

# The Gambella region is host to about 30,000 conflict and disaster-induced internally displaced persons. While many are in a displacement situation for years, more than 3,000 persons safely returned to their places of origin in the Itang woreda in January 2020, while about 7,000 others were forced to flee their home in the Jikawo woreda in February. In addition, the regional government of Gambella provides asylum and protection to 320,000 South Sudanese refugees of both Nuer and Anuak ethnicity scattered in seven (7) refugee camps located in Itang, Pugnido and Dimma.

RULE OF LAW				
Local authorities / Administration	The lowest administrative level in the Gambella regional state is the kebele, which is under the responsibility of the woreda. The woredas are run by woreda administrators. Like the structure at federal level, each woreda has an elected council.			
Civil status and documentation	As far as life events registration and documentation are concerned, one has to report to the desk for vital events (birth, marriage, death) in the woreda of residence, where one can register child birth and obtain a birth certificate. The same desk is in charge of issuing identity cards, which are in fact residence identity cards. These two documents constitute the first step to obtaining a national passport, which is issued by the regional division of			

	the Immigration Nationality and Vital Events Agency (INVEA). It has put in place a new system as of 19 May 2020 to shorten the time it takes to get a new passport within one month. The new system will also allow people with an urgent need to get new passports within five days. It should be noted that fees for a passport are much higher (600 ETB) than the ones for civil status documentation, which are less than 50 ETB.
Access to justice	Gambella Regional Supreme Court, High Court, and First-Instance Court is part of Gambella Regional Court structure established by the constitution. Supreme Court is situated in Gambella town and has final jurisdiction over State laws to handle both criminal and civil matters. Gambella Region High Court is established in Anuak, Nuer, Majang Zones and one in Gambella town itself to adjudicate on cases. State First Instance Courts are established at Woreda/district) level.  Sharia Court which apply Islamic law is the only religious court which have been officially established at the Federal and State level in Ethiopia. Sharia Court apply Islamic law and have their own appellate system. Aggrieved parties can opt to voluntarily submit to the jurisdiction of Sharia court, or the dispute can be redirected to the regular court system. Customary court is not established by law, despite their use and recognition in the community. The authority of these court stems from tradition and local customs. These courts evolved from traditional elder council, which do not have legal authority, but carry moral force and still operate in rural areas of the region. With the creation of Kebele Administration in each village, customary courts are gradually phasing out in favor of Social courts.  Social Courts are established at Kebele level, the lowest administrative level of the Government. Social Courts are not established under the law. They handle cases related to small claims and family matters. Their decisions can be appealed to the First Instance Court.  In line with the above, there is an established formal and informal court structure within Gambella Region to adjudicate on cases of any nature arising from criminal and civil matters. The returnees will be able to seek legal remedies in courts of law in case of any dispute.

SECURITY				
General	The overall security situation in the Region remains unpredictable and volatile. The situation in Gambella has been very tense over the past year, due to unsolved ethnic tensions between the Anuak and Nuer population. Clashes between both groups have occurred on a regular basis creating security and access challenges for humanitarian partners. Access to land and water for livelihoods (agriculture and pastoralism in particular) figure prominently as main sources of conflict. The region is vulnerable to cross-border incursions by the Southern Sudanese Murle and the Lou Nuer, who regularly raid cattle in remote woredas in the western part of the region.			
Law enforcement	In the region, there are Ethiopian National Defense Forces, regular police, special force, and local militias. They all have mandate to gurantee maintenance of law and order to the public and to protect constitutioal violence and disorders.			
Risk related to	No reports on risk of non exploded devices .			
non-exploded				
devices				

## **PROTECTION**

## Persons with Specific Needs

Persons with specific needs and particularly persons living with disabilities can get support through the Regional Bureau of Labour and Social Affairs (BOLSA). BOLSA, in collaboration with Gambella hospital organizes rehabilitation services for persons living with disabilities. Besides BOLSA, Disability Persons Organization (DPO), a national wide association, has also an office in Gambella and conducts advocay and provides services to persons living with disabilities. These two entities deal with disability management and BOLSA advises and supports also any other kind of vulnerability.

