

# *F*ritrea

2005



**Consolidated Appeals Process (CAP)**





# Eritrea

2005



SVEN TORFINN / ERITREA / 2004

**Consolidated Appeals Process (CAP)**



## Consolidated Appeals Process (CAP)

The CAP is much more than an appeal for money. It is an inclusive and coordinated programme cycle of:

- strategic planning leading to a Common Humanitarian Action Plan (CHAP);
- resource mobilisation (leading to a Consolidated Appeal or a Flash Appeal);
- coordinated programme implementation;
- joint monitoring and evaluation;
- revision, if necessary; and
- reporting on results.

The CHAP is a strategic plan for humanitarian response in a given country or region and includes the following elements:

- a common analysis of the context in which humanitarian action takes place;
- an assessment of needs;
- best, worst, and most likely scenarios;
- stakeholder analysis, i.e. who does what and where;
- a clear statement of longer-term objectives and goals;
- prioritised response plans; and
- a framework for monitoring the strategy and revising it if necessary.

The CHAP is the foundation for developing a Consolidated Appeal or, when crises break or natural disasters occur, a Flash Appeal. The CHAP can also serve as a reference for organisations deciding not to appeal for funds through a common framework. Under the leadership of the Humanitarian Coordinator, the CHAP is developed at the field level by the Inter-Agency Standing Committee (IASC) Country Team. This team mirrors the IASC structure at headquarters and includes UN agencies, and standing invitees, i.e. the International Organization for Migration, the Red Cross Movement, and NGOs that belong to ICVA, Interaction, or SCHR. Non-IASC members, such as national NGOs, can be included, and other key stakeholders in humanitarian action, in particular host governments and donors, should be consulted.

The Humanitarian Coordinator is responsible for the annual preparation of the consolidated appeal *document*. The document is launched globally each November to enhance advocacy and resource mobilisation. An update, known as the *Mid-Year Review*, is presented to donors in June of each year.

Donors provide resources to appealing agencies directly in response to project proposals. The **Financial Tracking Service (FTS)**, managed by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), is a database of donor contributions and can be found on [www.reliefweb.int/fts](http://www.reliefweb.int/fts)

In sum, the **CAP is about how the aid community collaborates to provide civilians in need the best protection and assistance available, on time.**

### ORGANISATIONS PARTICIPATING IN CONSOLIDATED APPEALS DURING 2005:

AAH	CPA-LIRA	HIA	Non-Violence Int'l	TEWPA
ABS	CPAR	Horn Relief	NPA	UNAIDS
ACF/ACH	CPCD	HWA	NRC	UNDP
ACTED	CRC	IFRC	OCHA	UNESCO
ADRA	CREAF	ILO	OCPH	UNFPA
Africare	CRS	IMC	OHCHR	UN-HABITAT
Alisei	DDG	INTERMON	Open Continent	UNHCR
AMREF	DENAL	INTERSOS	Orphan's Aid	UNICEF
ARC	DRC	IOM	OXFAM-GB	UNIFEM
Atlas Logistique	EMSF	IRC	PAPP	UNMAS
AVSI	ERM	IRIN	PIN	UNODC
CAM	FAO	Islamic Relief	PRC	UNRWA
CARE Int'l	Fondn. Suisse Déminage	JVSF	RUFOU	UNSECOORD
CARITAS	GAA	KOC	SBF	VESTA
CEASOP	GPI	LIBA	SCF / SC-UK	VETAID
CESVI	HA	LSTG	SCU	WACRO
CIRID	HABEN	MAG	SERLO	WANEP/APDH
COLFADHEMA	Handicap Int'l	Mani Tese	SFP	WFP
COMED	HDIG	MAT	Solidarités	WHO
COOPI	HDO	MDA	TASO	WV Int'l
CORDAID	HFe.V	NE	TEARFUND	

# TABLE OF CONTENTS

---

<b>1. EXECUTIVE SUMMARY</b> .....	<b>1</b>
<i>Table I. Summary of Requirements – By Appealing Organisation and By Sector</i> .....	<i>2</i>
<b>2. 2004 IN REVIEW</b> .....	<b>3</b>
2.1 LESSONS LEARNED .....	6
<b>3. THE 2005 COMMON HUMANITARIAN ACTION PLAN</b> .....	<b>7</b>
3.1 THE CONTEXT AND ITS HUMANITARIAN CONSEQUENCES .....	7
3.1.A <i>The context</i> .....	7
3.1.B <i>The humanitarian consequences</i> .....	12
3.2 SCENARIOS.....	14
3.3 STRATEGIC PRIORITIES FOR HUMANITARIAN RESPONSE.....	14
3.4 RESPONSE PLANS .....	17
3.4.A <i>Agriculture (includes food security)</i> .....	17
3.4.B <i>Coordination and Support Services</i> .....	18
3.4.C <i>Economic Recovery and Infrastructure</i> .....	20
3.4.D <i>Education</i> .....	21
3.4.E <i>Family Shelter and Non-Food Items (NFI) (includes transport costs)</i> .....	23
3.4.F <i>Food (includes transport costs)</i> .....	23
3.4.G <i>Health (includes reproductive health, nutrition, psycho-social support)</i> .....	25
3.4.H <i>Mine Action</i> .....	27
3.4.H <i>Mine Action</i> .....	27
3.4.K <i>Water and Sanitation</i> .....	28
3.4.L <i>Multi-sector (includes ONLY multi-sector refugee assistance)</i> .....	30
<b>4. STRATEGIC MONITORING PLAN</b> .....	<b>33</b>
<b>5. CRITERIA FOR PRIORITISATION OF PROJECTS</b> .....	<b>34</b>
<b>6. SUMMARY: STRATEGIC FRAMEWORK FOR HUMANITARIAN RESPONSE</b> .....	<b>35</b>
<i>Table II. Listing of Project Activities - By Appealing Organisation</i> .....	<i>37</i>
<i>Table III. Listing of Project Activities - By Sector</i> .....	<i>40</i>
<b>ANNEX I. DONOR RESPONSE TO THE 2004 APPEAL</b> .....	<b>43</b>
<b>ANNEX II. ACRONYMS AND ABBREVIATIONS</b> .....	<b>55</b>

PROJECT SUMMARY SHEETS ARE IN A SEPARATE VOLUME ENTITLED “PROJECTS”



## 1. EXECUTIVE SUMMARY

Five years after the 1998-2000 border war with Ethiopia, Eritrea continues to endure its aftermath – destroyed houses, mined villages, shattered livelihoods, hunger and malnutrition. With the travails of post-conflict resettlement, the period following the war has heralded a period of fragile peace, great hardship and competing urgent needs. Displacement of persons from their homes, loss of assets and economic impoverishment have been compounded by chronic drought resulting in five consecutive failed harvests and major losses in livestock. Repeated poor seasonal rains in 2004, culminating in food insecurity, indicate another year of crisis, the scale of which is larger than last year's and is further exacerbated by diminishing coping assets in both rural and urban areas. Eritrea continues to require outside assistance, however, the international community's response, especially to critical non-food requirements, has declined from 57% in 2003 to 38% in 2004.

Some 2.2 million persons out of a total population of 3.8 million<sup>1</sup> are unable to feed themselves. In 2004, of the 1.9 million vulnerable persons requiring food aid, only 1.3 million received it. Total food aid needs, taking into account carry-over stocks and commercial imports, have been identified as 505,000 metric tones (MT). Of this total, 384,000 MT is the emergency food aid requirement; of which the World Food Programme (WFP) will resource 262,000 MT. Food shortages are resulting in abnormal grain price increases, which in turn are exacerbating inflationary pressures. Thousands of households require seeds and tools to augment their agricultural production as well as livestock feed and healthcare. These factors, while steadily increasing the number of people below the poverty line, have repercussions on the low nutritional status of women and children and food security in general.

Malnutrition continues to plague Eritreans, with 10-20% chronic malnutrition cases among infants and children in three of the country's six regions. In addition, Eritrea has one of the highest maternal malnutrition rates in the world at 53%. The need for food aid, clean water, increased supplementary and therapeutic feeding and maternal healthcare remains acute.

Large-scale pending returns of increasingly restive internally displaced persons (IDPs) and refugees are a critical characteristic of this crisis. Over 70,000 IDPs and expellees remain temporarily in unsustainable camps. The Government has recently committed itself to the return and resettlement of 30,000 IDPs and expellees, for which funding is critical. Over one million Eritrean IDPs and refugees who have returned to their home villages since the end of the border conflict are unable to restore their livelihoods and remain dependent on humanitarian assistance. 20% of areas for IDP return are mine-infested, rendering de-mining activities a key priority.

The unresolved issue of the demarcation of the border with Ethiopia continues to demand the attention of peace-making and humanitarian organisations. If hostilities resume, the Country Team and its partners will face even greater emergency response challenges.

Scarce resources have prevented the Government from meeting the enormous needs of its people and the country remains heavily dependent on food and non-food assistance, of which the Consolidated Appeals Process (CAP) covers approximately 50%. While the Common Humanitarian Action Plan (CHAP) goals of saving lives and alleviating suffering are achieved through direct humanitarian activities, the most vulnerable would be at risk if the required assistance is not provided.

Over the years, humanitarian agencies have responded to the crisis in the country with several interventions. In 2005, the humanitarian response must include greater investment in health, water, durable shelter, sanitation and support for internally displaced persons, if people are to recover their dignity. The United Nations Country Team (UNCT) in partnership with non-governmental organisations (NGOs), will work together with the Government to provide emergency assistance to vulnerable Eritreans in order to: prevent high levels of acute malnutrition through the provision of food aid and extensive supplementary and therapeutic feeding; ensure basic survival of highly vulnerable groups by providing access to basic services; provide assistance, protection and seek sustainable durable solutions for IDPs, expellees, returnees and refugees; strengthen de-mining activities; and enhance coordination structures and the implementation capacity of Government counterparts and civil society involved in the delivery of humanitarian assistance. The UNCT and participating NGOs are seeking a total of **US\$ 157,151,179** to fund 24 projects in ten sectors for 2.2 million Eritreans in 2005.

---

<sup>1</sup> National Statistics Evaluation Office 2003 Living Standards Measurement Survey

**Table I. Summary of Requirements – By Appealing Organisation and By Sector**

**Consolidated Appeal for  
Eritrea 2005**  
Summary of Requirements - By Appealing Organisation  
as of 19 October 2004  
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

Appealing Organisation	Original Requirements
CARE INT	999,991
CESVI	346,348
FAO	2,195,498
HABEN	972,000
Mani Tese	224,711
OCHA	736,681
UNDP	9,874,555
UNFPA	502,250
UNHCR	12,783,757
UNICEF	13,090,772
WFP	114,400,000
WHO	1,024,616
<b>Grand Total</b>	<b>157,151,179</b>

**Consolidated Appeal for  
Eritrea 2005**  
Summary of Requirements - by Sector  
as of 19 October 2004  
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

Sector Name	Original Requirements
AGRICULTURE	2,924,648
COORDINATION AND SUPPORT SERVICES	930,931
ECONOMIC RECOVERY AND INFRASTRUCTURE	2,519,023
EDUCATION	744,318
FAMILY SHELTER AND NON-FOOD ITEMS	8,079,818
FOOD	114,400,000
HEALTH	5,116,934
MINE ACTION	3,152,691
MULTI-SECTOR	12,783,757
WATER AND SANITATION	6,499,059
<b>Grand Total</b>	<b>157,151,179</b>

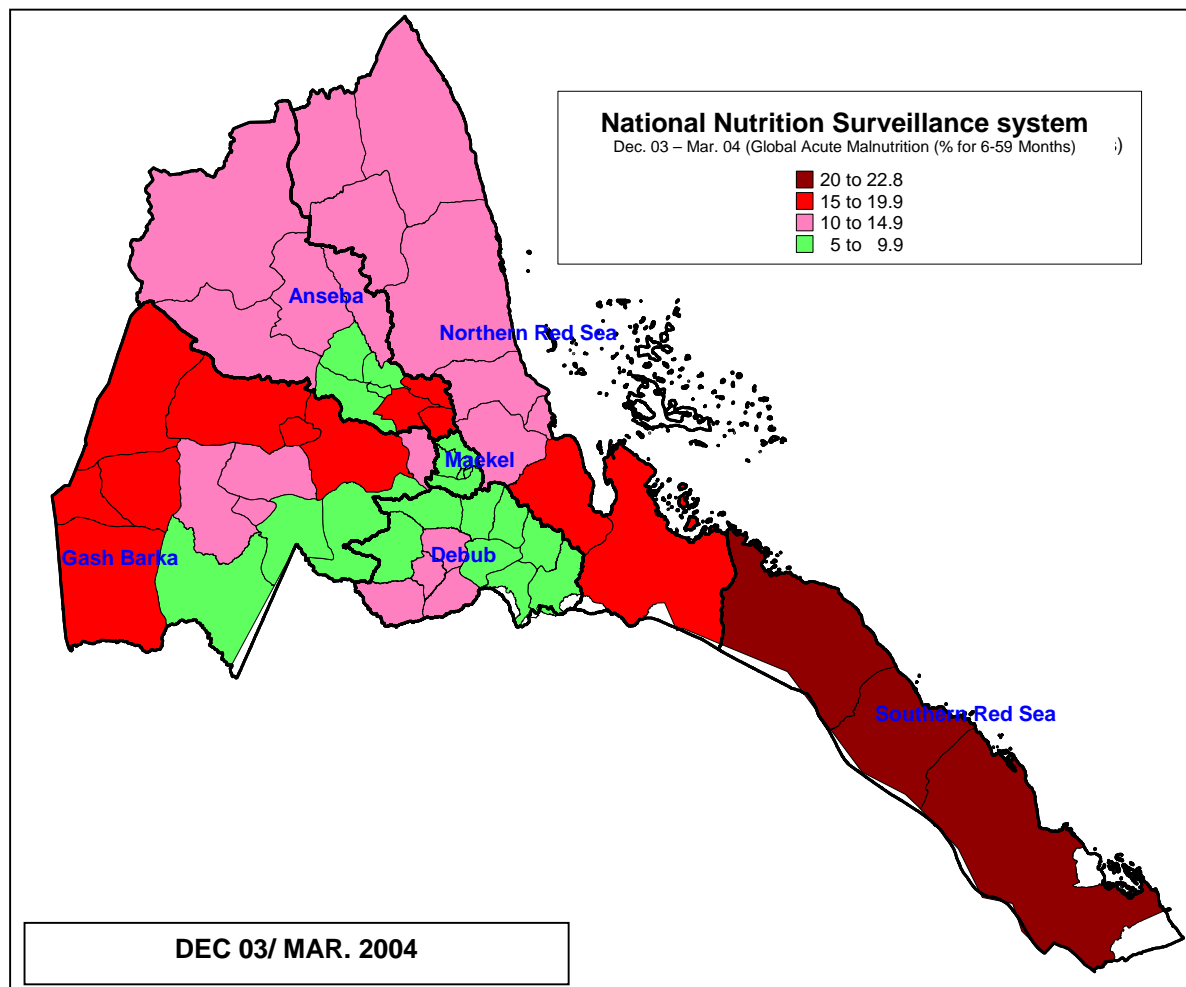


## 2. 2004 IN REVIEW

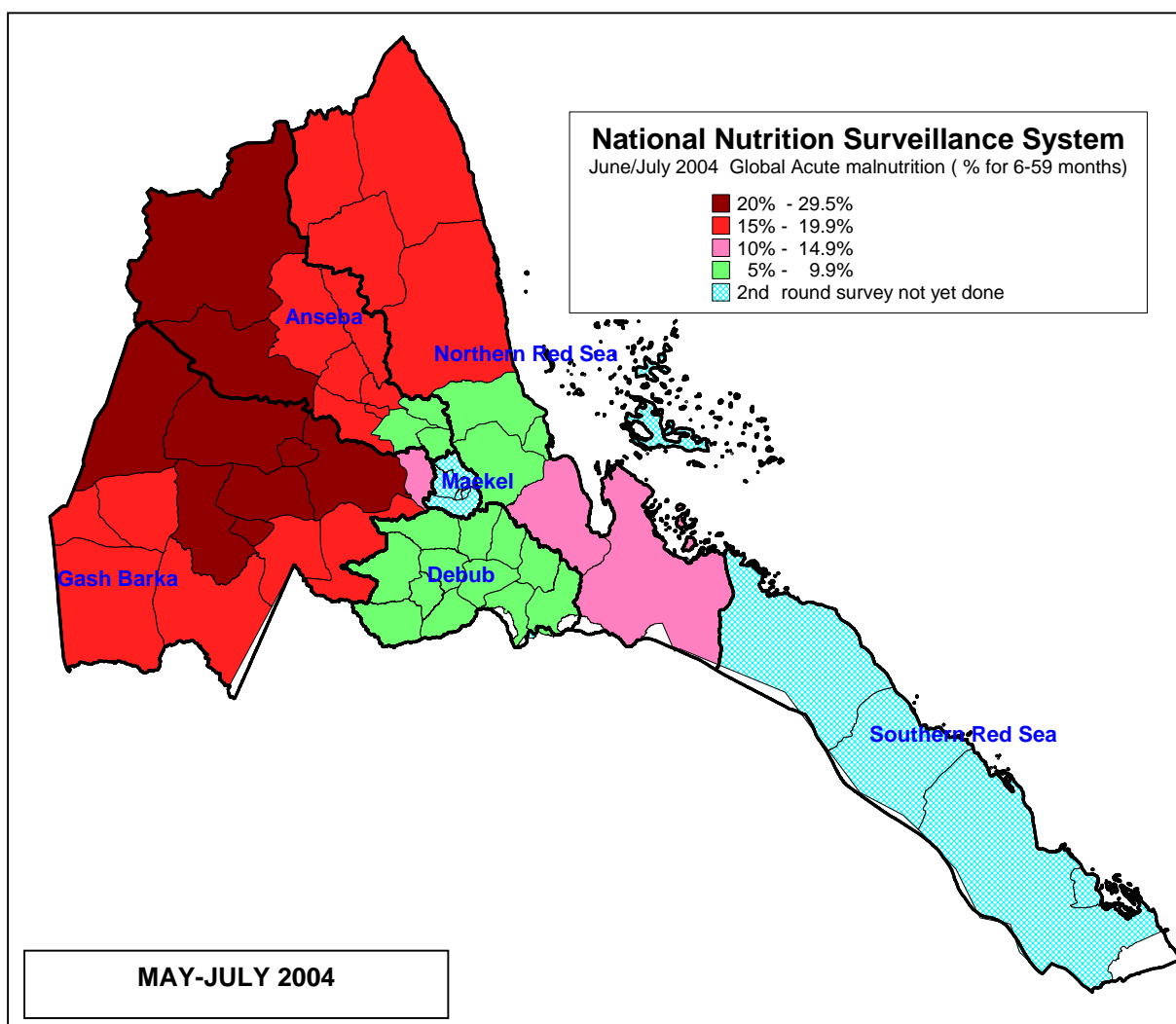
The 2004 Consolidated Appeal (CA) for Eritrea, issued in collaboration with the Government and humanitarian partners, provided a framework for life-saving interventions in the context of a continuing emergency that resulted from recurrent drought, residual effects of war, compounded by deterioration of the economy and lack of proper responses to mitigate the humanitarian challenges for the 1.7 million originally targeted beneficiaries. The last twelve months witnessed little change in the lead indicators such as rainfall, crop production and food security. Instead, the cumulative effects of the drought, under-performance of the economy, lack of funding for a post-conflict recovery programme led to a further deterioration of the humanitarian situation until the end of the year. The coping capacity of more than 66% of the population was threatened by direct hunger, extreme poverty and poor access to clean water, while scarce resources limited the Government's ability to purchase food commercially as it did in previous years.

The WFP/Food and Agriculture Organization (FAO) Food Supply and Crop Assessment report issued at the end of 2003, estimated 106,000 MT cereal production instead of the 210,000 MT forecast. The report also identified 250,000 additional urban vulnerable people requiring humanitarian assistance. As a result, the target population increased from 1.7 million to 1.9 million. With this increase, combined with the lack of timely and adequate response to the CAP 2004 and the recovery programme, the Government and the humanitarian partners had no means to address all but the most urgent needs. The Ministry of Health's (MoH) Nutritional Surveillance System of July 2004 revealed high malnutrition rates among women and children in Gash Barka, Anseba and Northern Red Sea Zobas, with global malnutrition estimated at as high as 19.4%, 18.4% and 13.9% respectively. According to the Growth Monitoring and Promotion report of 2004, 50% of under-five children are undernourished. These figures reflect an ongoing food security crisis that prevents nutritional recovery with likely long-term human (child) development consequences. Maternal mortality ratio was estimated at an alarming 53%.

