zone.

Dry conditions persist in two woredas of South Ethiopia Region—Dasenech and Benatsemaye. Emaciated livestock have started to migrate in search of water and pasture. Normal rainfall was reported in the second week of March, which, if sustained, is likely to improve water availability in the area.

What next?

- Accelerate the implementation of remaining anticipatory action activities in all targeted areas prioritizing water, food, nutrition, health care and livestock support for the impacted communities.
- Expand coverage to new areas and monitor the upcoming rainy season: The WASH cluster has identified new locations facing severe water shortages beyond the original targets set in the anticipatory action plan. Immediate expansion of the response is critical to prevent further deterioration. All ongoing activities which can be geographically retargeted or adjusted based on the current situation should be prioritized, while considering the anticipated below-average spring rainy season.
- Strengthen operational capacity: The limited partner presence in some key affected areas (Eerer, Nogob, Qorahe, Jarar, and Doollo zones) must be addressed to ensure a more effective response.
- Increase funding: A significant funding shortfall is limiting partners' ability to effectively address urgent health and water needs.

5 Over 87,000 people evacuated in Afar and Oromia due to seismic activity

More than 87,000 people in Afar and Oromia—approximately 32,620 in Oromia and 55,620 in Afar—have been evacuated to safer locations following a surge in seismic activity linked to magma movement in the Fentale volcanic complex in the Main Ethiopian Rift. The increased activity, which began in late December 2024, triggered a rise in earthquakes near the Dofen and Fentale volcanoes and led to the emergence of steam vents releasing gases and steam. Fearing the instability of infrastructure and a potential volcanic eruption, local authorities swiftly evacuated nearby populations.

The earthquakes caused significant damage to homes, health centres, schools, roads. Most evacuees are pastoralists or agro-pastoralists whose livelihoods depend on livestock, over 1.2 million of which (850,000 in Oromia and 414,000 in Afar), have also been displaced by the seismic activity. Widening fissures disrupted key routes and raised concerns over the safety of the Kesem/Sabure Dam and the Ethiopia-Djibouti railway.

Zonal Incident Command Posts (ICPs) in Awash (Afar) and Metehara (Oromia) are leading the response, with OCHA co-chairing efforts to streamline coordination. Humanitarian teams on the ground conducted a Multi-Sector Initial Rapid

Assessment (MIRA) to identify urgent needs, which is now guiding relief efforts.

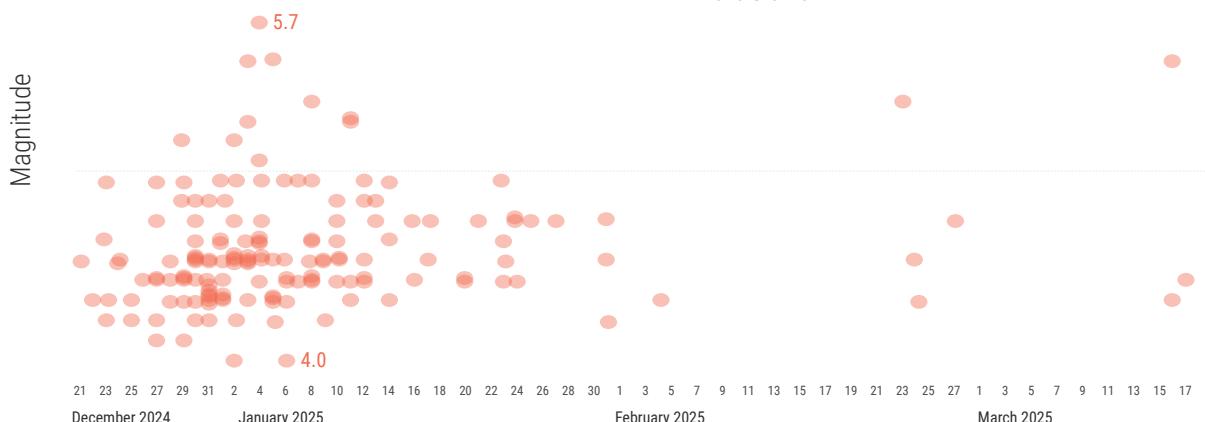
UN and NGO partners are supporting the Government by providing food, safe water, health and nutrition services, emergency shelter, and essential items. Efforts are also underway to resume education for affected children.