The Gambella population is young: 12 per cent is between 0 and 4 years of age and 39 per cent is between 0 and 17 years of age. Children residing in Gambella are less likely to be deprived of a higher number of deprivations than the national average, and this likelihood has decreased significantly since 2011. The 2019 Ethiopian Demographic and Health Survey shows a median age at first marriage of 17.3 years among women aged 20-49 years in Gambella. The prevalence of child marriage is 47%, which is higher than the national average, and median age of first marriage is 17.4 in the region.

The practice of female genital mutilation/cutting (FGM/C) is less widespread in Gambella than other regions in Ethiopia. FGM/C incidence among women (15-49 years) in 2016 was 33 per cent, nearly half the national average (65 per cent). In 2016, 3 per cent of girls under 14 were circumcised compared to the national rate of 16 per cent. FGM/C has declined with 2.3% in the past 25 years, but a mere 0.1% in the past 10 years.

Only 4% of households are in the Productive Safety Net Programme (PSNP) compared to 11% of households at the national level in 2011. Urban PSNP started in 2017/18 with 5,054 total beneficiaries of which 16% (808) are under the permanent Direct support (DS) and 5.4% are lactating and pregnant women transferred temporarily to DS (273 women). Nearly 8 out of 10 children lack access to 3 or more basic needs and services. Social protection programs, such as the PSNP, make a linkage with basic services, like nutrition, health care and education.

## **Child Protection**

The rate of children under 5 years who had their birth registered with civil authorities in Gambella is about 2.5 per cent, of whom 1.6 per cent had a birth certificate. As of June 2020, 249 registration centers in Gambella were providing vital events registration services. Coverage/availability of civil registration services is 84 per cent compared to the national average at 89 per cent. In 2011 E.C. (2018/19), 21,323 births were registered in Gambella, of which 53 per cent were registered within 90 days, 36 per cent were registered after 90 days but within one year, and 11 per cent were registered after one year (backlog). 57. In Gambella, 8 per cent of registers have quality issues. Awareness about civil registration in rural communities in Gambella is still very low.

Children in Gambella continued to be at heightened risk of child marriage, exploitation including child sex survivor, abduction as a result of recurrent cross border Murle attack, child labor exploitation in Okugo linked with mining sites in the woreda, and other forms of child abuses.

The existing system of child protection under BoWCA, which holds the overall mandate for protection of children, is the central actor, under which involved stakeholders route cases to different government sectors and non-government and community services. The sector lacks adequate resources, coupled with fragmented programming and service delivery, gaps in care, poor coordination between service providers, duplication of services at times, and poor geographic coverage. There is also less commitment in ensuring right based approaches among political leaders compared to other regions in the country

## **SGBV**

Just like the other regions of Ethiopia the SGBV practices are inherent and long-standing challenge in the region. The region has conservative social cultural practices that is patriarchal with entrenched power imbalance and gender inequality against women and girls. Most reported type of SGBV include, physical violence (mostly intimate partner

violence), sexual violence (including rape), parents marry off adolescent girls from the age of 14 years with very low education completion rates.

Women, children and youth offices are responsible offices to receive, refer and establish linkages with other service centers such as Health facilities, Police office, justice and security, Court, Trade and industry and education. Non-Governmental Organizations working on SGBV and related concerns at district level are: EECMY-DASSC-EGBS-BO, IMC, UNFPA (through BOWCYA), UNICEF (through IMC), Plan International, Amref. Gambella One Stop center (OSC) in Gambella hospital is the only service center providing integrated and comprehensive SGBV services. BOWCYA is responsible for SGBV concerns, while one gender mainstreaming focal person is assigned in each bureau including Health bureau, Health facilities, and police commission.