### NUTRITION MAPS



## ERITREA



The two maps above show the outcome of Nutrition Surveys carried out in December 2003 and in May-June 2004 as part of periodic surveys carried out twice a year. The May-June 2004 Survey results indicate deterioration in nutrition situation among under-five children in Gash Barka, Anseba and the northern parts of Northern Red Sea. This deterioration is clearly indicated by Global Acute Malnutrition (GAM) rates in the range 20-29.5% in parts of Gash Barka and Anseba. An improvement was noted in the southern part of Debub where malnutrition rates dropped from a range of 10-14.9% to below 9.9%. The overall deterioration in malnutrition is thought to be due mainly to seasonal food shortage during the period covered by the May-June 2004 survey. There is therefore need to ensure that the strategy for food aid includes need to cover particularly the 'hunger gap' in Eritrea as well as ensure that the most affected areas received adequate food rations.

The stalemate in the peace process has constrained the full realisation of demobilisation activities, thus creating a marked shortage of workforce in public and private sectors, and leaving a high number of IDPs and returnees in camps without being resettled.

The humanitarian community in collaboration with the Government took significant steps towards fulfilling the short-term goals as described in CAP 2004, with the overall aim to: prevent malnutrition, through the provision of adequate food, health and nutritional care, and water and sanitation services; provide assistance and support for the protection, return and sustainable reintegration of refugees, displaced persons and expellees; strengthen the coping mechanisms of most vulnerable households, especially female-headed households, and technical support to improve food security; and, enhance the capacity of the Government, UN Agencies and NGOs to better target the use of resources in order to reach the most vulnerable beneficiaries.

The Eritrea CAP 2004 witnessed a decrease in donor response, and as a result, humanitarian agencies depended on up to one-half of their implementation capacity on carry-overs from 2003 or other resources. However, the combined response, in **the food aid sector**, collectively with available products in nutrition, health, water and sanitation, resulted in a seasonal beginning-of-year (January 2004) drop in global malnutrition levels in children under five years, particularly in the camps. However deterioration was noted again by June, especially in Gash Barka and Anseba.

As of October 2004, the **Food Sector** has received only **63%** of its revised requirements of US\$ 78.7 million. However, with this and other resources carried over from 2003, WFP for example was able to reach 99% of the 900,000 rural poor affected by war, drought and economic hardship that it was targeting. This includes 80,028 primary school children, of which 32,011 girls, with school feeding and take-home rations to encourage girls' enrolment and reduce dropout rates. 38,700 women and 4,300 men were supported with food rations in the promotion of adult literacy programmes. 4,060 affected by Human Immune Deficiency System/Acquired Immune Deficiency Syndrome (HIV/AIDS) and 3,167 tuberculosis patients were also supported with food rations. In **Food Security**, only US\$ 1,161,584 (21.5%) of the total US\$ 5,413,482 was received. This made it possible to address some areas in livestock feeding, animal healthcare and provision of seeds while some critical components were left out. Of the 7,000 MT shortfall of seeds, only 42% was secured, resulting especially in the non-planting of pulses.

In the **Health** sector, with the National Health Information (SEMISH) system fully established and following the 2003 national measles immunisation campaign, which achieved 98% coverage of children between 9 months and 14 years, there has been no report of any measles outbreak. Eritrea continued making progress in reducing malaria incidence through a combination of malaria control and prevention



measures such as use of bed nets and involvement of malaria agents in control and prevention activities at community level. SEMISH data does reveal a high level of ARI and diarrhoea deaths – indicators of famine conditions.

The **Basic and Reproductive Health Services** received no funding under the 2004 CAP. The World Health Organization (WHO) and the United Nations Population Fund (UNFPA) were forced to limit implementation of maternal and child health, malaria and other communicable disease control activities through their regular budgets. Abortion/miscarriage is still the fourth leading cause of female deaths and emergency reproduction health remains wholly under-funded.

**HIV/AIDS** prevention activities received greater interagency joint attention. The HIV prevalence rates in Eritrea for 2003 were indicated as 2.4% in the general adult population. However, there are serious geographical disparities: Assab 7.2%; Asmara 4.5%; Massawa 2.9%; Keren 1.8%; Mendefera 1.4%; and rural Gash Barka 0.9%.

Only 32.7% of the **Water and Sanitation** projects submitted within the CAP 2004 framework were funded. However, as the severity of the drought became more pronounced, the United Nations Children's Fund (UNICEF) shifted its priorities to focus mainly on short-term emergencies and include urban areas like Mendefera and Ghinda. The shortage of critical construction materials for reintegration projects seriously slowed down their implementation.

**Family Shelter and Household Items** received no funding of the requested requirements for 2004. The Government of the State of Eritrea, UN agencies, NGOs and the International Committee of the Red Cross (ICRC) provided support to the emergency needs of the war-affected and displaced populations through the provision of shelter and household items, and were also able to resettle over 10,000 expellees in Gerenfit. The United Nations Development Program (UNDP) supported mine clearance through the Eritrean Demining Authority (EDA), working in Debub and Gash Barka. UNICEF also provided support for EDA in Mine Risk Education (MRE) to mine-affected communities to reduce the risk of mine-related incidents. The **Voluntary Repatriation and Sustainable Reintegration Programme** received 72% of its requirements to repatriate 8,275 in the first-half of the year out of the planned 35,000 Eritrean refugees from Sudan for 2004. Overall, given the clear gender dimension of the emergency in Eritrea, failure in responding to obvious needs in food aid, food security, health and water and education has adversely impacted on women's rights and equality. For greater attention to the gender dimension, a higher level of response to this emergency is needed.

Funding for **Coordination** activities currently stands at 65%. Inadequate resources led to the suspension of capacity building and some planned advocacy activities. Nevertheless, the limited advocacy activities contributed to the support for drought and war-affected populations.

### **Response to the 2004 Appeal**

CAP 2004 aimed to raise US\$ 147, 239,028 but was revised downwards to US\$ 125,542,804 to meet the basic humanitarian needs of 1.9 million people. As of 19 October 2004, overall donor response against the Appeal was 53.8% compared to about 77% for CAP 2003. The overall pledge rate against non-food projects (38.6%) remains low, in comparison to that of food-related interventions (63%).

## **2.1 Lessons Learned**

### **Resource Mobilisation**

The intensity, aggressiveness and vigour with which the UNCT and the Government pursued resource mobilisation in 2003 in and outside the country was somewhat relaxed during 2004, which may have affected the level of response in 2004, which remained low at 53.8%. Engagement of donors through joint meetings and field trips, missions to donor capitals would be pursued in 2005.

### **Participation of NGOs in CAP**

NGOs were very much involved in the Consolidated Appeal process and submitted project proposals for CAP 2004. These approach pre-empted questions by donors on NGO involvement in the CAP.

### **Common monitoring and evaluation system:**

The joint initiative of WFP, UNICEF, WHO and NGOs in supporting the MoH to establish a nationwide Nutritional Surveillance System to collect data on food security, coping strategies, disease trends and other indicators as well as the ability to conduct surveys and analyse data, represents successful interagency collaboration that produced effective results.

### **Linkages between Long- and Short-Term Programmes**

The UNCT is actively pursuing opportunities to ensure essential linkages and effective transition from short-term relief assistance to medium and longer-term developmental programmes. Support for recovery and development is generally delayed until people no longer need relief assistance. If this support was given at the same time as relief assistance, the beneficiaries might cease needing the relief aid much sooner.

### **Food versus Non-food**

Humanitarian agencies continue to express serious concern over the funding imbalance in favour of food, highlighting that more urgent attention is required for meeting critical non-food needs, particularly in the health and nutrition, water and sanitation, shelter and agriculture sectors.

### 3. THE 2005 COMMON HUMANITARIAN ACTION PLAN

#### 3.1 The context and its humanitarian consequences

##### 3.1.A The context

The situation in Eritrea remains extremely complex and fragile, taking into consideration the recurrent cycles of drought (the long rainy season last year ended early in September), and the impasse in the peace process that has tied up much of the country's human and financial resource capacity, leaving many communities and families economically vulnerable – especially more recently in urban areas.

The diversion of resources from development efforts to safeguard the country's security, and loss of foreign markets as a result of regional difficulties, has further diminished the nation's economic opportunities. The absence of foreign media outlets is constraining humanitarian agencies' advocacy efforts on behalf of vulnerable populations. While border demarcation issues with Ethiopia remain unresolved, the international community is keeping intense pressure on both parties to avoid another tragedy. If hostilities resume between Ethiopia and Eritrea, the humanitarian community will face even greater emergency response challenges. With deteriorating coping mechanisms and increasing poverty levels, which have a negative impact on the prospects of socio-economic improvement, Eritrea relies heavily on international assistance to provide basic services to its vulnerable population.

The sharp increase in food prices caused by shortages in some parts of the country continues to create inflationary pressures. The country is likely to face further shortages of foreign currency, which is required to supply essential goods and services. The 2003 Living Standards Measurement Survey (LSMS) estimated that the 1999–2002 drought decreased rural income by 18%, while poverty levels increased by 10%, leaving 66% of the population classified as poor. The lack of a durable peace and a below-average harvest in 2004 are likely to increase national poverty; in this respect, it is estimated that an additional 250,000 urban vulnerable persons will be included to the total number of beneficiaries. Altogether, the people in need of free food distribution represent 58% of the total population of 3.8 million<sup>2</sup>.

#### ERITREA POPULATION IN NEED OF FOOD AID DISTRIBUTION IN 2005<sup>3</sup>

ZOBA	Number of Beneficiaries
Anseba	350,000
Debut	550,000
Gash Barka	500,000
Maekel	450,000
North Red Sea	300,000
South Red Sea	50,000
Total	<b>2,200,000</b>

In the last 12 months since the launch of the 2004 Consolidated Appeal, drought conditions have continued to hit the arid and semi-arid areas in Eritrea. Erratic rainfall patterns have caused crop failure on a massive scale in most parts of the fertile "food basket" areas and adversely affected access to potable water. This has been exacerbated by the loss of manpower for agricultural activities, due to national service and the lack of animal draught power and seeds. Displacements caused by the 1998-2000 border war with Ethiopia and the existence of mines in farmlands have prevented farmers from maximising cultivation of their land, particularly in the most productive agricultural regions of Gash Barka and Debut.

The drought has forced some upland farmers in Debut and Maekel zobas to abandon traditional cereal cultivation and shift to legumes, which are planted later and require shorter growth care. The staple crops, sorghum and millet have been badly hit by drought. Local seeds of basic staple crops are of extremely poor quality and inadequate, as a result of chronic crop failure. As at the time of writing this document, only 42 per cent of the seeds needed for planting in 2004 were available, translating into loss of production opportunities for the harvest season. Consequently, less area was cultivated in 2004 compared to 2003. Moreover, the livestock sector is engaging in distress sales for lack of animal feed and healthcare.

<sup>2</sup> NSEO 2003 LSMS

<sup>3</sup> ERREC

Water problems are acute, particularly in rural areas. Sources used include wells, streams and dams. The burden on the women and girls who must carry the water is too great and detrimental to their health, cutting deeply into the eight hours they must spend on subsistence work. In camps and some hardest hit communities, water trucking remains the only option for the northern and eastern regions.



EMPTY WELL – WATER SOURCE / UNICEF / 2004

The combined effects of water and food shortages have allowed the continuation of unacceptably high rates of malnutrition and child wasting. In three of the six zones, the rate stands at between 10% and 19%, which is above the WHO cut-off point of 10% GAM<sup>4</sup> rate signalling the need for humanitarian assistance. Maternal malnutrition rates were estimated at 53% in some places, one of the highest in Africa. Under-five mortality has increased to 1.5 per cent, compared to 1.0 per 10,000 per day.

In basic health, the supply of essential drugs in areas of need remains inadequate. According to hospital morbidity and mortality reports, diarrhoea has been an important cause of outpatient and inpatient morbidity among infants and children. Acute Respiratory Infections (ARI) accounted for 17.3% of all outpatient and inpatient morbidity.

Eritrea is sitting on a powder keg in terms of HIV/AIDS. An array of factors will affect the pattern of the epidemic, including: poverty alleviation, humanitarian aid, population movements, border politics and social changes. While HIV/AIDS is not a central component of the CAP, being well funded from other sources, all emergency interventions are critical in the prevention strategy of the country. The youth are particularly at risk, with 70% of the reported AIDS cases among young persons aged 20-39 years, and 5% among children below 15 years. Health services are losing their capacity to adequately and promptly prevent and treat sexually transmitted infections, one of the few proven interventions known to have a direct impact on reducing the spread of HIV in communities.

The continued inability of the majority of the IDPs to resettle, coupled with failure to resume cross-border economic activities, has left many people exposed to serious humanitarian and economic constraints. However, over one million IDPs who have returned to their homes are unable to restore their livelihoods, given the non-availability of socio-economic facilities. Meanwhile, host communities face growing levels of vulnerability especially in areas along the border with Ethiopia. Lacking basic social services and severely affected by war and drought themselves, they struggle to cope with the size of returns. In 2004, the situation of IDPs and expellees in camps worsened with the onset of the rainy season. The Government then decided that some of the 70,000 IDPs living in camps could safely return to their villages and requested international support in the resettlement of approximately 25,000

<sup>4</sup> Reports of National Nutrition Surveillance System, December 2003 and March 2004

people. This year almost 20,000 IDPs from Adi Keshi camp are expected to return to their home villages and the Country Team is requesting urgent support for this programme.

5,000 refugees are expected to voluntarily repatriate from Sudan in 2005. These, and the remaining refugees expected in 2004 (total planning figure 35,000) will require socio-economic reintegration assistance. About 120,000 returnees will need medium-to-longer term sustainable reintegration assistance, while 4,000 Somali and Sudanese refugees living in Eritrea are reliant on assistance. Conscription of productive labour and prolonged national service are creating a shortage of skilled and unskilled human resources in the private and public productive sectors.

The average percentage of women-headed families is as high as 43% in rural areas, higher within areas that host displaced persons and returnees. One in eight children in Eritrea have lost one or both of their parents, becoming full or partial orphans. Displacement of communities, the break-up of families, the mobilisation of men to join the defence forces, death in battle and the extended absence of husbands in military service have all converged to produce a situation in which the remaining communities are characterised by a large proportion of households headed by women.<sup>5</sup>

Despite considerable advances in coordinating mine action activities, landmines continue to impede humanitarian access as well as the safety and economic recovery of the people in need. 655,000 persons live in fear of landmines; over 100,000 persons live with some kind of disability; 40,000 await orthopaedic services; and at least 5,385 persons have been killed or injured by landmines and unexploded ordnance (UXO) in the last four and a half years.

The Government of Eritrea has the primary responsibility for ensuring that adequate food; medical supplies and basic social services are provided for its people, and for their general welfare. However, while the Government is willing to respond to the crisis, it has neither the capacity nor the resources to meet the enormous needs of its people. In order to ensure Government inputs into the planning process, the UNCT and its partners have developed this Inter-Agency Consolidated Appeal in full consultation with Government counterparts.

### **ERITREA BASIC FACT SHEET**

<b>Demographics</b>		<b>Socio-Economic Indicators</b>	
<b>Total Population (2003):</b>	3.8 Million <sup>6</sup>	<b>GDP Per Capita (2002)</b>	US\$ 150 <sup>7</sup>
<b>Population Growth Rate</b>	2.9% <sup>8</sup>	<b>Real GDP Growth (1997-2001)<sup>9</sup></b>	<b>1997: 7.9%</b>
<b>Urban Population (2000)</b>	<b>18.7% of total<sup>10</sup></b>		<b>1998: 4.0%</b>
			<b>1999: 0.8%</b>
			<b>2000: -8.2%</b>
			<b>2001: 1.1%</b>
			<b>2002<sup>11</sup>: 0.35%</b>
<b>Life Expectancy at Birth (2002)<sup>12</sup></b>			
<b>Female:</b>	<b>53.3 years</b>		
<b>Male:</b>	<b>50.6 years</b>		
<b>Average:</b>	<b>51.9 years</b>		
<b>Infant Mortality Rate:</b>	<b>47/1000<sup>13</sup></b>		
<b>Under Five Mortality Rate:</b>	<b>89/1000<sup>14</sup></b>		
<b>% Of Skilled Attendants At All Births:</b>	<b>28%<sup>15</sup></b>		
<b>Maternal Mortality Rate:</b>	<b>1000/100,000</b>		
<b>Adult Literacy (2000)</b>	<b>55.7%</b>		
<b>Female literacy Rate</b>	<b>25%</b>		

<sup>5</sup> Eritrea Participatory Poverty Assessment Report, June 2003

<sup>6</sup> 2003 LSMS

<sup>7</sup> UNDP HDR 2004

<sup>8</sup> Source NSEO, 2002

<sup>9</sup> Transitional Economic Growth and Poverty Reduction Strategy, Government of Eritrea, September 2001

<sup>10</sup> UNDP Human Development Report 2002

<sup>11</sup> UNDP Human Development Report 2002

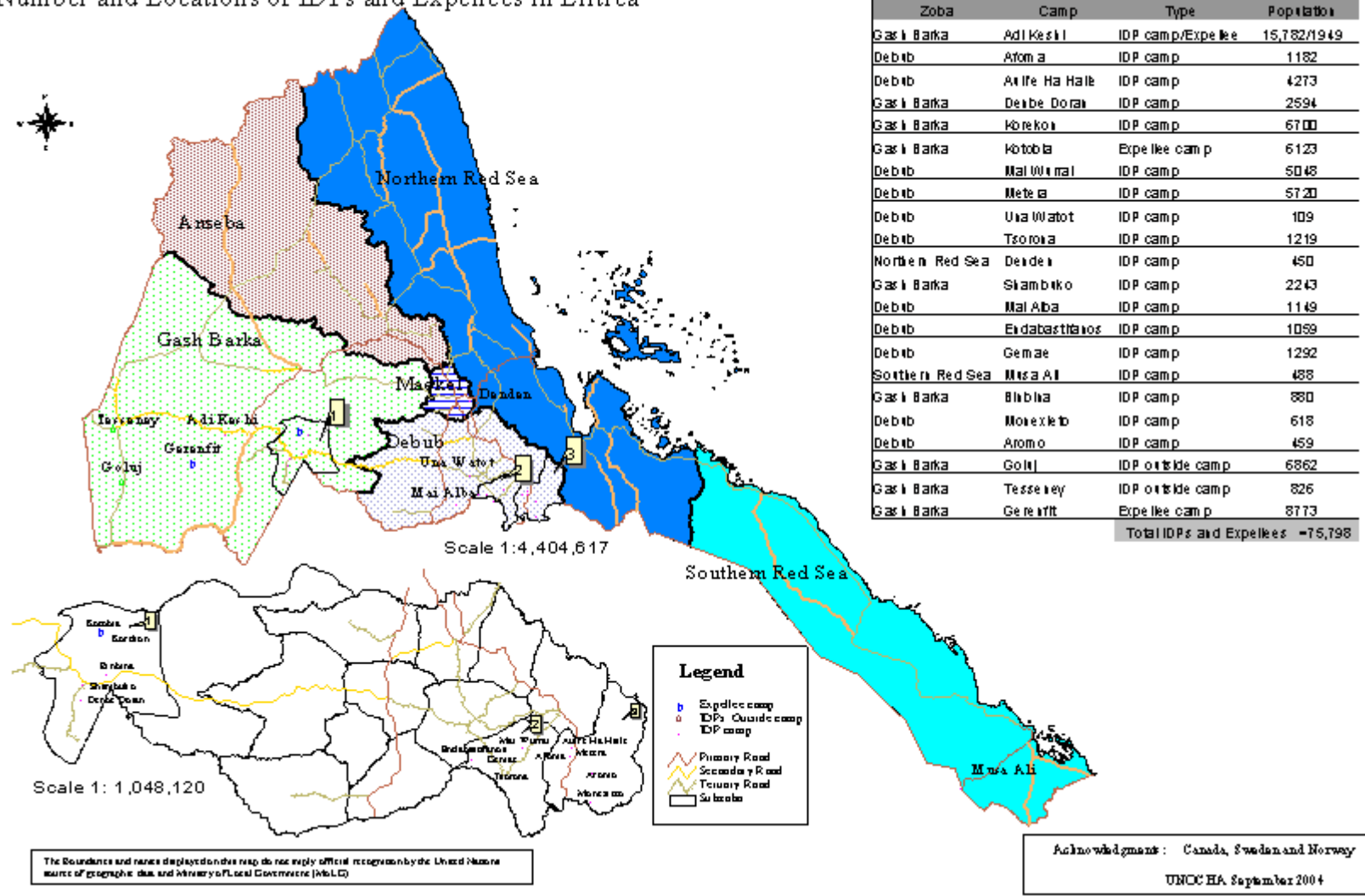
<sup>12</sup> UNDP Human Development Report 2004