However, critical response gaps remain, particularly in Oromia, where the presence of humanitarian partners is limited, and response efforts are significantly lower.

Additionally, logistical and security challenges have complicated the delivery of essential assistance. The situation is further exacerbated by the USAID stop-work order and project terminations, which have led to a substantial decline in partner support in Afar.

Urgent needs include access to safe water and sanitation services, particularly the construction of emergency latrines, along with emergency shelter, essential items such as blankets and cooking materials, food and nutrition support, and health services.

For more information click here [Flash Update #4 - Seismic Situation in Afar and Oromia](#)



What next?

While seismic activity has significantly decreased, its unpredictable nature prevents evacuees from safely returning to high-risk areas. Transitioning to durable solutions remains essential. Immediate priorities and critical gaps include:

- **Water and sanitation services:** Access to safe water and sanitation is limited and must be rapidly enhanced.
- **Food assistance:** Challenges in the timely delivery of and access to food assistance must be addressed by resolving the underlying security and transportation issues.
- **Health services:** Urgent medical needs include treatment for diarrheal diseases, malaria, and measles, as well as the provision of essential medical supplies. The deployment of mobile health and nutrition teams is crucial.
- **Education:** Thousands of children have had their education disrupted, with many still out of school. Immediate needs include temporary learning spaces, school feeding programs to combat malnutrition, and scholastic materials.
- **Agriculture and livestock support:** Over 1.2 million livestock require urgent support, including animal health services & emergency feed supplies. Ensuring access to grazing land and water is critical to safeguarding pastoralist & agro-pastoralist livelihoods.
- **Shelter and relocation:** There is a need for environmentally friendly, high-quality shelter materials for evacuees due to the hot weather and prolonged stays at evacuation sites.
- **Essential non-food items:** Urgent provision of essential items, such as blankets, cooking materials, light sources, jerry cans, and water containers, is needed.
- **Nutrition:** Gaps in nutrition services, including shortages of essential supplies at treatment centres and limited partner engagement are hampering efforts to combat malnutrition.
- **CCCM:** There is currently no CCCM cluster presence in either Afar or Oromia. Effective camp management is essential to ensure the distribution of resources, protection of evacuated populations, and overall coordination of assistance.
- **Protection:** Key concerns include the safety and well-being of evacuees, child protection, gender-based violence response, and mental health support. Immediate implementation of protection services is critical.

6 Government and partners respond to cholera and malaria outbreaks

Ethiopia is currently responding to multiple health outbreaks, including cholera, measles and malaria*. The cholera outbreak resulted in over 27,000 cases in 2024 and 269 deaths.

Although 94 per cent of the cholera-affected woredas had the disease under control by the end of 2024, recent spikes are reported in Gambella and Amhara. Malaria claimed 1,342 lives in 2024, with over 10 million reported cases, primarily in Oromia and Amhara regions.

In Amhara, the recent cholera outbreak in conflict-affected West Gondar Zone has seen a spike, with at least 403 cases and four fatalities reported by the World Health Organization (WHO) from Bermil Giorgis Holy Water Site in Quara woreda and surrounding areas between 3 January and 11 March 2025. Cases originating from Quara continue to spread across the region and beyond. Zonal health and religious authorities anticipate further spike due to a continued influx of pilgrims – with many thousands incoming during the peak of the current fasting season – and a critical shortage of medical and WASH (water, sanitation, and hygiene) supplies. The area hosts both pilgrims and nearly 20,000 residents.