## Social Cohesion/Land Issues

Natural resources such as land, water, forests, fisheries and mineral resources (oil, gold, etc.) are abundant in the region. Despite this « abundance », livelihoods and subsistence are still deeply marked by strong vulnerabilities. These vulnerabilities are intimately related to different factors amongst which are long-lasting civil conflict, forced migrations, dependence on foreign aid and asymmetric power relations. The arrival of the (trans) national companies exacerbated the pre-existing resource conflict between the Anuak and Nuer. The implication of the nexus between the large-scale land transfer and resource based conflict in the region resulted de-peasantisation and proletariansation of the rural poor in the region. Integrated Urban and Rural Landuse Development (ILDP) has been prepared by Addis Ababa University. ILDP is aimed at guiding the sustainable transformation of rural and urban lives and land resources of the people and envirionment by providing coordinated, all serving, aligned and harmonized land-use plans that avoided conflict between the different land-use types.

## Food Security and Livelihoods

Livestock and crop production are the main means of livelihoods for the majority of the residents and to some extent fishing and bee keeping. Flood recession agriculture is common, particularly maize and soghum, being widely practiced by local people along the rivers. The major rivers are the Baro, Akobo, Alwero and Gillo. All these rivers have major tributaries and are large enough for the local population to depend on. Despite its huge natural resources potential and opportunities the region is one of the poorest in the country. The overall unemployment rate in Ethiopia stands at 19.10 %.

The Commercial Bank of Ethiopia (CBE) has branches where transactions can be made. However, one needs proper identification documents to open a bank account. There are also functioning ATMs from which cash can be withdrawn. However, in order to assist Ethiopians to return home with the support of UNHCR and ARRA, exceptionally, the Commercial Bank of Ethiopia (CBE) has accepted to make use of LPs as temporary identity document for the opening of bank accounts with the expectation that returnees will soon obtain their identity cards from the relevant authorities. In addition to the CBE, as every regional state in Ethiopia, the Gambella region has its own micro-finance institution that facilitates transfers of cash and uses mobile money among other means of transfer. Returnees are advised not to bring local currency of their countries of asylum to Ethiopia, as they will not be able to change it into ETB.

## Health Health Health situation in the region are continuously threatened by recurrent emergencies. Factors such as hot climate, poor hygiene and shortages of safe water during the dry season amplify the risk of epidemic diseases, such as acute respiratory infection, malaria and measles, relapsing fever and water-borne diseases, for example acute watery diarrhoea. The region faces a health problem with HIV, particularly in Dima and Abobo.

There are 3 levels of health facilities that could be considered for returnees: In all kebeles, there are health post that provide outreach services, including prevention and referral services. The health posts serve as a link between the community and the higher health facilities. Minor diseases are also treated at the health posts by health extension workers.

- At the woreda level, there are health centres that provide comprehensive primary health services both preventive and curative, in-patient and out-patient services. The health centres also provide vaccination and psychosocial support. However, not all health centres have psychiatric nurses. Services are provided by general practitioners and public health officers.
- At the zonal level, one can access the General Hospitals to which cases needing surgery or obstetrical care, as well as other specialized treatment are referred to.

Payment at public health facilities is affordable. A consultation at a public health facility is between 5 - 20 ETB. An average cost for treatment at outpatient level is between 150 - 200 ETB.

It is advisable that persons with from a chronic medical condition that requires continuous treatment, returns with 3 months of supply of medicines. These conditions include tuberculosis, HIV/AIDS, hypertension, diabetes, asthma, mental illness etc. The treatment can be done through available services at the health centres.