<sup>13</sup> HDR 2004

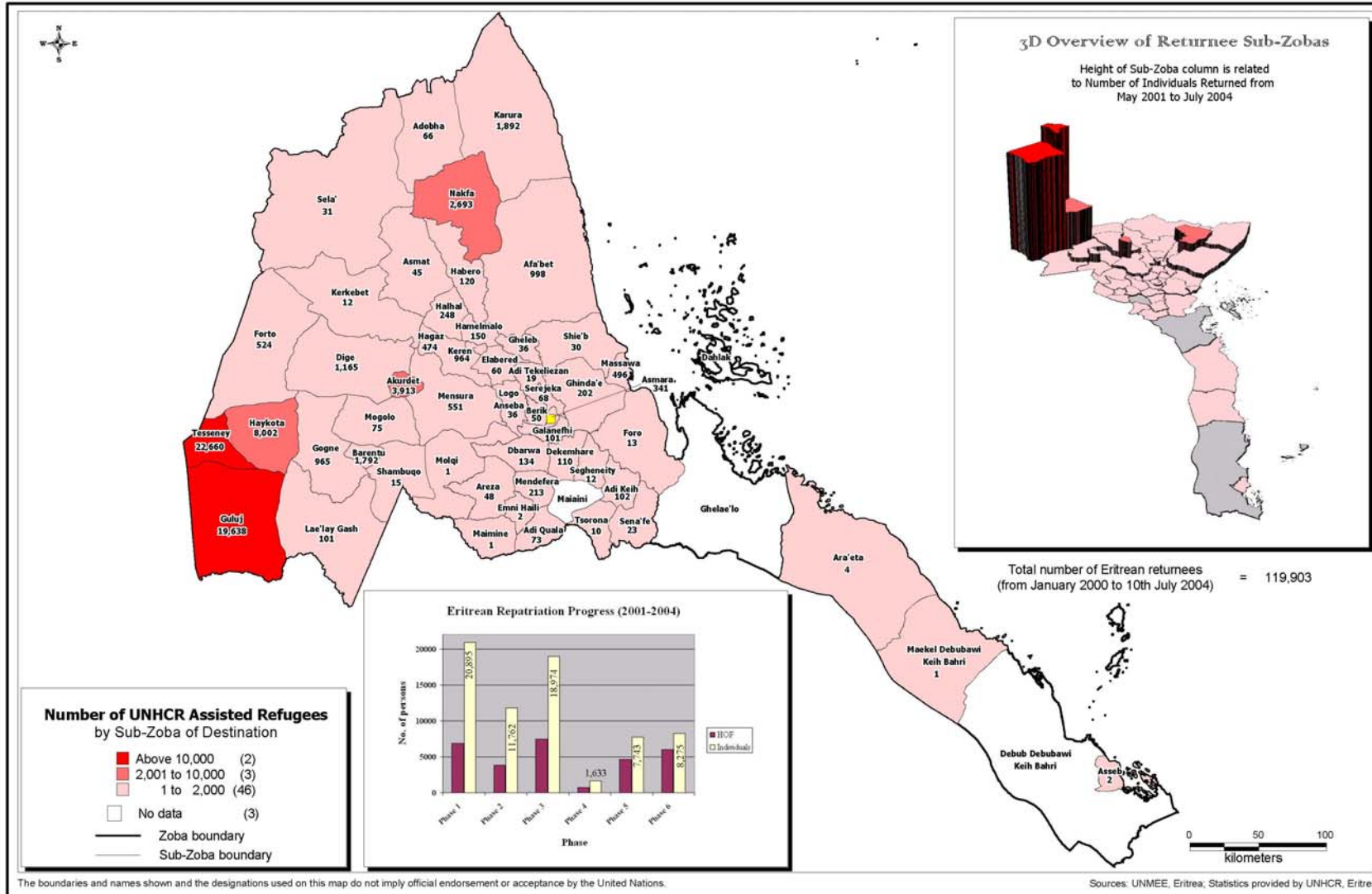
<sup>14</sup> HDR 2004

<sup>15</sup> Eritrea Demographic and Health Survey (EDHS 2002)

Number and Locations of IDPs and Expellees in Eritrea







### 3.1.B The humanitarian consequences

The *long rains* were delayed and badly distributed, at times destructive, leading to loss of seeds and a shift to short cycle crop cultivation (pulses), resulting in substantial cereal deficit. Cereals, however, represent Eritrea's basic food. Only 25% of cereal and legume needs for 2004 were covered. The consequences of another year of poor rains on food security are severe. The non-demarcation of the Eritrean/Ethiopian border has serious implications for prognosis of the peace process. It is feared that any failure in the ongoing fragile peace process could rapidly deteriorate and lead to a resumption of hostilities, with the attendant resource mobilisation needs to cope with potential mass displacements; limited access to, and protection of, vulnerable populations; and safety of humanitarian actors. Humanitarian agencies have little insight into how the current situation might improve or be resolved without a comprehensive political settlement. Uncertainties about the peace process also complicate development efforts, and put into doubt the extent to which Governments, organisations and people are willing to invest in Eritrea.

Based on the humanitarian partners<sup>16</sup> thorough review and assessment of the humanitarian situation, the priority needs of the vulnerable population in 2005 remain: food aid; supplementary and therapeutic feeding; basic health services, including maternal health care; sufficient access to water and sanitation; emergency shelter; education; and return and reintegration, taking into consideration cross-cutting interventions such as HIV/AIDS and gender equity. Household items, such as clothing and blankets, are urgently needed.

Eritrea requires 384,000 MT of emergency food aid until the end of 2005. An additional 121,000 MT is required to supplement the national food security requirements, and to offset food shortages in several parts of the country.

#### FOOD AID NEEDS IN 2005

Commodity	Emergency Food Aid	Monetisation / cash for work	Food for work	Total National Food Requirements
Cereal	323,000	80,000	28,000	431,000
Pulses	24,000	6,000	2,000	32,000
Oil	16,000	4,000	1,000	21,000
Salt	4,000			4,000
Supplementary	17,000			17,000
<b>Total</b>	<b>384,000</b>	<b>90,000</b>	<b>31,000</b>	<b>505,000</b>

Farming households require improved varieties of seeds and tools to augment their agricultural production as well as animal feed and healthcare to reduce morbidity and mortality among livestock. Livestock production has also declined because of scarcity of grazing land and insecurity along the border with Ethiopia. While the impact of the poor rains persists, substantial new needs are expected to emerge for which donor support will be crucial. Tractors have become very important to female-headed households in cultivating family plots in the absence of their able-bodied men. Improved response and timely arrival of food commodities will allow continuation of steady food distributions at normal ration sizes.

To combat the rise in malnutrition rates, more therapeutic and supplementary feeding need to be supplied, the latter giving dry take-home rations to children and extra food ration for the family and nutrition education for mothers. There is also a strong need for awareness programmes for good hygiene and traditional child feeding practices to combat the high rates of malnutrition. Health care delivery remains a serious problem. Faced with limited number of health personnel, services in major health facilities are woefully inadequate and essential medicines are lacking.

The protection of women and youth against HIV and AIDS is of paramount importance. Last year, food security interventions such as free food aid, feeding centres, seeds and tools, agricultural developments and livestock developments were carried out by one or more agencies, but only on a small scale because of lack of resources. Lives and livelihoods are being put at risk when rations are cut due to delays in the pipeline.

<sup>16</sup> Government, UN, Donors and NGOs

Most of the country is in dire need of drinking water. As a result more than 80,000<sup>17</sup> people require immediate support through accelerated water trucking. For instance, in Dehub zone, water sources are drying up and are harder to find. In Senafe sub-zone, six out of eight dams have dried up leaving an acute water supply problem. Similarly in Areza, Mai-Mine, Segeneiti and Debarwa sub-zobas, several families have had to go to nearby towns. Anseba is also acutely affected by water shortages worse than in previous years. Moreover, one third of the estimated 5 million livestock in the country are in need of water and fodder<sup>18</sup>.

The vulnerable population in 2005 is estimated to be 2.2 million, an increase from 1.9 million in 2004 and 1.7 million in 2003, due to the cumulative effects of caseloads of drought, post-war humanitarian distress and erosion of coping mechanisms. This population including IDPs, expellees, returnees, host communities and children, will require substantial humanitarian assistance this year. Their staple crops, sorghum and millet have been badly hit by drought and their livestock is dwindling through distress sales and lack of animal feed and healthcare. In addition to food, water and basic social amenities, households need adequate shelter for protection from the elements.

The continued needs of the IDPs, expellees, returnees and their integration challenges are among the major challenges to the humanitarian community. Poor conditions in the camps translate into additional needs such as tents, water and fuel. Thunderstorms in July 2004 destroyed tents, household items, cattle and rations for 7,300 IDPs, at the Korokon IDP camp. Replacement of worn out tents in almost all IDP camps and emergency rehabilitation of the water distribution system in four of the 17 camps are urgently needed. In 2004, the situation of IDPs and expellees in camps worsened with the rainy season, and humanitarian agencies and the Government requested donor support in the resettlement of approximately 25,000 people. Thousands of tents, household items and basic social services are therefore needed in the new resettlement area. Furthermore, some 27,000 refugees were expected to repatriate to Eritrea from neighbouring Sudan last year. More than 300,000 IDP returnees require assistance to rebuild their houses, many of which had been destroyed.

Many IDP and expellee camps lack adequate educational facilities. Special attention must be paid to providing IDP children with emergency education. For example, in Gherenfit settlement area, 20% of children of school-going age are not attending school. Returning refugee children from Sudan also need to continue their education. School is greatly valued, as evident from the packed classrooms. The need for additional classrooms and school supplies therefore remains acute.

Urgent steps would have to be taken to increase de-mining and mine awareness activities in order to minimise mine incidents affecting vulnerable families who continue to lose their members to landmines. De-mining huge swathes of land will make them agriculturally productive.

Furthermore, WFP-supplied food aid is distributed through community structures thus avoiding the risk of sexual exploitation. However, the UNCT has adopted preventive measures by establishing a special committee to study the issue.

In accordance with government priorities, the Country Team and its partners will need to support institutional strengthening, including implementing, monitoring and capacity building programmes for government counterparts and local civil society. The problem of war-related labour shortages has a ripple effect on both rural and urban communities.

Aid levels decreased in 2004 compared to 2003. This resulted in down sizing ration sizes and beneficiary numbers. Around 218,000 MT were required for minimum acceptable levels and to scale up distributions to include the over 500,000 people who had been cut from food aid distributions. Scarce government resources and the decline in remittances from the Diaspora were not helping the situation. Eritrea will therefore require higher levels of international assistance in 2005.

---

<sup>17</sup> Water and Sanitation Sectoral Working Group Report to the General Humanitarian Coordination meeting, 11 June 2004.

<sup>18</sup> The MoA report presented at the Food Security Working Group, 2003

## ERITREA CEREAL BALANCE SHEET 2005 (MT)

<b>Domestic availability</b>	<b>138,000</b>
Domestic production <sup>19</sup>	108,000
Opening stock <sup>20</sup>	30,000
<b>Total utilisation</b>	<b>629,000</b>
Food use <sup>21</sup>	564,000
Seeds and losses	35,000
Closing stocks	30,000
<b>Import Requirements</b>	<b>491,000</b>
Commercial import capacity	30,000
Food aid closing stock (forecast)	30,000
<b>Uncovered deficit to be met through food aid</b>	<b>431,000</b>

### 3.2 SCENARIOS

#### Most Likely Scenario

The most likely scenario is based on the assumption that the humanitarian needs in Eritrea remain at a critical level as a result of the chronic drought. The socio-economic challenges will further erode the coping mechanisms of the population. The no-peace/no-war scenario would continue impacting both the economic and humanitarian situation. There would be continued high rates of malnutrition and water shortages throughout the country. The present challenge of meeting the immediate needs of the most vulnerable groups and restoring basic social services will continue. De-mining will be accelerated and some IDPs, expellees and refugees will be returned and resettled. The lack of Government capacity to bridge the huge food deficit require increased donor funding.

#### Worst Case Scenario

The failure of the seasonal rains compounded by the delay in the demarcation of the common border with Ethiopia could lead to the deterioration of the fragile peace and resumption of conflict. The worsening economic situation, shortage of essential consumer commodities and declining purchasing power would negatively affect the humanitarian situation thereby blowing it to full afresh emergency. The security situation would deteriorate causing a large displacement of civilian population. More people will die from newly laid mines. The chronic food insecurity and the dependence on relief assistance will persist at grave scale. Acute water shortages for humans and animals would develop into famine. The number of people in need of humanitarian relief assistance could be far more than what the 2005 CAP targeted (2.2 million).

#### Best Case Scenario

There would be progress in the peace process, eventually leading to the demarcation of the common border with Ethiopia. Demobilisation would be accelerated, thus releasing the greatly needed force for economic activities. The socio-economic situation would improve as well as the coping mechanism of the people. The private sector would play an active role in the economy leading to the stabilisation of prices of basic consumer goods, thus contributing to vulnerability reduction. However, relief projects would continue, as problems relating to displacement would not be over in the short term. However, the new development would allow for a major focus on transitional interventions such as assisting the remaining returning refugees and IDP as well as expellees currently living in camps to establish a sustainable means of livelihoods.

### 3.3 STRATEGIC PRIORITIES FOR HUMANITARIAN RESPONSE

The overarching goal of the CHAP is to provide immediate emergency relief and restore the coping mechanisms of the affected populations to support their livelihoods and prevent further asset depletion. In order to do this, the humanitarian community together with the Government set the following objectives:

- Save lives in displaced, refugee and other emergency situations;
- Protect livelihoods of vulnerable persons and communities;
- Mitigate disaster by restoring coping mechanisms of affected populations, and the prevention of diseases.

<sup>19</sup> Domestic Production, MoA Estimates, Sept 2004

<sup>20</sup> FAO/WFP Assessment Mission Report, November 2003.

<sup>21</sup> Food Use, Calculated aking 3,758,000 people at per capita 150kg per annum

Drawing on each agency's expertise, the Country Team identified Gender Equity and HIV/AIDS as cross-sector themes for 2005 that require cross-agency intervention. These themes will be mainstreamed throughout all humanitarian activities in Eritrea.

The continuing emergency situation resulting from over four years of drought has necessitated the issuing of a new CAP for 2005, focusing essentially on short-term life-saving relief interventions, and covers populations in all six zobas (Debub, Gash Barka, Anseba, Maekel, Northern Red Sea, Southern Red Sea). The identified vulnerable groups: IDPs in and outside camps, returnees, expellees in camps, resettled expellees, host communities, refugees, drought-affected, urban vulnerable and HIV/AIDS affected population.

The UNCT and its partners, together with the Government, have agreed on the following key achievements for the 2005 CAP cycle:

- Effective targeting of beneficiaries and communities resulting in a positive impact on livelihoods;
- Prevention of morbidity and mortality related to emergency;
- Reduced vulnerability to food insecurity;
- Reduced morbidity and mortality among livestock;
- People's coping mechanisms reinforced;
- Increased return, resettlement and sustainable reintegration of refugees and IDPs;
- Strengthened capacity of local counterparts and civil society to deliver humanitarian assistance;
- Strengthened coordination reaching and stabilising the living conditions of vulnerable populations.

The indicators used to measure the extent to which results have been achieved include:

- Percentage of assistance provided including food, seeds and tools to target beneficiaries as well as percentage of agricultural production, seed production and multiplication;
- Percentage of reduction in morbidity and mortality;
- Number and percentage of target population with access to basic social services, adequate shelter and education;
- Number and percentage of refugees, IDPs and expellees returned, resettled or integrated;
- Percentage of land made safe for the return of IDPs, reduction in mine incidents, and ensuring access to prosthetic care.

The Country Team's priorities complement those of other major aid initiatives in the country, with the CAP aiming to meet roughly 50% of the country's humanitarian needs. The government receives bilateral donor support for development programmes to finance public spending on primary education and healthcare; the World Bank, for example, has allocated some US\$ 50 million to support education. The Government, under the framework of its Interim Poverty Reduction Strategy (IPRS), also strives at addressing food shortages, access to safe water, enrolling children in primary school, reducing maternal and under-five mortality rates, combating the spread of HIV/AIDS, and providing access to reproductive health services, in cooperation with bilateral aid donors and NGOs. Other NGOs working closely with UN agencies but obtaining resources outside the CAP framework, contribute to food aid not included in the CAP. NGOs complement agricultural efforts through the provision of technical assistance and farm inputs as well as working in the lowland areas in support of the nomadic population and the fisher communities. However, bilateral donations are needed to enable the Government to stabilise food prices and maintain or improve the urban poor access to food.

In pursuing its goals, the UNCT and its partners will work to reinforce links between different sectors such as food aid; food security; health and nutrition, water and sanitation, emergency shelter and education. Agencies will undertake joint programmes, common monitoring and evaluation, and ensure transparent and accountable use of resources.

**ERITREA**

**COORDINATION: - SECTORAL WORKING GROUPS AND FOCAL POINT AGENCIES**

<b>EMERGENCY COORDINATION</b>		
<b>CAP 2005 Sectors</b>	<b>Agency</b>	<b>Key challenges</b>
	UNCT and partner NGOs	-Provision of humanitarian assistance to war-and drought-affected populations and communities -Reducing future vulnerabilities
<b>Food Aid</b>	WFP UNICEF UNHCR	-Distribution of food aid to the most vulnerable people to help them survive
<b>Food Security</b>	FAO CARE	-Emergency agriculture projects that include seed distribution, land preparation, livestock feeding, to assist war-and drought-affected communities focused on vulnerable populations
<b>Nutrition</b>	UNICEF WFP	-Provide nutritional safety-net aid for vulnerable target groups
<b>Health</b>	WHO UNFPA UNICEF UNHCR	-Rehabilitation of health institutions -Provision of essential obstetric care services, drugs, immunisation and training
<b>HIV/AIDS</b>	UNAIDS, UNDP WHO UNICEF UNFPA	-Effective interventions to halt the spread of HIV/AIDS -Prevent and treat sexually transmitted infections
<b>Education</b>	UNICEF  UNHCR	-Provision of classrooms in IDP camps -Increasing school enrolment of girls and children in vulnerable communities and reducing drop-out rate -Primary and secondary school education in mother tongue in refugee camps and returnee villages as well as adult education
<b>Economic Recovery and Infrastructure</b>	UNDP UNICEF CARE	- Women's Recovery and Empowerment and community development through community-based savings and credit/ income generation activities and raising awareness
<b>Refugees</b>	UNHCR	-Post-conflict measures (Return, resettlement, reintegration, mine action, community rehabilitation)
<b>IDPs and Expellees</b>	OCHA UNDP UNICEF	-Advocacy and Coordination of relief assistance -Post-conflict measures -Mitigating the effects of droughts on affected populations (Return, resettlement, reintegration, mine action, community rehabilitation) -Provision of shelter, household items and other assistance
<b>Water and Sanitation</b>	UNICEF UNHCR CESVI HABEN Mani Tesi	-Providing access to clean water in war-and drought-affected areas focusing on returning refugees -Providing sanitation facilities
<b>Resettlement</b>	UNDP OCHA UNHCR	-Post-conflict measures (Return of IDPs & refugees, reintegration, mine action, community recovery, protection)
<b>Family Shelter and NFI</b>	UNDP UNICEF	-Provision of adequate shelter in and outside camps -Provision of non-food items, such as blankets, clothing, household equipment, kerosene
<b>Coordination and Capacity Building</b>	OCHA UNFPA	-Strengthen coordination to reach and stabilise living conditions of vulnerable populations -Building the capacity of government structures for the progressive transfer of responsibility for the coordination and delivery of humanitarian assistance to the Government
<b>Mine Action</b>	UNDP UNICEF	-Reducing mine-related incidents -Support to mine risk education -Access to prosthetic care -Support to capacity building
<b>Security and Communications</b>	UNDP	-Safety and security of humanitarian workers

### 3.4 RESPONSE PLANS

#### 3.4.A Agriculture (includes food security)

##### Situation Analysis

In 2003, Eritrea suffered from the fourth consecutive year of drought resulting in widespread crop failure. Internal Displacements of population caused by the 1998-2000 border-war as well as the presence of landmines and UXO have prevented farmers from maximising cultivation of the land in the most productive agricultural regions in Gash Barka and Debub.

Eritrea's economy is constantly worsening, with increasing shortages of essential consumer goods and a steadily declining purchasing power of the people. More than two thirds of the Eritrean population is living below the poverty line and the coping mechanisms have been almost completely depleted. The need for continued mobilisation of able men for the National and Military Service adds a severe constrain at all levels of the economy: both the public and private sectors are short of skilled manpower, especially the agricultural sector. As a result, the population presents a very high vulnerability rate:

- 2.2 million people are estimated to be requiring humanitarian assistance;
- Malnutrition rate among children remains higher than the WHO cut off point (10%) in three of the six regions of the country;
- Inadequate health care continues to aggravate the malnutrition problem;
- The number of urban vulnerable people is increasing;
- Food shortage is aggravated by market instability;
- Diminishing ground water is hampering access to clean water and basic sanitation;
- 20% of the areas for IDP return are mine infested.