In early February 2025, OCHA and partners conducted a first access and security assessment mission to Quara, kick-starting a coordinated response from both humanitarian and government experts. Since then, the humanitarian health and WASH response in Quara have been actively supported by international NGOs such as Concern Worldwide and International Medical Corps, with enhanced collaboration with government responders. The Orthodox Church has also pledged its support, improving the management of the holy water site, and closing the most critical area which is directly linked to nearly all cholera cases.

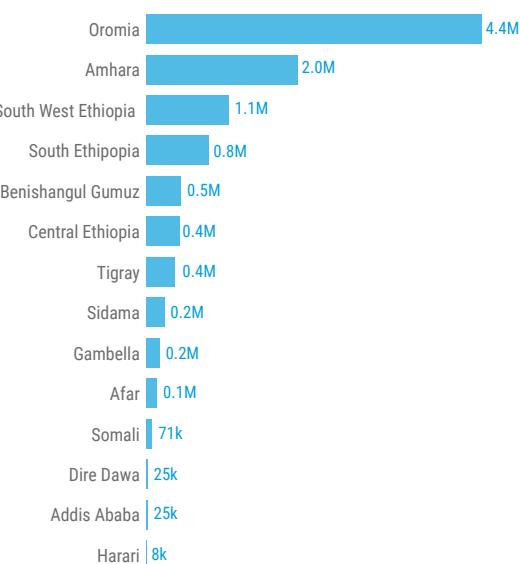
In Gambella Region, the first case of suspected cholera was reported on 11 February 2025 in Akobo woreda. Since then, more than 770 cholera cases and 24 deaths have been reported across 13 affected woredas. The Public Health Emergency Operation Centre was reactivated to coordinate surveillance and case management. Several gaps were identified in the response, including community awareness, WASH coverage and population movement.

Malaria remains a significant public health concern, with over 10 million reported cases and 1,342 deaths in 2024. Oromia, in particular, accounts for 42 per cent of the national caseload and has seen a sharp 223 per cent increase in malaria cases compared to 2023. The western zones of Oromia Region are the most affected, where ongoing clashes between government forces and non-state armed groups are displacing civilians and disrupting health, water and sanitation infrastructure. In addition, a funding shortfall for

malaria response in 2024 has led to the phasing-out of key projects. In Amhara, malaria cases have risen by 50 per cent annually over the past four years, with over 1.9 million cases recorded in 2024, or 20 per cent of the national caseload. The most affected areas are South and Central Gondar, Awi and East and West Gojjam zones. Challenges such as insufficient community-level reporting, resource shortages limiting partner operations, and difficulty reaching the most remote areas are hindering effective management and control of the outbreak. The Government of Ethiopia and partners activated the Malaria Incident Management System in 24 June 2024, targeting 222 high-burden woredas across 10 regions. Notable improvements have been recently registered in Horo Guduru Wollega Zone, western Oromia. About 300 trained volunteers were deployed to test, treat and conduct mass community awareness on malaria prevention, focusing on hard-to-reach areas. A 28 per cent reduction in new cases was registered following their deployment. The Ethiopia Humanitarian Fund has provided critical support to malaria outbreaks in Afar, Amhara, Oromia, South Ethiopia and Tigray regions. In addition, \$1 million in CERF funding to WHO has allowed the scaling-up of detection, investigation and response efforts for outbreak-prone diseases countrywide.

Continued efforts are essential to sustain the hard-won gains in the fight against both malaria and cholera. Better access to remote and conflict-affected areas is critical, and additional resources are needed to maintain and expand the response, reducing disease transmission and preventing further spread.

Malaria case distribution by region in 2024



* According to the World Health Organization (WHO), a cholera outbreak is confirmed when at least one locally acquired confirmed cholera case is detected in a surveillance unit, while a malaria outbreak is declared when the number of malaria cases in a specific area exceeds the typical level, based on historical data.

For further information, please contact:

Strategic Communications Unit
ocha-eth-communication@un.org



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