It has been reported in April 2020 that there has been a re-emergence of Guinea Worm Disease (GWD) outbreak in Gog woreda, Gog Dipach kebele, in Dule sub district of the regional state. Seven people are infected by GWD in this area so far. The region has been working hard to see the eventual eradication of the disease, such as abating of ponds, providing potable water to remote areas as well as providing community awareness raising programs. For more than 27 months there has not been known cases on humans although the disease has been affecting domestic and wild animals such as dogs and baboons. Services at private clinics are much more expensive than at public health facilities.

As the ongoing COVID-19 pandemic affected all regions in the country, 33 cases of COVID-19 have been identified in Gambella Region with 97% of them being residences of Gambella Town. Gambella Region activated its Incident Management System (IMS) under the regional Public Health Emergency Operation Center (PHEOC). The WHO and other partners are currently supporting in scaling up preparedness efforts and implementation of recommendations suggested by the International Health Regulations (IHR) Emergency Committee to make sure that COVID-19 is put under control or limit its impact on the life of both refugees and nationals in Gambella.

## Water, sanitation and hygiene (WASH)

Refugees and the surrounding host communities are supplied safe water for domestic use from either boreholes or treated river water through communal tap stands which are connected to a network of piped water scheme per camp. All the 7 camps meet the minimum emergency threshold of 15 litres per person per day (I/p/d) after two of the largest camps, home to 47% of the refugee population got a boost from the activation of emergency water trucking contributing to 20-30% of the water supply. Meanwhile more sources are being developed to cover the gap and phase out the unsustainable water trucking. Gambella town however faces a strain as the current water treatment plant can only serve about 30% of the bulging resident population. Lack of ownership of water schemes by communities has contributed to recurrent breakdown of water points which necessitates frequent repairs. Whenever insecurity indents occur around water sources, the operation of water supply gets impeded.

A third of the households own a family latrine. However, the use of latrines is slightly more than two thirds which implies that the available facilities are shared amongst several families. Unavailability of public latrines aggravates open defecation, and in areas where they are available, poor maintenance discourages people from using them. 61% of

households have a place for washing hands (4% fixed and 57% mobile). On a monthly bases, during general food distribution, UNHCR supports the refugees with at least 250 grams of soap per person for hygiene use. The support was doubled to reach 500 gm/p/month to enhance hygiene measures in response to the COVID-19 pandemic. Whereas almost 90% have knowledge on critical times for hand washing, the observed actual practice does not match as it is slightly above 50% Children and adults are susceptible to other health risks in their dwellings, including from inadequate housing conditions and indoor pollution caused by using solid fuel for cooking inside the house. Sanitation in institutions of learning remains a major infrastructural gap including lack of the menstrual hygiene management facilities thereby affecting attendance and in the longterm, retention of female students and teachers. Pre-primary and Primary education are under the responsibility of the Regional Education Bureau. In each woreda, there is an Education Office that oversees the overall management of Education with total of 264 primary in each woreda in the Gambella region. In Ethiopia, enrolment for primary and secondary education is free of charge, however, parents need to cover the cost of educational materials and uniforms. From grade 1 to grade 4, the language of instruction is Nuer, Anuak and Majang. As far as tertiary education is concerned, there are two paths/options: the first option is for regular students who completed grade 12; they will be admitted to national examination of Ethiopian Higher Education Entrance Qualification Examination (EHEEQE), while the second option Education is determining equivalency of certificates obtained from foreign higher education institutions while in asylum. Candidates in this group, need to get equivalency assessment or verification from the Higher Education Relevance and Quality Agency (HERQA). Successful candidates who scored above the minimum cut off points will be placed in public Higher education institutions. The placement of the students is centrally managed by Ministry of Science and Higher Education. Students can enroll at higher education institutions (Public universities, TVET, colleges) either through signing of a cost-sharing with the Government for the tuition fee 75 % of which is covered by the Government or under private sponsorship Lower percentage of housing units with corrugated iron roof are observed. This region has a hotter climate and a nomadic way of life. Therefore, use of corrugated iron for roof will aggravate the hotness and/or make it difficult to transport during evacuation. People make **Shelter** their houses, huts or tukuls from mud and wood or highly ventilated twigs with something to cover from the top to withstand the heat. The region evinced nearly an equal proportion of the housing units to have a thatch roof. Over 80% of housing units have mud/earth floor.