In 2004, erratic rainfall patterns resulted in delayed or insufficient rains throughout the country. According to the National Food Information System (NFIS) Monthly Food Security Outlook, rainfall pattern during the months of July and August highlighted scattered and badly distributed rains, where some areas have had reasonable to good crop growth, while others – sometime nearby – show very poor crop performance. Southern areas in Debub and Gash Barka regions have received sufficient and evenly spread rain in July and August, including the Temporary Security Zone (TSZ), where, unfortunately, the cultivations were greatly reduced due to difficult access, mines infestation and general insecurity. Sporadic and poor rains affected main crops in the northern areas of Zoba Gash Barka and Anseba as well as extensive areas of Northern and Southern Red Sea.

Preliminary observations indicate a significant reduction in the number of areas planted as compared to last year. However to have a better appreciation of the impact of such reduction as well as of other factors affecting the global harvest, an assessment would be needed in November.

Unavailability of tractors and high prices of tractor rental, in turn due to the high cost of fuel, deny most farmers the possibility to mechanically prepare their land. Additionally, shortage of cattle for animal traction further hampered timely field preparation.

The shortfall of assorted seeds for the year 2004, estimated by the Ministry of Agriculture (MoA) at 7,000 MT, have been resourced only at 42% through international donors (2,895 MT distributed, of which more than 70% in cash or seed vouchers). Local sources of seeds are extremely poor, in qualitative as well as quantitative terms, due to the chronic crops failure, especially for basic staple crops.

Many farmers started sowing late in Zoba Debub and Maekel due to unavailability of seeds and high cost of land preparation. For this reason short cycle crops is slowly replacing the usual longer cycle cereal cultivations, as the former gives expectation of better harvest and good prices on the market. In some areas, where rains failed after the Azmera season, the land has been almost entirely replanted with short cycle crops (pulses).

The livestock sector has also been negatively affected by the successive years of droughts reducing fodder availability, while the pressure on the remaining forage land has been increasing due also to the cattle concentration moving only inside the country, as a result of the closure of the Ethiopian and Sudanese borders.

### **Sectoral Objectives**

The overall objective of the agricultural sector is to improve the production of food for poor farmers and their families. Through seed production and multiplication, participating farmers will be provided with better quality seeds. FAO and a number of NGOs will be looking at providing imported and locally produced seeds, tools and other essential inputs for the cropping season 2005. Special attention will also be given to livestock sector and pastoralist communities to assist drought affected livestock farmers to maintain animal production.

### **Increasing agricultural production and quality of products**

FAO will facilitate farmers' access to improved seeds of cereals, pulses and vegetables through local production and multiplication programmes as well as through imports.

NGOs, such as CARE International, will complement these efforts through the provision of technical assistance and farming inputs.

Seed distribution will be targeted to address vulnerable groups as jointly assessed with WFP, the United Nations High Commissioner for Human Rights (UNHCR), and UNICEF in the most drought-affected areas in Gash Barka, Debub and Anseba regions.

FAO will support WFP's feeding efforts providing seeds for the creation of vegetable gardens for Supplementary Feeding Centres and will protect and promote food security and livelihoods for assistance to people living with HIV/AIDS and their families, through the provision of seeds and small tools. FAO information campaigns will include HIV/AIDS awareness.

Local seed multiplication is characterised by quality degradation of the germoplasm available. To address this issue and to repair the damages to the informal seed sector, which has occurred as a result of the chronic drought and the impact of war, FAO plans to implement a Seed Multiplication Project to locally produce better quality seed. The quality of seeds currently produced by farmers is very poor and the progressive degeneration of the genetic material is reducing further the yield of cereals. The project aims at assisting the seed production system by supporting the National Agricultural Research Institutes (NARI) and implementing seed multiplication activities at rural level.

In the livestock sector FAO will support:

- Disease surveillance, monitoring and distribution of essential medicines, vaccines and equipment to reduce morbidity and mortality among livestock;
- Provision of supplementary feeding to targeting beneficiaries to provide emergency assistance to drought affected livestock owners;
- Training and inputs to promote planting of fodder crops to agro-pastoralist communities, as a more long-term intervention;
- Mercy Corps International and other NGOs intend to work in the lowland areas in support of the nomadic population and the fisher communities.

### **Coordination and monitoring between food aid and agricultural programmes**

The Food Security Sectoral Working Group (FSSWG) will continue to collect relevant data to estimate and monitor agricultural needs. Through the existing mechanism, under the chairmanship of the MoA, information will be collected from the working group members, MoA Units, UN agencies and NGOs regarding crop production, occurrence of pests and other calamities, to be able to better identify the actual needs of the farmers in specific areas of the country through rapid need assessments. FAO will strengthen coordination and information systems to facilitating the information flow to interested parties.

## **3.4.B Coordination and Support Services**

### **Background:**

The cumulative effects of drought, poor economic conditions compounded by lack of a viable post-conflict recovery programme has led to a deterioration of the humanitarian situation. The coping capacity of more than 66% of the population was further threatened by direct hunger, extreme poverty and poor access to clean water, while scarce resources limited the Government's ability to purchase food commercially to reduce the impact of the situation. Inadequate resources from humanitarian



agencies could not mitigate the challenges that needed to be addressed. In addition, the combined effects of water and food shortages and lack of a comprehensive response have contributed to the alarmingly high rates of malnutrition and child wasting. In three of the six Zobas, namely Gash Barka, Anseba and Northern Red Sea, malnutrition remain high, with levels exceeding the 10% WHO cut-off point for humanitarian assistance. In addition, maternal malnutrition rate increased to 53%.

Over 70,000 IDPs and expellees are still living in camps and cannot be resettled due to uncertainty over the border demarcation and lack of resources. Also, about 120,000 refugee returnees are still dependent on external assistance in addition to the 4,000 Somali and Sudanese refugees living in Eritrea.

The coordination capacity of the government is weak at the central, Zoba and sub-Zoba levels, coupled with insufficient integration of information and monitoring systems of government institutions, UN agencies and NGOs. Therefore, the prevailing humanitarian challenges require enhanced coordination systems for better advocacy and resource mobilisation for the affected population of 2.2 million.

### **Goals and Objectives**

The UNCT in Eritrea will ensure accountability for coordination, advocating for the beneficiaries and supporting the efforts of the Government and the humanitarian community. This includes saving lives through prevention of famine and malnutrition and promoting the return and integration of IDPs and expellees who are living in camps, and Eritrean refugees from the Sudan. In addition, the Office for the Coordination of Humanitarian Affairs (OCHA) would advocate to strengthening the capacity of the government through data collection for effective management of the humanitarian situation. Advocacy objectives include:

- Increasing awareness of humanitarian needs in-country and internationally;
- Increasing knowledge of humanitarian action among local communities and international audiences;
- Ensuring the timely and effective response to emergencies to prevent loss of life and provide relief to affected populations.

OCHA in collaboration with the Extra Relief and Rehabilitation Centre (ERREC) and all humanitarian partners in Eritrea will monitor the overall humanitarian coordination spectrum through the regular Sectoral Working Group and the General Humanitarian Coordination meetings.

Information will be used strategically to influence the policies or practices of key actors (Government, international and regional organisations, NGOs, the private sector and the public at large), with the goal of improving the well being of civilians in need.

### **Support services**

Capitalising on the interventions so far made and lessons learned: OCHA in particular, plans to enhance coordination mechanisms through the following strategies:

- Ensure that all vulnerable groups receive suitable protection and assistance;
- Improve coordination, preparedness and response mechanisms relating to complex emergencies;
- Facilitate burden sharing and transition to development needs through community-based assistance programmes and recovery activities in hosting and war-affected areas.

### **Priorities in 2005:**

- In collaboration with UNFPA and the Data for Development Theme group partners, collect, analyse and disseminate relevant and up to date humanitarian information, facilitate joint field assessments and monitoring visits with a view to increase awareness of humanitarian issues and responses;
- Strengthen humanitarian coordination and response structures, especially in the six Zobas of the country where such mechanisms are weak, by assisting the local administrations and the agencies on ground for regular flow of information, preparedness and effective response in the aftermath of the border demarcation process;

- Link the current humanitarian challenges to transitional and recovery efforts through joint programming, integration and linkages between emergency interventions, and recovery and development programmes. Emphasis will be put on supporting the local administrations in understanding and preparing early warning signals for any foreseen calamities;
- Continue to support the Zobas in providing data for the improvement of the quality of Geographical Information System (GIS);
- Strengthen and develop ways and means to sensitise traditional and non-traditional donors in and out of Eritrea on the prevailing situation for timely and adequate response.

**Performance Indicators:**

- Timely collection, analysis and review of baseline and quarterly performance data;
- Further Improvement in collaboration between UN agencies, NGOs and Government and the donors;
- Number of field assessments, monitoring visits and joint assessments;
- Number of humanitarian partners involved in sharing of humanitarian information and data;
- Type and number of training provided to local government personnel and use of coordination structures established and utilised;
- Percentage of actual resource mobilised from the CAP 2005;
- Number of beneficiaries that had received assistance.

**3.4.C Economic Recovery and Infrastructure**

The post conflict situation has created a protracted internal displacement of more than 70,000 persons, who, for almost four years, have lived in squalid camps. Although the border demarcation situation has not been resolved, the Government of Eritrea has decided that as many as 29,000 internally displaced, mostly women and children, can return safely to their villages or be resettled to viable agricultural land over the next months. This is a very positive development and government has already committed actions in identification and commitment of land, road improvement, de-mining and other preparatory works and started to raise bilateral funds. Therefore, while UN involvement will grow with this important initiative, and an additional US\$ 8 million will likely be required in multilateral and bilateral support, detailed project submissions are not yet included in this appeal.

However in addition to the needs of economic recovery activities for IDPs, food insecurity over the majority of 2004 has created great stress on the poorest families in the country, both within the urban and rural settings. In the UN system, UNICEF has just completed an evaluation of a four-year project supported by the Government of Italy that successfully reintegrated 6,048 orphans within host families in Gash Barka. A small investment of some US\$ 670 per family created a three to tenfold increase of income among some three-fourths of assisted families within two to three years. Of even more importance, orphaned children were well taken care of and successfully integrated into family life. Meanwhile, a recent World Bank assessment of best ways to address orphans in the country found, indeed, that reintegration into host families was much less costly per child than orphanages and group homes. Hence, UNICEF intends to pursue income-generating support to most vulnerable families, as a means to prevent children from being abandoned and abused.

CARE International also has recently worked in the area of community based credit and savings programmes to most vulnerable areas in country with extreme success in promoting self-reliance. This combined with their expertise in livestock management, seed fairs, land preparation and other areas directly linked to rural sector development, has allowed them toward an orientation to multi-sectoral projects that are targeted to empowerment of the most vulnerable, particularly women. CARE sees the importance of combining health empowerment with economic empowerment for greatest impact. In 2005, focus will be on women's empowerment and access to income and health opportunities, including protection from harmful cultural practices. Given the tremendous integrity and efforts of local populations facing extreme hardship, many initiatives to empower the vulnerable have been highly successful. The current recovery activities build on these initiatives.

Note: Both agencies, along with UNDP will form the partnership of the intended IDP return project for resettlement/settlement for families returning at the end of 2004 and in 2005 (the full strategy and programme will be appealed separately).

### **Key Goals**

- Create sustainable income earning opportunities among an initial selection of highly vulnerable families in the country;
- Ensure women are empowered to improve their own conditions, realising their rights and accessing income and health opportunities;
- Expand the efficacy of efforts by civil society and other small NGOs and businesses, vocational training schemes, to provide income and opportunities to the hardest hit communities;
- Provide alternatives to charity and aid dependency among the most vulnerable groups in country.

### **Key Indicators**

- The development of systems with local and municipal government for identifying the most vulnerable families in select communities;
- The proportion of vulnerable households receiving income generating support or credit, and other forms of empowerment – particularly related to accessing goods and services and protection from harmful cultural bias or practices;
- The numbers of training and skills development of local groups and governmental partners to undertake economic needs assessment of host/reinserted extended families;
- The reduction of abandoned or destitute women and children and reduction of risks of said groups.

### **Monitoring**

The importance of monitoring and accompanying the achievements of beneficiary families is paramount to the success of the projects. Counselling for best use of investments and savings is required. In this regard, use of 'on the ground' implementing partners (such as the Eritrean Community Development Fund, and the National Unions of Women and of Youth), will increase the regular monitoring and viability/sustainability of the projects. In addition local government support will be important. Also, the projects will ensure that donors and government are jointly involved with the monitoring of results and especially lessons learned in income generating projects, as the expansion of such activities will be vital to phasing out food aid and ensuring safety nets for the most economically vulnerable within the Eritrean population in the future.

### **3.4.D Education**

The response requirements in the education sector focuses on access to basic education for internally displaced children in and out of camps. There are an estimated 20,000 school aged children in the 17 camps; and although up to one half may be able to resettle this next year – a protracted IDP situation is still likely for those remaining. Although temporary solutions such as make shift structures and classes are available, facilities are inadequate and given the risks of the IDP camp environment, the well being of children in terms of their health, their nutrition status, hygiene and sanitation issues need to be addressed.

Teachers working in IDP camps also need to be well versed in providing psychosocial support to needy children in the camps. Recreational materials are important given the uprooted quality of life of many older children and youth and lack of availability of normal activities, as they would experience in their home villages. Recreation activities assist children to concentrate on positive aspects of their lives and move away from their problems at home or the situation of their families. Life Skills and HIV programmes should be accelerated in camps given the inherent risks of displacement movements and proximity to the Ethiopian border. This can be complemented by extracurricular activities including child led clubs that entertain and convey key messages that are of importance to children's lives. Children below the school age (three to five) also require some pre-school activities organised for them.

Many displaced families are inherently vulnerable due to high levels of widowhood, lack of or separation from extended families, lack of income generating opportunities, shortages of basic need items, crowding, poor hygiene, and insecurity about the future. In such situations it is extremely important to ensure that all children in camps have opportunities for education. This is not the case at this time, and attrition rates are about 60%. Therefore, expansion of facilities, training of teachers, provision of materials and equipment and overall support to education opportunities in camps are

essential. Equally it can be seen that many inputs at the location of camps, can be moved and used again when displaced persons return to their home villages.

The situation of IDP children has been somewhat overshadowed, due to repercussions from drought and economic hardship facing Eritrea. The country has been experiencing a kind of on-going silent emergency, when there is a lack of opportunity for education for over 50% of children of school going age. These factors combine with overly stretched sector finance and management capacity, inadequate teaching and learning materials, low remuneration and motivation of teachers, and inadequate attention to psychosocial issues of often-traumatised youth. The humanitarian situation, both due to the previous complex emergency and residual displacement and now chronic natural disaster have challenged the sector.

UNHCR also contributes to education both within refugee camps and returnee villages by ensuring all refugees receive primary school education in the mother language, continuation of secondary school and adult education provided. Returnee villages have received construction of schools, equipment and furniture provided as well as recruitment and training of teachers in both Arabic and English. In addition, day care centres have been built to ensure a smooth transition of returnee children into school by learning the language of the local school and making friends across ethnicity.

#### **Main Activities**

- Regular situation update of the learning environment of children;
- Monitoring of learning process using vulnerability criteria, notably school attendance and drop out;
- Provision of clean water and sanitary facilities at schools;
- Procurement and distribution of school supplies to selected schools;
- Provision of psychosocial support issues;
- Advocacy for children's right to education during crisis situations, including drought.

#### **Expected Outcome**

- School attendance will improve;
- The number of children who drop out of school during emergency will be reduced;
- There will be fewer cases of psychosocial problems;
- Performance of children will improve.

#### **Operational Objectives**

- To monitor the effect of the situation of IDP affected children on the teaching and learning process;
- To ensure that children including orphans in IDPs and in affected areas are supplied with school materials;
- To provide clean water and sanitary facilities at schools;
- To provide psychosocial support to children;
- To advocate for children's right (especially girls) to continued education during crisis situations;
- To ensure that school children are benefiting from school feeding programme.

#### **Indicators**

- Situation update;
- Attendance (girls and boys) rates;
- Drop out rates and the causes;
- Availability of water and sanitary facilities in schools;
- Adequacy of teaching and learning materials in the affected areas;
- Availability and effectiveness of school feeding programmes;
- Adequacy/effectives of other learning/ recreational materials;
- Frequency of psychosocial problems identified and addressed.

### **3.4.E Family Shelter and Non-Food Items (NFI) (includes transport costs)**

#### **Priority Needs and Response Strategy**

The provision of emergency shelter and household necessities to IDPs still living in camps, expellees in settlements, IDPs returning to their places of origin in the year 2005, is extremely important and is of the utmost priority. Moreover, the project also aims at contributing to the overall objective of lessening the impact of the current humanitarian crisis on the environment (firewood) by making kerosene available to IDPs/Expellees.

Based on the field assessment report carried out by the Sectoral Working Group on Shelter and NFI, UNDP prepared a project that will provide emergency shelter kits and various household items including kitchen utensils, jerry cans, blankets, bed sheets, mats, clothing and soap to both Expellees/IDPs living in camps/settlements. It is essential to provide Kerosene as one of the most needed non-food item.

The assessment team reported that the situation of shelter in camps is worse this year as compared to last year, with some 72% of the existing tents requiring urgent replacement. The IDPs and expellees in camps have expressed their frustration and exhaustion living in camps for the past five years; they require long lasting and more comfortable shelter. Most of the IDPs/Expellees in camps and settlements require periodic replacement of their tents due to the adverse effects of the weather. Failure to do so is likely to lead to deteriorating health conditions. The tents are generally hot during the day and cold at night, even under the best conditions.

UNICEF has prepared a project, which aims at providing protection to IDPs in 17 camps, who are unable to return to their home areas due to the presence of landmines, UXO, insecurity/ proximity to border or due to the delay in the demarcation process. Consequently, IDPs continue to live in desolate, harsh camps demanding international humanitarian assistance. Women and children constitute 70% of the IDP population and are the most disadvantaged group in need of support for some of the most basic items (e.g.: clothing, shoes, blankets, sanitary materials). Since the outbreak of the war, the intervention in providing non-food items was not only low, but also has been interrupted. Counterpart training is considered as an opportunity to develop further skills in the management of vulnerable population groups in times of emergencies and/or post conflict humanitarian situations.

If resources are not available to cater to the emergency shelter needs of the IDPs returning to their original villages, it is probable that they will never go back and might unnecessarily extend their stay in camps. This puts an extra burden on the humanitarian aid needs for the camps.

### **3.4.F Food (includes transport costs)**

#### **Situation Analysis**

In 2003, Eritrea suffered from the fourth consecutive years of drought resulting in widespread crop failure. Displacements caused by the 1998-2000 border-war, and the existence of mines and UXO have continued to prevent farmers from maximising land cultivation in the most productive agricultural regions in Gash Barka and Debub. Furthermore it appears that many plots of land are being abandoned due to severe erosion and exhaustion of the soil.

The 2003 LSMS estimated that the 1999–2002 drought decreased rural incomes by 18% and increased poverty by 10%, with 66% of the population classified as poor. Inflation, absence of a durable peace, and a below average 2003 harvest have further increased the population's poverty throughout 2004. Poverty and food insecurity are compounded by the fact that poor households in Eritrea are more likely to be female-headed, have a higher dependency ratio and comprise a larger than average family size. These households have only limited access to basic social services, and illiteracy is higher amongst women.

In the arid lowlands, the predominantly nomadic people, who largely depend on livestock production or fishing, suffer more from chronic poverty; the latter has increased sharply in the more densely populated rural highlands where people rely primarily on agriculture as their main source of income. According to the LSMS, small rural towns are characterised by particularly high concentrations of poor,

averaging 81% of the population. Further studies will have to be conducted by the Government, the UN, bilateral donors and concerned stakeholders to more precisely describe the phenomenon of urban poverty.

In 2004, spring rains have been insufficient and even failed in some areas. Summer rains started late and have been quite erratic. Only some areas in Debub and Gash Barka regions have received sufficient and evenly spread rains in July and August. The early estimates for the 2004 crop indicate a figure quite similar to that of the previous year, which in combination with the economic downturn puts the national need for food aid at an equal high level. As a result of this further impoverishment of the population, the number of people in need of food aid has increased from an estimated 1.9 million to 2.2 million.

## **FOOD AID**

### **Sector Objectives**

The overall objective of the food security sector is to meet the daily nutritional needs of the food insecure groups, estimated at two-thirds of the total population. Agencies working under the CAP aim at covering the food needs of about 1,250,000 vulnerable people affected by a combination of the continued impact of war, displacement, several years of drought and increasing economic hardship. Other organisations working closely with UN agencies but funded outside the CAP framework, will address part of the food aid needs of the other vulnerable groups. However, with the current planning figures, a significant amount of the population – especially in urban centres – is at risk not to receive the food aid they need. Therefore, bilateral donations are very much needed to enable the Government of the State of Eritrea (GSE) to address the food needs of those population groups; stabilise food prices and thereby maintain or improve the access to food for the urban poor.