# Many actors both humanitarian and development have on-going activities that support the Government's efforts towards the improvement of the population's well-being in the Gambella region. The main sectoral activities that UN Agencies and NGO partners engage in are Protection, WASH, Health, Nutrition, Education, Agriculture and Food. In the north eastern part of the Somali regional state, UNHCR has a Sub-Office in Gambella, covering Fugnido and Dimma field offices. Returnee monitoring activities whenever possible can be carried out by the Field Units with the support of the Gambella Sub Office in their respective areas of responsibility.

### **REINTEGRATION GRANT INFORMATION**

The provision of cash assistance in the country of origin aims to address the basic needs of the returnees during the first six months, after arrival. A Minimum Expenditure Basket has been determined in Ethiopia, and the multipurpose cash grant is calculated based on a specific sectoral approach to respond to the needs of a family in terms of food, shelter (rent), core relief items and education. Modality and amount of payments (in Ethiopian Birr) are as follows:

- -One-time cash-over-the-counter through CBE upon arrival in Ethiopia (around 10% of total amount depending on specificities of each household)
- -Two bank account transfers (after a week and three months, around 40% and 50% of total amount respectively)

MPG (Multi Purpose Cash Grant)	Amount
Multi purpose cash grant for household of 1	850
Multi purpose cash grant for household of 2	1170
Multi purpose cash grant for household of 3	1540
Multi purpose cash grant for household of 4	1825
Multi purpose cash grant for household of 5	2160
Multi purpose cash grant for household of 6 and above	2560

**MPCG** 

Education costs (Uniform and school materials) per child 3 -18 years			
	ETB	USD	
Education costs (Uniform and school materials)	900.00	35	
Persons with Specific needs			
	ETB	USD	
Extra support to persons with specific needs		100	

Transportation for each HH member				
	ETB	USD		
Transport costs	1000	36.54316		

## **CONTEMPORARY ISSUES**

COVID-19

The first Coronavirus case in Ethiopia was confirmed on 13 March 2020. The number of patients are on the rise from day to day. The Federal and state governments as a result have taken more and more restrictive measures to contain the Coronavirus. The country's borders have been closed. The Ethiopian Airlines has suspended all international flights, save for cargo flights. Individuals can only enter into the country on the condition that they agree to be quarantined for 14 days, at their own expense. The states are also taking similar actions. A State of Emergency has been declared by the Government in an effort to limit the spread of the Coronavirus. Bordering regional states have established quarantine centers at border crossings in response to illegal entry of migrants. Refugees are not advised to spontaneously return due to lack of services at the border and risk of ending up facing other protection risks. COVID-19 impacts are:

Macroeconomic context and public finance: i) decline in economic growth. ii) decline in GDP growth rate iii) increase in prices due to reduced offers. iv) government revenue reduces due to less tax payment. v) less foreign exchange earnings required for much needed imports, plus hits on remittances and the tourism sector will also affect foreign

exchange earnings hindering the ability to service debt payments entailing a mortgaging of the future.

Health and Nutrition: i) increased rate of illness is expected to put pressure to the quality of health care in Ethiopia with potential service saturations and severe limitations for poorer households interms of affordability and accessibility. ii) disrupted health services for non-COVID-19 related needs. lii) Malnutrition due to: a) household food insecurity due to loss of income b) caring practices for children ad women are likely to go down as livelihoods are affected c) access to health services may be disrupted due to health workers' limited access to health facilities or lack of motivation or fear of infection.