### **Meeting emergency needs through food aid**

The deep poverty afflicting the rural and urban populations and the depletion of their assets and means of production (seeds, labour, and oxen) have caused widespread malnutrition among various population groups. WFP plans to distribute food aid to meet the nutritional needs of approximately 840,000 farmers and their families victim of drought and economic failure and of another 400,000 other food insecure persons, such as female-headed households and war-affected persons (IDPs, returnees, expellees).

The persisting high levels of malnutrition as observed during the successive National Nutrition Surveillance System's surveys would be closely monitored to ensure that only the most vulnerable persons are targeted.

### **Coordination and monitoring of food aid and identification of needs**

The Food Aid Sectoral Working Group, chaired by ERREC, will continue to collaborate with other working groups to collect data in order to update the estimates of needs. This will involve close cooperation with the Food Security Working Group and the Health and Nutrition Sector Working Group focusing on supplementary and therapeutic feeding. Food aid-related information will continue to be shared at the monthly Working Group meetings.

Within the framework of the National Nutrition Surveillance System, the use of the Coping Strategy Index, Vulnerability Assessment Mapping and the organisation of several stakeholder workshops have helped enhance the aid providers' targeting mechanisms. Ongoing discussions between working group members on vulnerability and beneficiary identification will contribute to further enhance the system's effectiveness.

### **Food aid as an investment in recovery**

WFP will use of food aid through its Protracted Relief and Recovery Operation (PRRO) to support selected vulnerable groups and community projects:

- The expanded school feeding programme – with active support from UNICEF and the Ministry of Education - will provide school feeding to 120,000 children and will contribute to increase primary school attendance and enrolment, particularly of girls;
- Food-for-training (FFT) will be provided to 50,000 adults participating in the GSE Adult Literacy Programme;

- Food-for-Health (FFH) interventions will provide food to people affected by HIV/AIDS and to up to 10,000 beneficiaries undergoing directly observed treatment short-course (DOTS) treatment for tuberculosis (TB);
- Under a food-for-assets component, up to 55,000 beneficiaries will have an opportunity to participate in infrastructure and environmental rehabilitation activities.

#### **Enhancing delivery systems through improved infrastructure**

WFP will continue to provide financial inputs (non-food items) to improve the functioning of the Massawa port, and the logistics capacity of its partners. A continued and ongoing process of warehouse management improvement and training of logistics personnel of the line-ministries and ERREC in good storage practices will be a key component of this programme, as are the monthly coordination meetings for the port, chaired by the Ministry of Transport and Communications. WFP has an ongoing close interaction with ERREC logistics staff and regular meetings are held to identify and resolve logistical bottlenecks. A special effort will be conducted to thoroughly analyse ERREC's logistical chain, identify and rectify weaknesses in the system and boost ERREC's capacity through enhanced training, better equipment and managerial improvements. Storage facilities will be upgraded at critical locations, in order to facilitate the temporary storage of food closer to beneficiary communities. In an attempt to reduce the burden of the various food aid programmes on ERREC logistical and managerial capacities, the different programmes will strive to continue as much as possible to use common distribution points, allowing for combined transport of commodities.

#### **3.4.G Health (includes reproductive health, nutrition, psycho-social support)**

The continuing drought and lack of consolidating peace have resulted in food shortages and economic hardship for many Eritreans. This has, in turn, introduced high health risks to some two thirds of the population in country. The MoH's recent surveys (NNSS, July 2004) found that the prevalence of acute malnutrition/wasting in the under five population was very high (above 15%) in Gash Barka, Anseba and parts of Northern Red Sea.

Pregnant and lactating women are also severely affected by malnutrition. Among the 886 women studied in this last survey, 41.6% were under-nourished (body mass index (BMI) less than 18.5 Kg/m<sup>2</sup>), and in worst hit areas, 10% were severely undernourished. These trends are associated with micronutrient deficiencies, anaemia and vitamin A deficiency and others. Anaemia increases the risk of low birth weight child (LBW) and maternal deaths. MoH data further reveals that 18% of the children delivered at health facilities in 2003 were LBW, a 125% increase in the past two years. Clinic data (2002-2003) confirms increases in anaemia and malnutrition, a 36% increase in cases of marasmus (severe wasting) in young children under age five. There was a corresponding 43.9% increase in deaths from malnutrition over this period. The health clinics also have reported a doubling of the total number of cases of malnutrition of all ages nearly. At present, 20% of all deaths in the country are attributed to poor nutrition (May 2004, Health Management Information Systems (HMIS) Report).

Poor nutrition and lack of adequate coverage for high-risk pregnancies (70% of women give birth at home) has resulted in sustained unacceptable levels of deaths among women giving birth. Eritrea has one of the highest estimated maternal mortality rates in the world. There is a desperate need to extend outreach services and maternal and reproductive health to villages and increase capacities in current clinics. In 2003, only 6,843 of the estimated 12,000 to 14,000 women attended outpatient and inpatient obstetric emergencies care services at hospitals and health centres. This accounted for a mere 6.2% of all inpatient and 0.5% of all outpatient cases.

Equally, there is a growing need to address increased trends in communicable and infectious disease spread. ARI and diarrhoea diseases claim the majority of under-five morbidity and mortality. Continued efforts are also needed to stem the spread of malaria, tuberculosis and HIV/AIDS. These conditions, along with malnutrition were responsible for some 60% of outpatient and 40% of inpatient morbidity and 56% of all inpatient deaths in 2003, and continue to increase in 2004. Vaccine-preventable diseases are no longer among the main causes of morbidity and mortality as a result of the high immunisation coverage; however, the challenge remains to sustain the high vaccination coverage, as well as malaria in endemic zones where malaria-related-morbidity and mortality in children and pregnant women is still high.

The health and nutrition emergency sector strategy in 2005 is to strengthen and expand life saving preventive measures in rehabilitating malnourished children and women, (special feeding and micro-nutrient supplementation), addressing immediate expansion of maternal health access and risk identification, and control of infectious diseases. This will be managed as a collective effort of three UN agencies: WHO, UNICEF and UNFPA, who will coordinate their work through a common steering committee and regular consultation to improve impact and efficiency. Each agency will support the activities that fall within their technical mandate in a complimentary manner.

The following table describes the target beneficiaries as a percentage of estimated persons affected by the emergency.

Target beneficiaries	
Category (% of affected population)	Target Beneficiaries
Women of childbearing age (18%)	342,000
Lactating women (2.4%)	45,600
Children Under 5s (13.5%)	256,500
Severely malnourished children 1.9%	4,874
Pregnant women (5%)	95,000
Infants (Immunisation) (3.6%)	68,400
<b>Total</b>	<b>812,374</b>

The activities of the three agencies will include: provision of **essential drugs and equipments** (for severely malnourished children and treatment of infections); **immunisation** of children especially against measles; provision of **emergency obstetric care** services and **reproductive health** equipment and supplies; support of training/management and supplies/food for **supplementary and therapeutic feeding**; strengthening of the **nutrition surveillance system**.

The target for nutrition activities will be that 70% of severely malnourished children are treated at therapeutic feeding centres and half of all malnourished children (114,000) will receive supplementary feeding (assuming that NGO bilateral support will address the other half).

In health interventions, essential drugs and a minimum package of reproductive health kits and supplies will be provided to selected health facilities in vulnerable areas with high malnutrition, and full coverage measles immunisation will be supported.

The overall surveillance system will be strengthened for early warning of possible health and nutrition crisis, detection of outbreaks and other risk signs. In order to accomplish this, training and expansion of staff in health facilities and regional health offices will be supported. Indicators will include the use of epidemiological trends in prevalence and incidence rates of malnutrition, mortality and morbidity in infectious diseases, maternal health statistics and mortality. It will also include the numbers of beneficiaries serviced by programmes, including attendance in special feeding, and the numbers of clinics assisted and surveys conducted.

### Monitoring

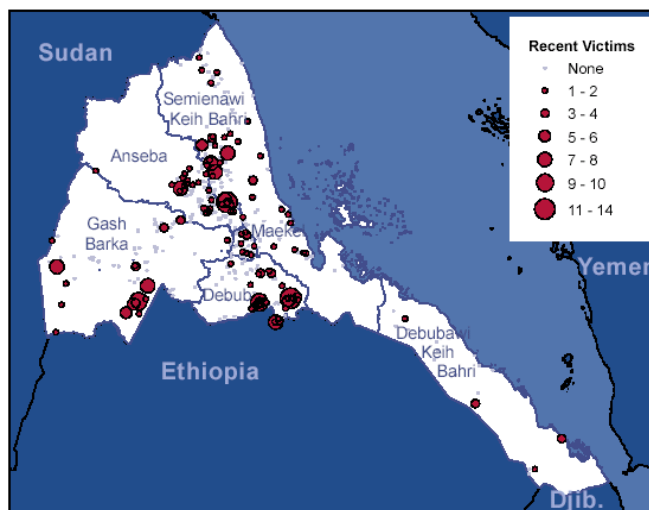
Under the leadership of the MoH, planned activities of UN agencies, joint field visits and sector meetings will be conducted and periodic reviews performed. Use of existing coordination structures under the Humanitarian Coordination and the United Nations Development Assistance Framework (UNDAF) sub-working groups will be made.



### 3.4.H Mine Action

According to the recently completed Landmine Impact Survey, every region of Eritrea is seriously affected by landmines and UXO, as a result of the unfortunate legacy of World War II fighting, the thirty-year struggle for independence and the 1998-2000 border war.

Landmines affect at least 481 communities, with the highest number located in Semienawi Keih Bahri, Anseba, Gash-Barka and Debub. In total, 655,000 persons live in fear of landmines, over 100,000 persons live with some kind of disability, 40,000 await orthopaedic services and at least 5,385 persons have been killed or injured by landmines and UXO in the last 4½ years.



The impact of landmines can also be judged in terms of its effect on recovery. Twenty-one IDP areas of origin are contaminated by landmines and must receive mine action before families can safely return. Some 83% of mine-impacted communities report blocked access to pastureland, and 48% have blocked access to rain-fed cropland, making food self-sufficiency a distant future unless mine action intervenes. Sadly, humanitarian initiatives tend to move ahead without this fundamental activity, risking lives and preventing the sustainability of projects.

The needs of this sector have been concentrated into three priorities:

- Increase the national capacity in mine action;
- Continue mine action activities throughout the country, including mine clearance, marking, explosive ordnance disposal and MRE;
- Support programmes providing assistance to landmine survivors and the disabled.

Unless these needs are addressed, mine-affected communities will remain vulnerable and aid dependent, the devastating casualty rate in Eritrea will remain unchanged, and the forty thousand landmine survivors and people with disability requiring prosthetic services will have to wait even longer to regain their mobility and independence.

The Mine Action Sector made great progress in assessing and responding to this urgent situation in 2004, and intends to expand these activities in 2005. The projects being proposed by UNDP, UNICEF and the United Nations Mission in Ethiopia and Eritrea (UNMEE) Mine Action Coordination Centre (MACC) seek to assist some of Eritrea's most vulnerable populations. These organisations will also maximise the effectiveness of their programmes through integration and coordination, a hallmark of this sector and a part of the overarching UNDAF strategy for mine action.

UNDP has supported the Eritrean Demining Authority to field a spectrum of teams for mine clearance, which are now working in communities in Debub and Gash-Barka. In 2005, UNDP will carry out specific projects to support people with disability and IDPs, two groups that statistically live in poverty and uncertainty. These projects will enable national mine clearance for the return of IDPs to their communities that are currently mine and UXO contaminated, and strengthen the prosthetic care capabilities of ministry of Labour and Human Welfare's (MLHW) orthopaedic workshops through the development of locally manufactured components and the upgrading of equipment.

In 2004 UNICEF supported the Eritrean Demining Operations MRE field teams, which provide information to mine affected communities about the dangers of mines in order to reduce injuries, and continued its broad media and educational campaign in partnership with the Ministries of Information and Education. The recently completed Landmine Impact Survey provides important new baseline data, which will be used to further enhance and expand UNICEF's MRE interventions in 2005, with particular focus on children, IDPs and nomadic populations. During 2005, UNICEF will also embark on

new activities to provide psychosocial support and recreation for injured children and those living in mine-affected areas.

UNMEE's mine action assets have been working in the temporary security zone and adjacent areas since 2000. In 2005, the UNMEE MACC intends to continue these activities by providing support to the peacekeeping mission, conducting clearance for border demarcation and route verification, and contributing to humanitarian mine action through its clearance capacity, two MRE teams and explosive ordnance disposal team.

The objectives of the mine action sector for 2005 are as follows:

1. Land made safe for the return of approximately 70,000 IDPs currently awaiting resettlement;
2. Increased awareness of mine/UXO dangers and consequently a reduction in fatalities and accidents through MRE;
3. Increased number of individuals' access to prosthetic care, and improvement of the quality of care being offered; and
4. Continued UNMEE mine action in the temporary security zone, including MRE to reduce casualties.



These objectives will be monitored within existing organisational reporting frameworks. Eritrean Demining Authority and UNMEE reporting mechanisms monitor the number and type of mine incidents and casualties, and UNMEE monitors its own mine action activities. UNDP will continue to receive updates on the provision of orthopaedic care through MLHW, and national clearance activities are reported to UNDP on a regular basis.

In a country where mine and UXO contamination affects the lives of more than half a million people, mine action is essential and cannot be delayed while other humanitarian activities take place. For the security of the people and the sustainable development of Eritrea, the projects presented in the CAP 2005 must be implemented.

### **3.4.K Water and Sanitation**

Even in good times, only 22% of the rural population in Eritrea has access to protected water systems. Compounding this, the last four consecutive years of poor rainfall has led to one of the worst droughts to hit Eritrea, affecting about 60-70% of the country. Water levels in wells and boreholes are at an all time low. The recent National Nutrition Survey (NNSS/MoH, July 2004) found that 45% of respondents in Gash Barka reported a reduction in water quality in the first four months of 2004. Some sources have dried up entirely, reducing the number of people who had access to potable water throughout the country. The water points inventory and prioritisation carried out by the Water Resources Department revealed that 11 communities of 85,000 persons in acute water shortage have the possibility of developing water supply schemes while 65,000 persons have remote chances of developing potential water sources.

The drought has increased health and hygiene risks. Drying of surface water is compelling human and livestock to share the same sources, and in some areas people are forced to be displaced or moved in search of water. Women are suffering most, as they are generally responsible for fetching water and are compelled to travel greater distances to find water. Lack of water is making villages ration water. Illustrating the severity of the situation, in 2004, the water and sanitation sector provided emergency trucking of water to 54,000 beneficiaries and water supply schemes constructed to serve 90,100 drought and war affected population, mainly IDPs and returnees from Sudan, and also 98 schools in drought affected areas.

Prior to the late onset of the rains, almost all zones reported acute drinking water shortages. In major towns like Mendefera and AdiKeih (Debub) and Massawa (NRS), Keren (Anseba), Tessenay (Gash Barka), Asmara (Maekel) water trucking induced by the drying of storages and wells has been necessary. The Meteorological and Hydrological reports obtained from the Water Resources

Department and Meteorology service unit for the short rain showed that the rainfall was below normal through out the country.

In most of the winter rain regions of Northern and Southern Red Sea however, the water level has dropped up to 7 meters. Since there has been no substantive flow of streams from the highlands, the water table in these regions has not been recharged. Considering the scanty rainfall that has been recorded, it is feared that serious difficulties in drinking water supplies will be encountered extensively in 2004-2005. Unless unforeseen positive rainfall performance occurs, 60-80% of the rural population and livestock in the country areas will be adversely affected.

Water and hygiene related diseases are a major cause of public health problems in Eritrea. The HMIS report also states that diarrhoea accounted for 22% of in-patient cases in hospitals, with 5% of in-patients under 5 years of age in health centres. The NNSS results showed that in May 2004, 40 to 50% of surveyed children under five had been ill the previous two weeks, and of these some half from diarrhoea. There is also an apparent seasonal influence, with an increase of water and hygiene related diseases and deaths reported in July to December, following the rainy season. By and large, the risk factors for diarrhoea diseases are linked to poor nutrition compounded by lack of clean water and access to sanitation. More attention needs to be focused on the provision of safe water and adequate sanitation to prevent this morbidity and mortality in children.

Related to this, sanitation coverage in Eritrea is still very low, with only 3.6% of the rural population with access to improved sanitation facilities (Demographic and Health Survey (DHS), 2002). Therefore the GSE and partners will integrate water supply and sanitation components.

New challenges face the water sector. The low rainfall has led to recurring drought conditions, which in turn affects groundwater table resulting in drying up of many traditional water sources. The setting up of new camps remain a major challenge as they may be required when populations are in transit back to their home villages as a result of demarcation, as well as rehabilitation of old and construction of new water sources in return areas. In addition to the above issues, the general water supply and environmental sanitation situation in Eritrea is further complicated as having a large part of the rural population fetching water from long distances, placing a heavy burden on vulnerable groups, especially women and children. In some areas, expensive and difficult water trucking is the only option. In many areas the population is forced to use water from polluted sources. A large part of the population depends, either directly or indirectly, on livestock, which requires considerable quantities of water. Limited use of latrines, poor water supply and handling at household-level and poor personal and domestic hygiene contribute to diarrhoea, especially amongst children.

### **Strategy**

The right to water and sanitation services will be fulfilled through providing access to safe water and access to sanitation for the vulnerable population in Eritrea.

Priorities will be determined through partner coordination mechanisms to determine focus areas, technical parameters and division of responsibilities. Currently, more than 20 actors, including Government, UN agencies, international NGOs (INGOs), and local NGOs are involved in the water and environmental sanitation sector in Eritrea. The NGO's involved include: Haben, Cooperazione e Sviluppo (CESVI), and Manitese. The biweekly co-ordination meetings are chaired by the government and co-chaired by UNICEF. The Ministry of Local Government, MoH and regional administrations will assess conditions of water sources, define requirements and supervise and monitor project progress and control quality of work implemented by contractors and/or NGOs. The Water Resource Department will assist in the assessment of water sources. All projects will ensure that communities participate in the project, including in the necessary assessments/studies to determine the technology used. All technologies will be assessed based not only on their capital cost, but also on their recurrent cost.

To ensure that the investments are sustained, establishment of community management systems and hygiene and sanitation promotion is required. This will be undertaken in a participatory manner and will assist in empowering households to develop their coping mechanisms.

Many of the water supply and sanitation projects employ a holistic and medium-term approach to the provision of water and sanitation; meaning that projects focus not only on the provision of immediate water needs, but also tries to utilise the allocated resources in the most efficient way by providing

services that will have a use in the longer-term. This is done for example by building more permanent water supply facilities with only slightly higher costs than the construction of temporary facilities. At the same time many projects also include sanitation components, although sanitation – or the lack hereof – strictly speaking is not directly related to the drought or war. In IDP camps, sanitation is a necessity because of the high density of people.

### **Operational Objectives**

The following are the targets to be achieved by the end of 2005:

- An additional 183,274 drought affected and other vulnerable people have access to 20 l/day of safe water;
- The relocated population in camps have access to 20 l/day of safe water and adequate sanitation facilities;
- Throughout 2005 all 64,000 IDPs and expellees in camps will be assured access to 20 l/day of safe water and adequate sanitation facilities;
- Establishment of sustainable management systems are initiated for all long-term water supply facilities constructed or rehabilitated;
- 30 additional schools will have been provided with water supply and sanitation facilities;
- Sufficient emergency supplies, i.e. water trucks, hydrants, bladders, etc., are available to affected populations – to be achieved by March 2005;
- All IDPs, expellees and returnees from Sudan in camps are aware of the importance of improved hygiene and environmental sanitation facilities.

### **Indicators**

- Number of drought and other vulnerable people with access to 20 l/day of safe water;
- Percentage of IDPs and expellees relocated population in camps with access to 20 l/day of safe water;
- Percentage of water supply facilities constructed or rehabilitated with sustainable management system;
- Number of schools provided with water supply and sanitation;
- Number of water trucks, hydrants, bladders, available compared to required;
- Percentage of IDPs, relocated population and expellees in camps, and returnees from Sudan with access to adequate sanitation facilities and aware of the importance of improved hygiene and environmental sanitation facilities.

### **3.4.L Multi-sector (includes ONLY multi-sector refugee assistance)**

#### **Situation Analysis**

##### **Voluntary Repatriation and Reintegration of Eritrean Refugees from Sudan**

The voluntary repatriation operation coordinated through the Governments of Sudan, Eritrea and the UNHCR has assisted approximately 120,000 (of 230,000 total) Eritreans to return since May 2001. It is expected that 35,000 Eritreans will take the opportunity to return in 2004 and a further 5,000 in 2005. The operational timeframe for large-scale convoys will phase out at the end of 2004. From 2005, UNHCR will continue to voluntarily repatriate people on a case-by-case basis. The effective implementation of the Tripartite Agreement signed between the Governments of Sudan, Eritrea and UNHCR, is the key legal framework for the repatriation of the Eritrean refugees from Sudan. The programme also assumes that an appropriate environment of security is maintained for the voluntary repatriation and sustainable reintegration process to continue.

The Eritrean refugees in the Sudan constitute UNHCR's most protracted large-scale refugee situation in the world, and the resolution of this long-running situation through voluntary repatriation and sustainable reintegration remains UNHCR's main operational objective in Eritrea. All returning refugees are given an initial package including a shelter structure; essential household items and initial cash grant allowing them to begin the process of reintegration. WFP food rations support the process.

Returnees choose mainly to go to the Gash Barka Region - 95% of total returns. This region is largely devastated by war and protracted drought, lacking in basic infrastructure and essential social services. Land availability in certain returnee areas is also limited. UNHCR continues to closely monitor conditions of return so as to ensure that all enjoy the same rights as resident citizens, and are

not discriminated against, including access to services. Socio-economic reintegration needs, including the support needs of returnee-receiving communities, go well beyond UNHCR's Mandate, resources and operational capabilities. In the past year, UNHCR has initiated much work to address this gap through one of the Office's first "4Rs" (Repatriation, Reintegration, Reconstruction and Rehabilitation) pilot programme, as part of a joint UN strategy to foster synergy between agencies and funding institutions in the recovery process. UNHCR's activities are part of this integrated programme planning, and at the same time, the Office assists in building the capacity of the government to assume and manage these responsibilities in the longer term.

**Protection and Care and Maintenance Assistance to Sudanese, Somali and Other Asylum Seekers and Refugees in Eritrea**

Though Eritrea is neither a party to the 1951 Convention relating to the Status of Refugees nor the 1969 OAU Convention on the Specific Aspects of Refugee Problems in Africa, the country accepts asylum seekers on its territory and generally adheres to the principle of *non-refoulement*. UNHCR, through the Government Office of Refugee Affairs (ORA) protects and assists the relatively small, but complex and sensitive number of refugees from Somalia and the Sudan who have sought asylum in Eritrea - approximately 4,000 Somali and Sudanese refugees in two refugee camps and some 400 urban refugees and asylum seekers of various nationalities.

**Constraints**

Some repatriating refugees are returning to areas that have significant risks from mines and unexploded ordnance. The provision of further mine education programmes targeting returnee communities will be encouraged from government and UN partners. Additionally, climatic and soil conditions in the area of return makes food production under rain-fed cultivation un-reliable.

Reintegration efforts of UNHCR are, by design and requirement, only intermediate steps towards ensuring that basic long-term needs such as health, education, water/sanitation and agricultural assistance, are met. It is therefore essential to the long-term sustainability of returnees that development actors provide transitional bridging measures from relief to long-term development plans, especially as the majority of returnees are settling in an under-developed area of the country.

The lack of international and domestic legislation with regard to refugees complicates the legal protection provided by the State of Eritrea, and the full burden of durable solutions is placed on UNHCR. A governmental authority provides material assistance and physical protection with full funding from UNHCR.

Objectives	Measurable Indicators
<p><b>Voluntary Repatriation Operations for Eritrean Refugees in Sudan and elsewhere:</b></p> <ul style="list-style-type: none"> <li>• Facilitate the voluntary repatriation of some 5,000 Eritrean refugees from Sudan;</li> <li>• Address the immediate reintegration assistance needs of returnees and returnee-receiving areas;</li> <li>• Continue efforts to engage development actors in addressing the longer-term support needs of returnee-receiving areas.</li> </ul>	<ul style="list-style-type: none"> <li>• 5,000 returning refugees are transported to their chosen destinations in safety and dignity;</li> <li>• The initial reinsertion package is provided to each returning household in a timely manner;</li> <li>• Returnees are not discriminated against and enjoy the same rights and access to services as other Eritrean citizens, including access to primary health care, education, water and sanitation and community services;</li> <li>• Quick impact projects of essential infrastructure and basic social services continue to be implemented in returnee-receiving areas;</li> <li>• Development actors are provided with necessary information and technical support to incorporate returnee reintegration needs in their programmes.</li> </ul>
<p><b>Care and maintenance of Somali, Sudanese and Other Refugees and Asylum Seekers in Eritrea:</b></p> <ul style="list-style-type: none"> <li>• Protect and assist Sudanese, Somali refugees and individual cases from other countries, and seek durable solutions for these groups.</li> </ul>	<ul style="list-style-type: none"> <li>• An effective care and maintenance programme is administered;</li> <li>• The basic rights of the refugees are respected and direct interventions are made as necessary;</li> <li>• Eligible refugees are resettled on protection grounds;</li> <li>• The voluntary repatriation of those refugees who make an informed choice to repatriate is facilitated;</li> <li>• Capacity building on international protection and assistance to Government of Eritrea (GoE) regarding refugee and nationality issues.</li> </ul>

### **Strategy**

Aside from the mainly logistical exercise of transporting the returnees to their destinations of choice, there are three major elements to UNHCR Eritrea's strategy for the repatriation and sustainable reintegration of 40,000 Eritreans in 2005 (including 35,000 from the previous year). Returnees, many who have been out of Eritrea for up to 30 years, are provided with initial reinsertion assistance at the household level, reintegration assistance at the community level to ensure basic infrastructure and social services, and active promotion to engage development actors in addressing longer-term reintegration assistance needs.

The reinsertion package consists of four main components: a shelter structure to provide immediate protection from the elements; non-food items to be able to establish a functioning household immediately upon return; two months' food package provided by the WFP on arrival; and a cash grant to provide the returnees some flexibility in addressing their household's most urgent needs. Eritreans returning to rural areas are allocated two hectares of land per family by Government for agricultural purposes, as well as land to build a home. UNHCR closely monitors their reintegration to be able to ascertain and address returnee problems and issues as they arise.

The second major element of the repatriation and reintegration strategy is the provision of quick impact interventions at the community level to contribute to basic infrastructure and social service needs, which are all coordinated through the Government. This includes activities in water / sanitation, health care, education and agriculture in the areas of return. The established Zonal Recovery Committee (ZRC) is a key coordination mechanism. With the help of UNHCR, it was established in September 2001 as a body chaired by the Governor of Gash Barka with permanent members from the ERREC, UNHCR and concerned line ministries. The ZRC has been further expanded, through a signed tripartite Memoranda of Understanding, with UNDP, UNICEF and WFP, to formalise co-operation and support of mid-to-long term partners.

Eritrea is not a state party to any of the international refugee instruments or to either of the conventions relating to statelessness, and furthermore, does not have national legislation or administrative arrangements for dealing with refugee issues. Therefore, UNHCR's protection priorities include active promotion of accession to the relevant treaties; advocacy of interim measures expanding refugee rights; provision of advice on national legislation; training on international protection, ensuring minimum standards are met in both material and legal assistance in accordance with UNHCR's standards and indicators; provision of clarification and assistance to the Government of Eritrea regarding nationality issues, and direct involvement in the protection of individual cases.

Ensuring minimum standards in UNHCR's internal refugee status determination process; there will also be active efforts to provide durable solutions in order to decrease the number of persons of concern, as continued long-term life in the camps is not a solution.

### **Sectoral Co-ordination**

Two main governmental counterparts, ERREC and the Gash Barka Zoba [Regional] Administration (GBZA) are UNHCR's main partners for implementing repatriation and reintegration assistance. Close collaboration is also enjoyed with the Regional Directorates of the Ministries of Education, Health, Agriculture and Labour and Welfare in the Gash Barka Region. UNHCR also enjoys strong working relationships with NGOs. Refugee and statelessness issues are coordinated in cooperation with the ORA of the Department of Immigration and Nationality (DIN). UNHCR continues to work with the UN Resident/Humanitarian Coordinator as well as other UN Agencies, and continues to participate actively in inter-agency working groups including participation in the CAP, UNDAF, the UN Team Group on HIV/AIDS and Millennium Development Goals (MDG) initiatives.

#### **4. STRATEGIC MONITORING PLAN**

The Country Team and its partners will monitor the humanitarian context vis-à-vis population movements, levels of poverty, climatic conditions, access to vulnerable populations, security incidents and security phases, morbidity and mortality rates, and who does what where simple, measurable, achievable, realistic and time-bound (SMART) indicators that represent and describe the situation in each sector will be used to monitor progress. The Country Team will meet quarterly to discuss and agree on the need for major shifts in strategy and this will be reported through situation reports, donor alerts or a revision of the CAP. Current situations, be it political or security will be closely monitored in an effort to adapt to changes and update scenarios. Monitoring tools will be developed and used as a basis for discussion and analysis. The analysis will combine evidence and judgment. The Country Team, NGOs, Donors, ERREC, UNMEE, relevant line ministries and local government authorities will be involved in these discussions. Additionally, the Consultative forum for Government and the UN will be convened more frequently to discuss CAP issues.

Strategic monitoring aims to determine the extent to which humanitarian aid is saving lives and alleviating suffering. While efforts are underway to strengthen strategic monitoring in the CAP, monitoring frameworks (with related baseline studies) would be established to better measure progress towards achieving the goals of the Common Humanitarian Action Plan (CHAP).

The Country Team and its partners will promote the monitoring of the repatriation and reintegration exercises and encourage rights based approach to targeting of priority areas, such as the health, shelter and food security sectors. Monitoring within refugee camps and throughout returnee villages will be conducted to ensure rights are respected and that there are no cases of harassment, that freedom of movement is respected and access to services without discrimination continues. Within the framework of the National Nutrition Surveillance System, the use of the Coping Strategy Index, Vulnerability Assessment Mapping and several stakeholder workshops will help to enhance agencies' targeting mechanisms. In tackling the recurrent drought situation, the NFIS, WFP, FAO, OCHA and the Information and Coordination Centre (ICC) will jointly monitor and respond collectively. Early warnings, if the need arises, will be submitted thereby aborting large-scale famine, minimising the negative impact of the drought and preventing tragedies on an unprecedented scale. Periodic food and crop assessments will be jointly carried out. Although there is no clear evidence of irregularities or abuse of assistance, the Country Team will put in place a mechanism to monitor the protection of civilians, and sensitise the population to reporting cases of abuse and the judicial system of dealing with such cases.

Regular consultations between task forces, sectoral working groups, and periodic evaluation will constitute a major monitoring plan. Sectoral-related information will continue to be shared at monthly Working Group meetings. Discussions at the monthly General Humanitarian Coordination meetings will contribute to further enhance the system's effectiveness. These consultations will review goals and priorities of CAP projects and equally be used to target the most vulnerable groups vis-à-vis available resources. A quarterly assessment of financial resources will be encouraged. Monitoring the achievement of the strategic objectives, relative to success measures will be incorporated through our mid-year review where strategic priorities and activities are operationalised half way through the CAP cycle. Further, the Mid Year Review, which will focus more on evidence-based analysis of impact, will also be used to highlight achievements and shortfalls.

## 5. CRITERIA FOR PRIORITISATION OF PROJECTS

Following the collection of assessment data and the findings thereof, the UN Country Team agreed on the overall priorities for humanitarian response and all sectoral working groups developed strategies in line with these priorities. In order to ensure greater prioritisation and complementarity of action, the UN Country Team and its partners agreed during the preparation of the consolidated appeal document that all projects should adhere to agreed criteria for prioritisation and undergo both a technical and senior level review. To that end, Sectoral Working Group chairs and co-chairs reviewed all projects against agreed criteria and against the agreed sector objectives. To ensure accountability to the vetting process, the chairs and Co-Chairs of all sectoral working groups held a peer review of the projects, which then submitted a list of recommended projects for inclusion in the consolidated appeal. The Humanitarian Coordinator (HC) made a final review of these recommendations for inclusion in the CA document.

**The Country Team, under the leadership of the UN HC agreed on the following criteria for the inclusion of projects in the Consolidated Appeal:**

- Project will save lives;
- Project will stabilise the nutritional situation;
- Project will address priority vulnerable groups;
- Project will be implemented in a region considered to be a priority;
- Project will address the specific and priority needs of vulnerable groups targeted in this appeal;
- Project will reinforce people's coping mechanisms;
- Project will strengthen the capacity of local counterparts;
- Project will support the safety, protection, return and reintegration of refugees, displaced persons and expellees;
- Project will not duplicate other organisations' humanitarian interventions that are already planned or underway in the same region or area;
- Projects include communities in their assessment of needs;
- Projects account, where applicable, for the special gender needs of men and women, and boys and girls;
- Projects include a focus on HIV/AIDS.

**Consideration was also given to the:**

- Operational capacity, as well as the comparative advantage, of the appealing agency to implement the proposed project;
- Accessibility of the targeted area;
- Likelihood, based on historic funding patterns and donor commitment, that the agency will receive the funds it seeks;
- Overall distribution of projects within the sector;
- Likelihood that the project can demonstrate a measurable impact within one year;
- Sectoral objectives that have been developed to address priority needs.



## 6. SUMMARY: STRATEGIC FRAMEWORK FOR HUMANITARIAN RESPONSE

Strategic Priority	Corresponding Response Plan Objectives		Associated Projects
1. Prevent very high levels of acute malnutrition in children and adults in all six Zobas and improve food security through the provision of agricultural inputs	Agriculture	Increase agricultural production and quality of products	FAO - Emergency Provision of Seeds project FAO - production of quality seeds project FAO - support to Supplementary Feeding Centres project FAO - food security for HIV/AIDS affected households project CARE - Emergency Livestock Assistance project CARE - Seeds and Tractor Service project
		Improve coordination and monitoring between food aid and agricultural programmes	FAO - coordination of emergency agricultural activities
	Food	Provide food and improve household food security and nutrition status of 1,240,000 impoverished drought and war affected people	WFP EMOP and PRRO project
	Health	Reduce mortality and morbidity caused by malnutrition, communicable diseases and improve reproductive health services among vulnerable groups	WHO, UNICEF, UNFPA health and nutrition intervention
	Wat/San	Provide access to safe water and sanitation facilities for the vulnerable population in Eritrea.	UNICEF water and sanitation project Haben water project CESVI water supply project Mani Tesi hand pumps rehabilitation project
2. Ensure basic survival of highly vulnerable groups in all Zobas	Food	Provide food to 1,240,000 vulnerable population	WFP EMOP and PRRO project
	Health	Strengthen and expand life saving preventive measures Increase access for the target communities to, health care	WHO, UNFPA, UNICEF joint health project WFP EMOP and PRRO project
	Wat/San	Provide access to safe water and sanitation facilities for the vulnerable population in Eritrea.	UNICEF water and sanitation project Haben water project CESVI water supply project Mani Tesi hand pumps rehabilitation project
	Economic Recovery	Provide income generating-support to 2,800 destitute families Support 55,000 women and children in host and returnee communities	UNICEF income generating project CARE women's recovery project
3. Provide assistance, protection and seek sustainable durable solutions, including resettlement, reintegration and voluntary repatriation	Multi-sector	Facilitate voluntary repatriation of Eritrean returnees, provide reintegration assistance, support basic services / absorption capacity of receiving communities. Ensure effective protection, care and maintenance and pursue durable solutions for refugees and asylum seekers	UNHCR multi sector refugee project
	Family shelter	Provision of emergency shelter kits, tents and household items to 18,500 families	UNDP shelter and household items project
	Economic Recovery	Prevention of abandonment and abuse to vulnerable children through income generation support to 11,500 highly destitute families To empower women within target communities.	UNICEF Relief support for IDP women and children  CARE women and child protection project
	Education	Provide education for IDP children Provide education for refugee children	UNICEF education for IDP children UNHCR refugee project

**ERITREA**

<b>Strategic Priority</b>	<b>Corresponding Response Plan Objectives</b>		<b>Associated Projects</b>
4. Strengthen mine clearance to ensure the return of IDPs, reduce the number of mine/UXO incidents and strengthen prosthetic capacity	MRE Repatriation V/A	Reduce the number of mine/UXO incidents Return of IDPs Strengthen prosthetic capacity	UNMEE-MACC UNDP clearance project UNICEF mine risk education project UNDP prosthetic care project
5. Strengthen the implementation capacity of Government and civil society	Coordination and collection of data	Ensure the provision of relief assistance to beneficiaries Strengthen the capacity of government structures	OCHA coordination and Support project OCHA and UNFPA capacity building project

**Table II : Consolidated Appeal for  
Eritrea 2005**  
List of Projects - By Appealing Organisation  
as of 19 October 2004  
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

Page 1 of 3

Project Code	Sector Name	Sector/Activity	Original Requirements
<b>CARE INT</b>			
ERI-05/A01	AGRICULTURE	Emergency Livestock Assistance in Agro-pastoralist Communities in Drought Affected Areas in Debub - Eritrea	429,150
ERI-05/A07	AGRICULTURE	Provision of Seeds and Tractor Service for Land Preparation drought hit areas in Debub.	300,000
ERI-05/ER/I01	ECONOMIC RECOVERY AND INFRASTRUCTURE	Women's Recovery, Empowerment and Community Development Programme	270,841
<b>Sub total for CARE INT</b>			<b>999,991</b>
<b>CESVI</b>			
ERI-05/WS01	WATER AND SANITATION	Village Water Supply Systems	346,348
<b>Sub total for CESVI</b>			<b>346,348</b>
<b>FAO</b>			
ERI-05/A06	AGRICULTURE	Distribution of vegetable seeds and tools in support to Supplementary Feeding Centres	272,640
ERI-05/A04	AGRICULTURE	Emergency provision of seeds of cereals, legumes and vegetables to drought-affected farmers.	680,535
ERI-05/A03	AGRICULTURE	Improved food security for HIV/AIDS affected households	264,120
ERI-05/A02	AGRICULTURE	Support to the coordination of emergency agricultural activities and improvement of information system	313,110
ERI-05/A05	AGRICULTURE	Support to the quick rehabilitation of the production of quality seeds	665,093
<b>Sub total for FAO</b>			<b>2,195,498</b>
<b>HABEN</b>			
ERI-05/WS02	WATER AND SANITATION	Village water supply schemes	972,000
<b>Sub total for HABEN</b>			<b>972,000</b>

**Table II : Consolidated Appeal for  
Eritrea 2005**  
List of Projects - By Appealing Organisation  
as of 19 October 2004  
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

Page 2 of 3

Project Code	Sector Name	Sector/Activity	Original Requirements
<b>Mani Tese</b>			
ERI-05/WS03	WATER AND SANITATION	Hand Pumps Rehabilitation and Management	224,711
<b>Sub total for Mani Tese</b>			<b>224,711</b>
<b>OCHA</b>			
ERI-05/CSS01	COORDINATION AND SUPPORT SERVICES	Coordination and support system	526,681
ERI-05/CSS02A	COORDINATION AND SUPPORT SERVICES	Humanitarian capacity-building of national institutions	210,000
<b>Sub total for OCHA</b>			<b>736,681</b>
<b>UNDP</b>			
ERI-05/S/NF01	FAMILY SHELTER AND NON-FOOD ITEMS	Provision of Shelter and Household Items (includes transport costs)	7,148,000
ERI-05/MA02	MINE ACTION	Emergency Clearance for Resettlement of Displaced Persons	1,350,000
ERI-05/MA03	MINE ACTION	Strengthening Eritrea's Prosthetic Care Capabilities	1,376,555
<b>Sub total for UNDP</b>			<b>9,874,555</b>
<b>UNFPA</b>			
ERI-05/CSS02B	COORDINATION AND SUPPORT SERVICES	Humanitarian capacity-building of national institutions	194,250
ERI-05/H01C	HEALTH	Health and Nutrition Interventions in Drought Affected Populations In The State of Eritrea.	308,000
<b>Sub total for UNFPA</b>			<b>502,250</b>
<b>UNHCR</b>			
ERI-05/MS01	MULTI-SECTOR	Voluntary repatriation and reintegration of Eritrean refugees. International protection, care & maintenance & seeking of durable solutions for Sudanese, Somali & other asylum seekers and refugees in Eritrea.	12,783,757
<b>Sub total for UNHCR</b>			<b>12,783,757</b>

**Table II : Consolidated Appeal for  
Eritrea 2005**  
List of Projects - By Appealing Organisation  
as of 19 October 2004  
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