WASH: i) majority of poor households are most at risk of contracting COVID-19 due to poor sanitation practices and hygienic conditions. ii) Movement restrictions will disproportionately affect poor households in underserved areas, who depend on daily wages to pay for safe drinking water for their households amongst other daily needs

Education: i) the most vulnerable and poor children will not benefit from home-schooling during school closures, hence widening inequalities in the learning gap between the lowest and highest quintiles. iii) school closures will lead to decline in food intake and nutrition, possibly increase school dropouts and adversely impact human capital development iv) school feeding programme has been suspended due to school closures

Social Protection: i) COVID-19 will likely limit control and surveillance operations as well as the deployment of experts to the field to combat the desert locust upsurge. ii) rise in the price of key commodities, driven largely by behavioural changes in urban areas – food hoarding, etc., iii) widespread loss of income and deeper levels of poverty as social distancing intensifies which has an impact on the service industry, tourism and for the sizeable self-employed population. The combination of labor constraints and limited access markets will drive poverty and exacerbate food insecurity.

Child Protection: i) new stressors on parents and child caregivers who may have to find new childcare options or forgo work. ii) disease control measures that do not consider the gender-specific needs of women and girls may increase their protection risks and lead to adverse coping mechanism. iii) heightened risk of domestic violence-in those settings where those who live with domestic abuse could be at greater risk of violence/abuse — particularly women, children, those with disabilities. iv) prevention and response services will be less accessible to victims of abuse and violence v) school closure puts additional burden of care on women and hence may affect their mental and physcial wellbeing.

## Locust invasion

About one million individuals have been affected by the desert locust invasion and require emergency food assistance. Of these, about 390 000 are in Somali, 360 000 in Oromia and Dire Dawa city (combined), 100 000 in Afar, 72 000 in Amhara, 43 000 in Tigray and 13 000 in Southern Nations, Nationalities, and Peoples (SNNP) region, reported in April 2020. Swarms declined in the South due to control and breeding while mature swarms moved into the nearest (Afar) and eastern (Somali) regions. Hopper bands continued to mature near Dire Dawa as well as in adjacent areas of northwest Somali. In central Somalia, mature adults are present near the Ethiopia border in Galguduud region. Huge swarms of locusts, the size of a city, forced more than 15,000 people to flee their homes in Southern Oromia region, the Wachile area affecting 12 villages in the Month of May 2020. These locusts have already destroyed large swaths of food and pasture in the region. Experts have described the ongoing desert locust infestation in the Horn as the worst in 25 years. Widespread rainfall in late March created an ideal environment for locust breeding. The situation may get worse when the insects mature and grow wings. The desert locust can fly up to 19 kilometers per hour and cover up to 130 kilometers per day.

Ethiopia is aerial spraying the swarms in three locations: Arba Minch in Southern Ethiopia; Jigjiga, in the Somali region and Dire-Dawa in the eastern part of the country. Huge of swarms of locusts have been reported in six woredas of Gambella region on 19 May 2020. The COVID-19 pandemic has complicated efforts to fight the locusts, mainly by delaying deliveries of pesticides. It is public knowledge that the restrictive measures have been taken while the country is planning to hold its sixth national elections. Clearly, more restrictive measures that the federal and state governments are to take as the impacts of the pandemic progressively become severe will make the preparations towards the elections practically impossible. Political parties will not manage to campaign or hold meetings or public rallies which are critical pre-elections democratic activities which determine the legitimacy of election results. The National Electoral Board of Ethiopia (NEBE) will not manage to make the necessary preparations to successfully administer the elections. Federal and state **Election** authorities will also be unable to carry out functions that are critical for peacefully holding the elections since they will be preoccupied with fighting the pandemic. Moreover, voters will not be able to come out and vote in large number on election-day without taking a grave health risk, unless the pandemic is contained by then. Electronic or remote voting is not an option in Ethiopia for the simple reason that the country does not have the necessary technology and wherewithal to do this. Most of the opposition groups were quick to signal their support for the postponement. There is no clarity, whether election would take place without significant violence accompanying the polls.