Page 3 of 3

Project Code	Sector Name	Sector/Activity	Original Requirements
<b>UNICEF</b>			
ERI-05/ER/102	ECONOMIC RECOVERY AND INFRASTRUCTURE	Income Generating to Vulnerable Families	2,248,182
ERI-05/E01	EDUCATION	Expanding Education for IDP Children	744,318
ERI-05/S/NF02	FAMILY SHELTER AND NON-FOOD ITEMS	Relief Support for IDP Children & Women	931,818
ERI-05/H01B	HEALTH	Health and Nutrition Interventions in Drought Affected Populations In The State of Eritrea.	3,784,318
ERI-05/MA01	MINE ACTION	Mine Risk Education	426,136
ERI-05/WS04	WATER AND SANITATION	Water Supply and Environmental Sanitation for Drought and War affected Population in Eritrea	4,956,000
<b>Sub total for UNICEF</b>			<b>13,090,772</b>
<b>WFP</b>			
ERI-05/F01	FOOD	Food assistance to people affected by displacement, economic downturn and crop failure in Eritrea. WFP EMOP 10261.01, PRRO 10192.0, PRRO 10192.01	114,400,000
<b>Sub total for WFP</b>			<b>114,400,000</b>
<b>WHO</b>			
ERI-05/H01A	HEALTH	Health and Nutrition Interventions in Drought Affected Populations In The State of Eritrea.	1,024,616
<b>Sub total for WHO</b>			<b>1,024,616</b>
<b>Grand Total:</b>			<b>157,151,179</b>

**Table III : Consolidated Appeal for  
Eritrea 2005**

List of Projects - By Sector  
as of 19 October 2004  
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

Page 1 of 3

Project Code	Appealing Agency	Sector/Activity	Original Requirements
<b>AGRICULTURE</b>			
ERI-05/A06	FAO	Distribution of vegetable seeds and tools in support to Supplementary Feeding Centres	272,640
ERI-05/A01	CARE INT	Emergency Livestock Assistance in Agro-pastoralist Communities in Drought Affected Areas in Debub - Eritrea	429,150
ERI-05/A04	FAO	Emergency provision of seeds of cereals, legumes and vegetables to drought-affected farmers.	680,535
ERI-05/A03	FAO	Improved food security for HIV/AIDS affected households	264,120
ERI-05/A07	CARE INT	Provision of Seeds and Tractor Service for Land Preparation drought hit areas in Debub.	300,000
ERI-05/A02	FAO	Support to the coordination of emergency agricultural activities and improvement of information system	313,110
ERI-05/A05	FAO	Support to the quick rehabilitation of the production of quality seeds	665,093
<b>Sub total for AGRICULTURE</b>			<b>2,924,648</b>
<b>COORDINATION AND SUPPORT SERVICES</b>			
ERI-05/CSS01	OCHA	Coordination and support system	526,681
ERI-05/CSS02A	OCHA	Humanitarian capacity-building of national institutions	210,000
ERI-05/CSS02B	UNFPA	Humanitarian capacity-building of national institutions	194,250
<b>Sub total for COORDINATION AND SUPPORT SERVICES</b>			<b>930,931</b>
<b>ECONOMIC RECOVERY AND INFRASTRUCTURE</b>			
ERI-05/ER/102	UNICEF	Income Generating to Vulnerable Families	2,248,182
ERI-05/ER/101	CARE INT	Women's Recovery, Empowerment and Community Development Programme	270,841
<b>Sub total for ECONOMIC RECOVERY AND INFRASTRUCTURE</b>			<b>2,519,023</b>
<b>EDUCATION</b>			
ERI-05/E01	UNICEF	Expanding Education for IDP Children	744,318
<b>Sub total for EDUCATION</b>			<b>744,318</b>

**Table III : Consolidated Appeal for  
Eritrea 2005**

List of Projects - By Sector  
as of 19 October 2004  
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

Page 2 of 3

Project Code	Appealing Agency	Sector/Activity	Original Requirements
<b>FAMILY SHELTER AND NON-FOOD ITEMS</b>			
ERI-05/S/NF01	UNDP	Provision of Shelter and Household Items (includes transport costs)	7,148,000
ERI-05/S/NF02	UNICEF	Relief Support for IDP Children & Women	931,818
<b>Sub total for FAMILY SHELTER AND NON-FOOD ITEMS</b>			<b>8,079,818</b>
<b>FOOD</b>			
ERI-05/F01	WFP	Food assistance to people affected by displacement, economic downturn and crop failure in Eritrea. WFP EMOP 10261.01, PRRO 10192.0, PRRO 10192.01	114,400,000
<b>Sub total for FOOD</b>			<b>114,400,000</b>
<b>HEALTH</b>			
ERI-05/H01A	WHO	Health and Nutrition Interventions in Drought Affected Populations In The State of Eritrea.	1,024,616
ERI-05/H01B	UNICEF	Health and Nutrition Interventions in Drought Affected Populations In The State of Eritrea.	3,784,318
ERI-05/H01C	UNFPA	Health and Nutrition Interventions in Drought Affected Populations In The State of Eritrea.	308,000
<b>Sub total for HEALTH</b>			<b>5,116,934</b>
<b>MINE ACTION</b>			
ERI-05/MA02	UNDP	Emergency Clearance for Resettlement of Displaced Persons	1,350,000
ERI-05/MA01	UNICEF	Mine Risk Education	426,136
ERI-05/MA03	UNDP	Strengthening Eritrea's Prosthetic Care Capabilities	1,376,555
<b>Sub total for MINE ACTION</b>			<b>3,152,691</b>
<b>MULTI-SECTOR</b>			
ERI-05/MS01	UNHCR	Voluntary repatriation and reintegration of Eritrean refugees. International protection, care & maintenance & seeking of durable solutions for Sudanese, Somali & other asylum seekers and refugees in Eritrea.	12,783,757
<b>Sub total for MULTI-SECTOR</b>			<b>12,783,757</b>

**Table III : Consolidated Appeal for  
Eritrea 2005**

List of Projects - By Sector  
as of 19 October 2004  
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by the respective appealing organisation.

Page 3 of 3

<b>Project Code</b>	<b>Appealing Agency</b>	<b>Sector/Activity</b>	<b>Original Requirements</b>
<b>WATER AND SANITATION</b>			
ERI-05/WS03	Mani Tese	Hand Pumps Rehabilitation and Management	224,711
ERI-05/WS02	HABEN	Village water supply schemes	972,000
ERI-05/WS01	CESVI	Village Water Supply Systems	346,348
ERI-05/WS04	UNICEF	Water Supply and Environmental Sanitation for Drought and War affected Population in Eritrea	4,956,000
<b>Sub total for WATER AND SANITATION</b>			<b>6,499,059</b>
<b>Grand Total</b>			<b>157,151,179</b>



## ANNEX I.

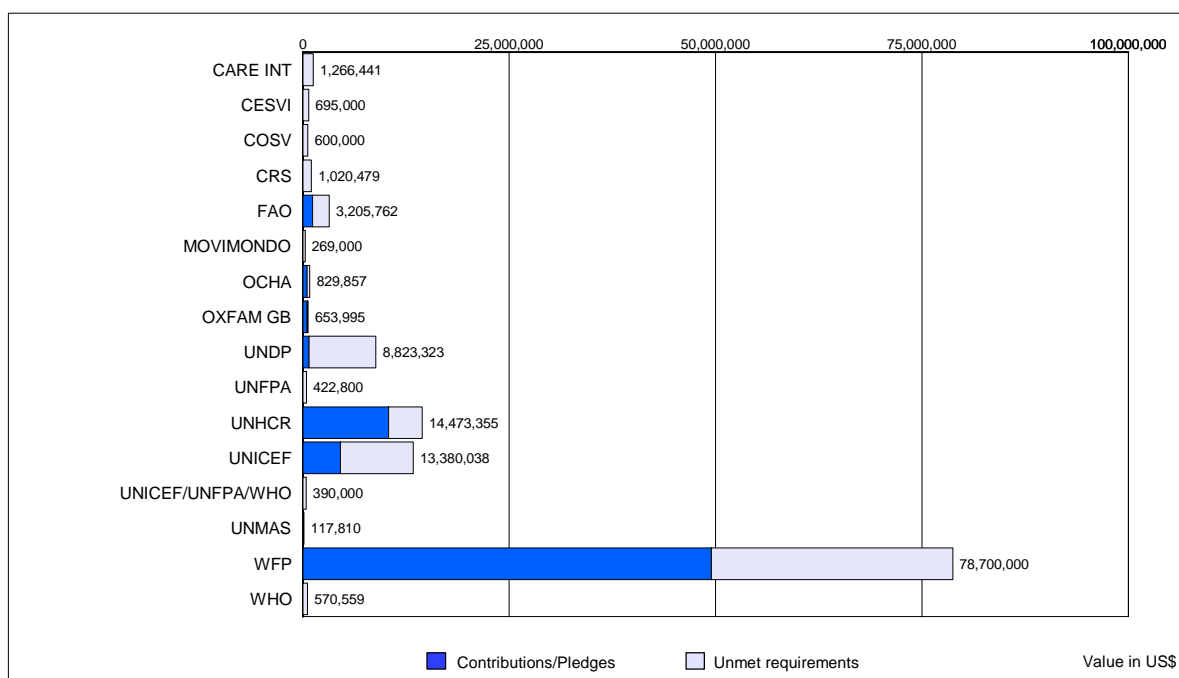
## DONOR RESPONSE TO THE 2004 APPEAL

**Table I : Consolidated Appeal for  
Eritrea 2004**

Requirements and Contributions per Appealing Organisation  
as of 19 October 2004  
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and the respective appealing organisation

Appealing Organisation	Original Requirements	Revised Requirements	Contributions	Pledges	Carryover	Total Resources Available	Unmet Requirements	% Covered
CARE INT	1,266,441	1,266,441	-	-	-	-	1,266,441	0.0%
CESVI	695,000	695,000	-	-	-	-	695,000	0.0%
COSV	600,000	600,000	-	-	-	-	600,000	0.0%
CRS	1,020,479	1,020,479	-	-	-	-	1,020,479	0.0%
FAO	3,205,762	3,205,762	871,584	290,000	-	1,161,584	2,044,178	36.2%
MOVIMONDO	269,000	269,000	-	-	-	-	269,000	0.0%
OCHA	879,857	829,857	474,168	66,806	-	540,974	288,883	65.2%
OXFAM GB	653,995	653,995	522,292	-	-	522,292	131,703	79.9%
UNDP	10,068,000	8,823,323	-	740,000	-	740,000	8,083,323	8.4%
UNFPA	457,580	422,800	-	-	-	-	422,800	0.0%
UNHCR	14,591,740	14,597,740	10,367,507	-	124,385	10,491,892	4,105,848	71.9%
UNICEF	13,694,674	13,380,038	4,567,674	-	-	4,567,674	8,812,364	34.1%
UNICEF/UNFPA/WHO	489,500	390,000	-	-	-	-	390,000	0.0%
UNMAS	417,000	117,810	-	54,811	-	54,811	62,999	46.5%
WFP	97,800,000	78,700,000	49,499,541	-	-	49,499,541	29,200,459	62.9%
WHO	1,130,000	570,559	-	-	-	-	570,559	0.0%
<b>GRAND TOTAL</b>	<b>147,239,028</b>	<b>125,542,804</b>	<b>66,302,766</b>	<b>1,151,617</b>	<b>124,385</b>	<b>67,578,768</b>	<b>57,964,036</b>	<b>53.8%</b>



**Table II : Consolidated Appeal for  
Eritrea 2004**  
List of Contributions  
as of 19 October 2004  
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and the respective appealing organisation

Page 1 of 3

**Part A - Non food**

Donor	Channel	Project Code	Sector/activity	Amount US\$
Allocations of unearmarked funds by UN agencies	FAO	ERI-04/A02	Food Security - Agriculture Component	400,000
Allocations of unearmarked funds by UN agencies	UNHCR	ERI-04/MS01	Voluntary repatriation and reintegration of Eritrean refugees; international protection, care and maintenance and durable solutions for Sudanese, Somali and other refugees in Eritrea	929,094
Carry Over	UNHCR	ERI-04/MS01	Voluntary repatriation and reintegration of Eritrean refugees; international protection, care and maintenance and durable solutions for Sudanese, Somali and other refugees in Eritrea	124,385
Canada	OCHA	ERI-04/CSS01	Coordination of humanitarian activities	55,446
European Commission	UNHCR	ERI-04/MS01	Voluntary repatriation and reintegration of Eritrean refugees; international protection, care and maintenance and durable solutions for Sudanese, Somali and other refugees in Eritrea	5,382,040
Finland	UNICEF	ERI-04/H02	Health and nutrition interventions	186,567
Finland	UNICEF	ERI-04/WS01	Water supply and environmental sanitation for the vulnerable population in Eritrea	186,567
Italy	UNHCR	ERI-04/MS01	Voluntary repatriation and reintegration of Eritrean refugees; international protection, care and maintenance and durable solutions for Sudanese, Somali and other refugees in Eritrea	306,373
Japan	UNHCR	ERI-04/MS01	Voluntary repatriation and reintegration of Eritrean refugees; international protection, care and maintenance and durable solutions for Sudanese, Somali and other refugees in Eritrea	1,400,000
Netherlands	UNMAS	ERI-04/MA04	Mine action programme	54,811
Norway	FAO	ERI-04/A02	Emergency provision of seeds of cereal, legumes and vegetables to drought-affected farmers	290,000
Norway	OCHA	ERI-04/CSS01	Coordination of humanitarian challenges and support	208,722
Norway	OCHA	ERI-04/CSS01	Coordination of humanitarian challenges and support	210,000
Norway	UNDP	ERI-04/MA02	Emergency access to orthopedic services through provision of community-based rehabilitation (CBR)	249,000
Norway	UNDP	ERI-04/MA03	Emergency clearance by employment of previous INGO teams	491,000
Norway	UNICEF	ERI-04/H02	Health and nutrition interventions	319,000

**Table II : Consolidated Appeal for  
Eritrea 2004**  
List of Contributions  
as of 19 October 2004  
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and the respective appealing organisation

Page 2 of 3

Norway	UNICEF	ERI-04/H02	Health and nutrition interventions	1,011,570
Norway	UNICEF	ERI-04/WS01	Water supply and environmental sanitation for the vulnerable population in Eritrea	203,560
Sweden	FAO	ERI-04/A01	Provision of supplementary feeds and improved health care for sustained animal production	190,000
Sweden	FAO	ERI-04/A02	Emergency provision of seeds of cereal, legumes and vegetables to drought-affected farmers	281,584
Sweden	OCHA	ERI-04/CSS01	Coordination of humanitarian challenges and support	66,806
Sweden	UNICEF	ERI-04/H02	Health and nutrition interventions	808,620
United Kingdom	OXFAM GB	ERI-04/WS02	Public health for the drought affected population in Areza, Dehub region	522,292
United Kingdom	UNICEF	ERI-04/H02	Health and nutrition interventions	851,790
United States	UNHCR	ERI-04/MS01	Voluntary repatriation and reintegration of Eritrean refugees; international protection, care and maintenance and durable solutions for Sudanese, Somali and other refugees in Eritrea	2,350,000
United States	UNICEF	ERI-04/WS01	Water supply and environmental sanitation for the vulnerable population in Eritrea	1,000,000
<b>Total non food</b>				<b>18,079,227</b>

**Table II : Consolidated Appeal for  
Eritrea 2004**  
List of Contributions  
as of 19 October 2004  
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and the respective appealing organisation

Page 3 of 3

**Part B - Food aid**

Donor	Food type	Food (MTs)	Amount US\$
Australia	Wheat flour	1789	757,576
Canada	Wheat flour	2574	1,145,038
Canada	Wheat flour	2591	1,127,820
Denmark		TBI	658,979
European Commission		tbi	12,033,695
Finland	Beans	859	497,513
Germany	Wheat flour	1360	609,756
Ireland		TBI	31,815
Ireland		to be provided	612,745
Ireland	Wheat flour	860	373,135
Japan		TBI	300,000
Japan	Wheat flour	43	171,608
Netherlands	Various	3881	2,222,000
Norway		TBI	142,272
Saudi Arabia		to be provided	20,000
Saudi Arabia		800	663,323
Sweden		4,009.4 MT	2,660,721
Switzerland		tbi	157,895
Switzerland	Wheat flour	146	467,295
United Kingdom	Wheat flour	4470	1,865,671
United States		to be provided	12,640,600
United States		TBI	27,000
United States			500,000
United States		tbi	1,330,084
United States	Peas	2000	1,136,100
United States	Various	22600	7,346,900
<b>Total food aid</b>			<b>49,499,541</b>
<b>Grand total</b>			<b>67,578,768</b>

**Table III : Consolidated Appeal for Eritrea 2004**

List of Projects (grouped by sector), with funding status of each as of 19 October 2004  
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and the respective appealing organisation

Page 1 of 2

Project Code	Sector/Activity	Appealing Organisation	Original Requirements	Revised Requirements	Contributions/Pledges/Carryover	Unmet Requirements
<b>AGRICULTURE</b>						
ERI-04/A01	Provision of supplementary feeds and improved health care for sustained animal production	FAO	907,368	907,368	190,000	717,368
ERI-04/A02	Emergency provision of seeds of cereal, legumes and vegetables to drought-affected farmers	FAO	1,214,736	1,214,736	971,584	243,152
ERI-04/A03	Emergency assistance for control of striga infestation in Gash Barka region	FAO	370,526	370,526	-	370,526
ERI-04/A04	Support to potato production through rehabilitation of the seed supply system	FAO	713,132	713,132	-	713,132
ERI-04/A05	Animal feed assistance	CARE INT	761,814	761,814	-	761,814
ERI-04/A06	Provision of seed and tractor service for land preparation in drought affected areas	CARE INT	504,627	504,627	-	504,627
ERI-04/A07	Support to pastoralists in central Dankalia and Araeta	CESVI	695,000	695,000	-	695,000
ERI-04/A08	Seed distribution programme using seed fair and voucher system	CRS	246,279	246,279	-	246,279
<b>Sub total for AGRICULTURE</b>			<b>5,413,482</b>	<b>5,413,482</b>	<b>1,161,584</b>	<b>4,251,898</b>
<b>COORDINATION AND SUPPORT SERVICES</b>						
ERI-04/CSS01	Coordination of humanitarian challenges and support	OCHA	629,857	629,857	540,974	88,883
ERI-04/CSS02	Humanitarian capacity-building of national institutions	OCHA	250,000	200,000	-	200,000
<b>Sub total for COORDINATION AND SUPPORT SERVICES</b>			<b>879,857</b>	<b>829,857</b>	<b>540,974</b>	<b>288,883</b>
<b>EDUCATION</b>						
ERI-04/E01	Education in emergencies	UNICEF	2,366,909	2,052,273	-	2,052,273
<b>Sub total for EDUCATION</b>			<b>2,366,909</b>	<b>2,052,273</b>	<b>-</b>	<b>2,052,273</b>
<b>FAMILY SHELTER AND NON-FOOD ITEMS</b>						
ERI-04/S/NF01	Provision of shelter and household items	UNDP	8,560,000	7,315,323	-	7,315,323
<b>Sub total for FAMILY SHELTER AND NON-FOOD ITEMS</b>			<b>8,560,000</b>	<b>7,315,323</b>	<b>-</b>	<b>7,315,323</b>
<b>FOOD</b>						
ERI-04/F01	Emergency food assistance to food deficit drought-affected rural populations of Eritrea (EMOP)	WFP	53,300,000	53,300,000	38,018,071	15,281,929
ERI-04/F02	Food assistance to war and drought-affected persons in Eritrea (PRRO 10192.0)	WFP	44,500,000	25,400,000	11,481,470	13,918,530
<b>Sub total for FOOD</b>			<b>97,800,000</b>	<b>78,700,000</b>	<b>49,499,541</b>	<b>29,200,459</b>
<b>HEALTH</b>						
ERI-04/H01	Save the mother and her baby	UNFPA	457,580	422,800	-	422,800
ERI-04/H02	Health and nutrition interventions	UNICEF	4,381,500	4,381,500	3,177,547	1,203,953
ERI-04/H03	Integrated disease surveillance and response	WHO	1,130,000	570,559	-	570,559
ERI-04/H04	Provide adolescent girls full access to reproductive health education	CRS	276,000	276,000	-	276,000
ERI-04/H05	Protection of women and the youth against HIV/AIDS	UNICEF/UNFPA/WHO	489,500	390,000	-	390,000
ERI-04/H06	Support coping mechanisms of persons living with HIV/AIDS (PLHA) through education, provision of food and increased livelihood security	CRS	231,000	231,000	-	231,000

**Table III : Consolidated Appeal for  
Eritrea 2004**

List of Projects (grouped by sector), with funding status of each  
as of 19 October 2004  
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and the respective appealing organisation

Page 2 of 2

Project Code	Sector/Activity	Appealing Organisation	Original Requirements	Revised Requirements	Contributions/Pledges/Carryover	Unmet Requirements
<b>Sub total for HEALTH</b>			<b>6,965,580</b>	<b>6,271,859</b>	<b>3,177,547</b>	<b>3,094,312</b>
<b>MINE ACTION</b>						
ERI-04/MA01	Mine risk education	UNICEF	381,000	381,000	-	381,000
ERI-04/MA02	Emergency access to orthopedic services through provision of community based rehabilitation (CBR)	UNDP	249,000	249,000	249,000	-
ERI-04/MA03	Emergency clearance by employment of previous INGO teams	UNDP	1,259,000	1,259,000	491,000	768,000
ERI-04/MA04	UN Mission in Ethiopia and Eritrea Mine Action Coordination Centre (UNMEE MACC)	UNMAS	417,000	117,810	54,811	62,999
<b>Sub total for MINE ACTION</b>			<b>2,306,000</b>	<b>2,006,810</b>	<b>794,811</b>	<b>1,211,999</b>
<b>MULTI-SECTOR</b>						
ERI-04/MS01	Voluntary repatriation and reintegration of Eritrean refugees; international protection, care and maintenance and durable solutions for Sudanese, Somali and other refugees in Eritrea	UNHCR	14,591,740	14,597,740	10,491,892	4,105,848
<b>Sub total for MULTI-SECTOR</b>			<b>14,591,740</b>	<b>14,597,740</b>	<b>10,491,892</b>	<b>4,105,848</b>
<b>PROTECTION/HUMAN RIGHTS/RULE OF LAW</b>						
ERI-04/P/HR/RL01	Protection of vulnerable children and women	UNICEF	2,501,265	2,501,265	-	2,501,265
<b>Sub total for PROTECTION/HUMAN RIGHTS/RULE OF LAW</b>			<b>2,501,265</b>	<b>2,501,265</b>	<b>-</b>	<b>2,501,265</b>
<b>SECTOR NOT YET SPECIFIED</b>						
ERI-04/UNICEF	Awaiting confirmation	UNICEF	-	-	-	-
<b>Sub total for SECTOR NOT YET SPECIFIED</b>			<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>WATER AND SANITATION</b>						
ERI-04/WS01	Water supply and environmental sanitation for the vulnerable population in Eritrea	UNICEF	4,064,000	4,064,000	1,390,127	2,673,873
ERI-04/WS02	Public health for the drought affected population in Areza, Debub region	OXFAM GB	653,995	653,995	522,292	131,703
ERI-04/WS03	Increase the number of people with access to safe water	CRS	267,200	267,200	-	267,200
ERI-04/WS04	Water delivery in drought-affected areas in southern red sea region	MOVIMONDO	269,000	269,000	-	269,000
ERI-04/WS05	Water supply systems in Hirghigo, Kilo, Tiluk villages, Northern Red Sea region	COSV	600,000	600,000	-	600,000
<b>Sub total for WATER AND SANITATION</b>			<b>5,854,195</b>	<b>5,854,195</b>	<b>1,912,419</b>	<b>3,941,776</b>
<b>Grand Total</b>			<b>147,239,028</b>	<b>125,542,804</b>	<b>67,578,768</b>	<b>57,964,036</b>

**ERITREA**

**Table IV : Consolidated Appeal for  
Eritrea 2004**  
List of Contributions (grouped by sector)  
as of 19 October 2004  
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and the respective appealing Agency.

Page 1 of 2

Donor	Channel	Project code	Amount US\$
<b>AGRICULTURE</b>			
Allocations of unearmarked funds by UN agencies	FAO	ERI-04/A02	400,000
Norway	FAO	ERI-04/A02	290,000
Sweden	FAO	ERI-04/A01	190,000
Sweden	FAO	ERI-04/A02	281,584
<b>Subtotal for AGRICULTURE</b>			<b>1,161,584</b>
<b>COORDINATION AND SUPPORT SERVICES</b>			
Canada	OCHA	ERI-04/CSS01	55,446
Norway	OCHA	ERI-04/CSS01	208,722
Norway	OCHA	ERI-04/CSS01	210,000
Sweden	OCHA	ERI-04/CSS01	66,806
<b>Subtotal for COORDINATION AND SUPPORT SERVICES</b>			<b>540,974</b>
<b>FOOD</b>			
Australia	WFP	ERI-04/F02	757,576
Canada	WFP	ERI-04/F02	1,127,820
Canada	WFP	ERI-04/F01	1,145,038
Denmark	WFP	ERI-04/F02	658,979
European Commission	WFP	ERI-04/F01	12,033,695
Finland	WFP	ERI-04/F02	497,513
Germany	WFP	ERI-04/F02	609,756
Ireland	WFP	ERI-04/F01	612,745
Ireland	WFP	ERI-04/F02	31,815
Ireland	WFP	ERI-04/F02	373,135
Japan	WFP	ERI-04/F02	171,608
Japan	WFP	ERI-04/F01	300,000
Netherlands	WFP	ERI-04/F02	2,222,000
Norway	WFP	ERI-04/F01	142,272
Saudi Arabia	WFP	ERI-04/F02	663,323
Saudi Arabia	WFP	ERI-04/F02	20,000
Sweden	WFP	ERI-04/F01	2,660,721
Switzerland	WFP	ERI-04/F02	467,295
Switzerland	WFP	ERI-04/F02	157,895
United Kingdom	WFP	ERI-04/F02	1,865,671
United States	WFP	ERI-04/F02	500,000
United States	WFP	ERI-04/F02	27,000
United States	WFP	ERI-04/F02	1,330,084
United States	WFP	ERI-04/F01	1,136,100
United States	WFP	ERI-04/F01	7,346,900
United States	WFP	ERI-04/F01	12,640,600
<b>Subtotal for FOOD</b>			<b>49,499,541</b>

**Table IV : Consolidated Appeal for  
Eritrea 2004**  
List of Contributions (grouped by sector)  
as of 19 October 2004  
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and the respective appealing Agency.

Page 2 of 2

Donor	Channel	Project code	Amount US\$
<b>HEALTH</b>			
Finland	UNICEF	ERI-04/H02	186,567
Norway	UNICEF	ERI-04/H02	1,011,570
Norway	UNICEF	ERI-04/H02	319,000
Sweden	UNICEF	ERI-04/H02	808,620
United Kingdom	UNICEF	ERI-04/H02	851,790
<b>Subtotal for HEALTH</b>			<b>3,177,547</b>
<b>MINE ACTION</b>			
Netherlands	UNMAS	ERI-04/MA04	54,811
Norway	UNDP	ERI-04/MA03	491,000
Norway	UNDP	ERI-04/MA02	249,000
<b>Subtotal for MINE ACTION</b>			<b>794,811</b>
<b>MULTI-SECTOR</b>			
Allocations of unearmarked funds by UN agencies	UNHCR	ERI-04/MS01	124,385
Allocations of unearmarked funds by UN agencies	UNHCR	ERI-04/MS01	929,094
European Commission	UNHCR	ERI-04/MS01	5,382,040
Italy	UNHCR	ERI-04/MS01	306,373
Japan	UNHCR	ERI-04/MS01	1,400,000
United States	UNHCR	ERI-04/MS01	2,350,000
<b>Subtotal for MULTI-SECTOR</b>			<b>10,491,892</b>
<b>WATER AND SANITATION</b>			
Finland	UNICEF	ERI-04/WS01	186,567
Norway	UNICEF	ERI-04/WS01	203,560
United Kingdom	OXFAM GB	ERI-04/WS02	522,292
United States	UNICEF	ERI-04/WS01	1,000,000
<b>Subtotal for WATER AND SANITATION</b>			<b>1,912,419</b>
<b>Grand Total:</b>			<b>67,578,768</b>



**Table V & VI : Total Contributions per Donor: Consolidated Appeal and Total Humanitarian Assistance  
Eritrea 2004**

19 October 2004

**Table V: Consolidated Appeal**

Total Contributions per Donor (to projects listed in the Consolidated Appeal) [carry over not included]

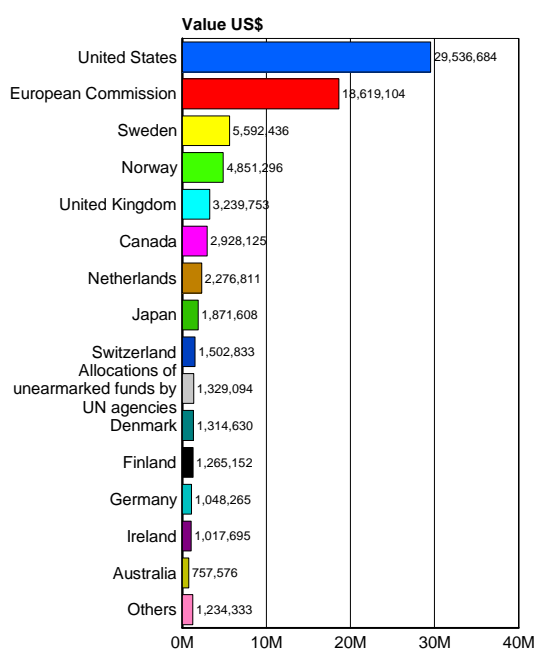
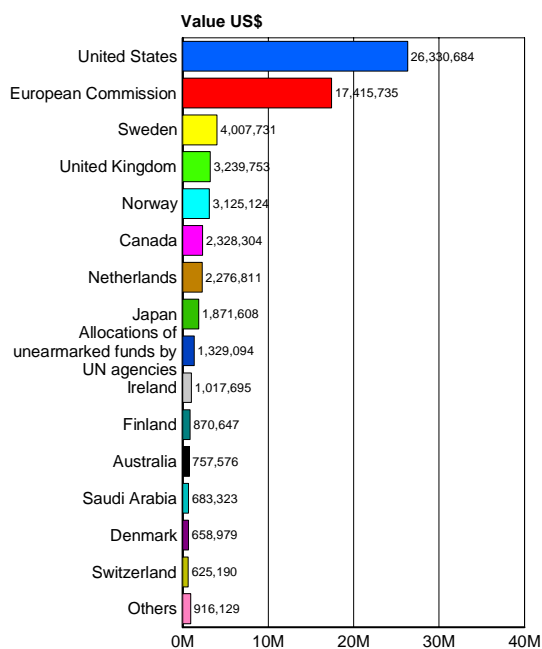
Donor	Value US\$	% of funding
United States	26,330,684	39.0%
European Commission	17,415,735	25.8%
Sweden	4,007,731	5.9%
United Kingdom	3,239,753	4.8%
Norway	3,125,124	4.6%
Canada	2,328,304	3.5%
Netherlands	2,276,811	3.4%
Japan	1,871,608	2.8%
Allocations of unearmarked funds by UN agencies	1,329,094	2.0%
Ireland	1,017,695	1.5%
Finland	870,647	1.3%
Australia	757,576	1.1%
Saudi Arabia	683,323	1.0%
Denmark	658,979	1.0%
Switzerland	625,190	0.9%
Others	916,129	1.4%
<b>Grand Total:</b>	<b>67,454,383</b>	<b>100.0%</b>

**Table VI: Total Humanitarian Assistance**

Total Humanitarian Assistance per Donor \* (carry over not included)

Donor	Value US\$	% of funding
United States	29,536,684	37.7%
European Commission	18,619,104	23.8%
Sweden	5,592,436	7.1%
Norway	4,851,296	6.2%
United Kingdom	3,239,753	4.1%
Canada	2,928,125	3.7%
Netherlands	2,276,811	2.9%
Japan	1,871,608	2.4%
Switzerland	1,502,833	1.9%
Allocations of unearmarked funds by UN agencies	1,329,094	1.7%
Denmark	1,314,630	1.7%
Finland	1,265,152	1.6%
Germany	1,048,265	1.3%
Ireland	1,017,695	1.3%
Australia	757,576	1.0%
Others	1,234,333	1.6%
<b>Grand Total:</b>	<b>78,385,395</b>	<b>100%</b>

\*) Includes contributions to the Consolidated Appeal and additional contribution outside of the Consolidated Appeal Process (bilateral, Red Cross, etc...)



**Table VII: Consolidated Appeal for  
Eritrea 2004**  
Other Contributions (to humanitarian projects not listed in the Consolidated Appeal)  
as of 19 October 2004  
<http://www.reliefweb.int/fts>

Note that this table is comprehensive to the extent that decisions have been reported to OCHA

Page 1 of 3

Date	Donor	Channel	Description	Value US\$
<b>Canada</b>				
16 Feb 04	Canada	CARE INT	Monitoring of humanitarian assistance	375,940
22 Mar 04	Canada	ICRC	Humanitarian assistance	223,881
<b>Subtotal for Canada</b>				<b>599,821</b>
<b>Denmark</b>				
27 Apr 04	Denmark	Caritas Denmark	Food aid programme	655,651
<b>Subtotal for Denmark</b>				<b>655,651</b>
<b>European Commission</b>				
23 Aug 04	European Commission	NGOs	Humanitarian assistance to the victims of climate hazard	1,203,369
<b>Subtotal for European Commission</b>				<b>1,203,369</b>
<b>Finland</b>				
2 Jun 04	Finland	IFRC	In kind - delegates	394,505
<b>Subtotal for Finland</b>				<b>394,505</b>
<b>Germany</b>				
1 Jul 04	Germany	DEA	Provision of 1,300 family tents for IDPs	182,704
13 May 04	Germany	UNMAS	Temporary funding of MECHEM mine clearance activities in the TSZ between Eritrea and Ethiopia	255,805
<b>Subtotal for Germany</b>				<b>438,509</b>
<b>Libyan Arab Jamahiriya</b>				
16 Feb 04	Libyan Arab Jamahiriya	IFRC	Humanitarian assistance	4,000
<b>Subtotal for Libyan Arab Jamahiriya</b>				<b>4,000</b>
<b>Norway</b>				
11 May 04	Norway	Bilateral	Support the rehabilitation of Gash Barka, Eritrea	655,022
6 May 04	Norway	IFRC	In kind - delegates	4,960
2 Jun 04	Norway	IFRC	In kind - delegates	28,800
3 Jun 04	Norway	NCA	Water and sanitation programme in Anseba and Semeinawi	325,075

**Table VII: Consolidated Appeal for  
Eritrea 2004**  
Other Contributions (to humanitarian projects not listed in the Consolidated Appeal)  
as of 19 October 2004  
<http://www.reliefweb.int/fts>

Note that this table is comprehensive to the extent that decisions have been reported to OCHA

Page 2 of 3

Date	Donor	Channel	Description	Value US\$
3 Jun 04	Norway	NCA	Supplementary food assistance in Anseba	421,194
13 May 04	Norway	Norway RC	IFRC appeal related to drought in Eritrea	291,121
<b>Subtotal for Norway</b>				<b>1,726,172</b>

<b>Private</b>				
6 Feb 04	Private	IFRC	Humanitarian assistance	14,976
6 May 04	Private	IFRC	Organisational development, health and care	21,692
18 Mar 04	Private	IFRC	Programme support	25,440
12 Feb 04	Private	IFRC	Humanitarian assistance	128,800
<b>Subtotal for Private</b>				<b>190,908</b>

<b>Sweden</b>				
2 Jun 04	Sweden	IFRC	In kind - delegates	15,200
6 May 04	Sweden	IFRC	Organisational development	100,750
19 Feb 04	Sweden	IFRC	Humanitarian assistance	134,800
31 Mar 04	Sweden	SRSA	Support to UNMEE/MACC and UNDP/MACBP in mine action in Eritrea	1,333,955
<b>Subtotal for Sweden</b>				<b>1,584,705</b>

<b>Switzerland</b>				
13 Aug 04	Switzerland	BUCO	Reconstruction aid for returnees in Gulsho	351,563
2 Jun 04	Switzerland	IFRC	In kind - delegates	14,080
13 Feb 04	Switzerland	SHA	Training of local surgeons	72,000
30 Jan 04	Switzerland	SHA	Personal SHA	440,000
<b>Subtotal for Switzerland</b>				<b>877,643</b>

<b>United Arab Emirates</b>				
3 May 04	United Arab Emirates	United Arab Emirates Red Crescent	35 tons of sugar, flour, rice and dates for the victims of draught	49,729
<b>Subtotal for United Arab Emirates</b>				<b>49,729</b>

<b>United States</b>				
2 Sep 04	United States	CARE	For poultry interventions for 10,000 beneficiaries in Gash Barka, Debub and Makaan zones (USAID/OFDA)	550,000

**Table VII: Consolidated Appeal for  
Eritrea 2004**  
Other Contributions (to humanitarian projects not listed in the Consolidated Appeal)  
as of 19 October 2004  
<http://www.reliefweb.int/fts>

Note that this table is comprehensive to the extent that decisions have been reported to OCHA

Page 3 of 3

Date	Donor	Channel	Description	Value US\$
2 Sep 04	United States	CONCERN	Development of water sources and promote hygiene in Debub (USAID/OFDA)	227,000
2 Sep 04	United States	CRS	For seed fairs and agricultural initiatives that assisted 27,000 beneficiaries (USAID/OFDA)	1,400,000
2 Sep 04	United States	IMC	For refugee health programmes (USAID/PRM)	770,000
2 Sep 04	United States	MCI	For community water sources in Northern Red Sea(USAID/OFDA)	209,000
2 Sep 04	United States	USAID	To support relief and mitigation activities due to extensive damaged caused by heavy rain and hail accompanied by high velocity wind and lightning in the Korokan IDP settlement in Shambiko sub-zone, Gash Barka zone	50,000
<b>Subtotal for United States</b>				<b>3,206,000</b>

<b>Grand Total:</b>	<b>10,931,012</b>
---------------------	-------------------

## ANNEX II.

## ACRONYMS AND ABBREVIATIONS

4Rs	Repatriation, Reintegration, Reconstruction and Rehabilitation
AIDS	Acquired Immune Deficiency Syndrome
ARI	Acute Respiratory Infection
BMI	Body Mass Index
CA	Consolidated Appeal
CAP	Consolidated Appeals Process
CARE	CARE International (NGO)
CESVI	Cooperazione e Sviluppo (Italian NGO)
CHAP	Common Humanitarian Action Plan
CRS	Catholic Relief Services
DHS	Demographic and Health Survey
DIN	Department of Immigration and Nationality
DOTS	Directly Observed Treatment Short-course
EDA	Eritrean Demining Authority
EDHS	Eritrea Demographic and Health Survey
EDO	Eritrean Demining Operations
EMOP	Emergency Operation
EPR	Emergency Preparedness and Response
ERREC	Eritrea Relief and Rehabilitation Commission
FAO	Food and Agriculture Organization
FFH	Food-for-Health
FFT	Food-for-Training
FGC	Female Genital Cutting
FSSWG	Food Security Sectoral Working Group
GAM	Global Acute Malnutrition
GBZA	Gash Barka Zoba (Regional) Administration
GIS	Geographical Information System
GoE	Government of Eritrea
GSE	Government of the State of Eritrea
HDR	Human Development Report
HIV	Human Immune Deficiency Syndrome
HMIS	Health Management Information Systems
HC	Humanitarian Coordinator
ICC	Information and Coordination Centre
ICRC	International Committee of the Red Cross
IDPs	Internally displaced persons
IPRS	Interim Poverty Reduction Strategy
L	Litre
LBW	Low Birth Weight
LSMS	Living Standards Measurement Survey
MACC	Mine Action Coordination Centre
MDG	Millennium Development Goals
MLHW	Ministry of Labour and Human Welfare
MoA	Ministry of Agriculture
MoH	Ministry of Health
MoLG	Ministry of Local Government
MRE	Mine Risk Education
MT	Metric Tonnes
NARI	National Agricultural Research Institutes
NFI	Non-Food Item
NFIS	National Food Information System

---

## ERITREA

---

NGO	Non-Governmental Organization
NNSS	National Nutrition Survey
NSEO	National Statistics and Evaluation Office
NUEYS	National Union of Eritrean Youth and Students
OCHA	Office for the Coordination of Humanitarian Affairs
ORA	Government Office of Refugee Affairs
PRRO	Protracted Relief and Recovery Operation
RONCO	United States demining contractor
SEMISH	National Health Information
SMART	Simple, Measurable, Achievable, Realistic and Time-bound
TB	Tuberculosis
TSZ	Temporary Security Zone
UN	United Nations
UNCT	United Nations Country Team
UNDAF	United Nations Development Assistance Framework
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
UNMEE	United Nations Mission in Ethiopia and Eritrea
UXO	Unexploded ordnance
VIP	Ventilated Pit Latrines
WFP	World Food Programme
WHO	World Health Organization
WRD	Water Resources Department
ZRC	Zonal Recovery Committee

## Consolidated Appeal Feedback Sheet

If you would like to comment on this document please do so below and fax this sheet to + 41-22-917-0368 (Attn: CAP Section) or scan it and email us: [CAP@ReliefWeb.int](mailto:CAP@ReliefWeb.int) Comments reaching us before 28 February 2005 will help us improve the CAP in time for 2006. Thank you very much for your time.

### Consolidated Appeals Process (CAP) Section, OCHA

---

Please write the name of the Consolidated Appeal on which you are commenting:

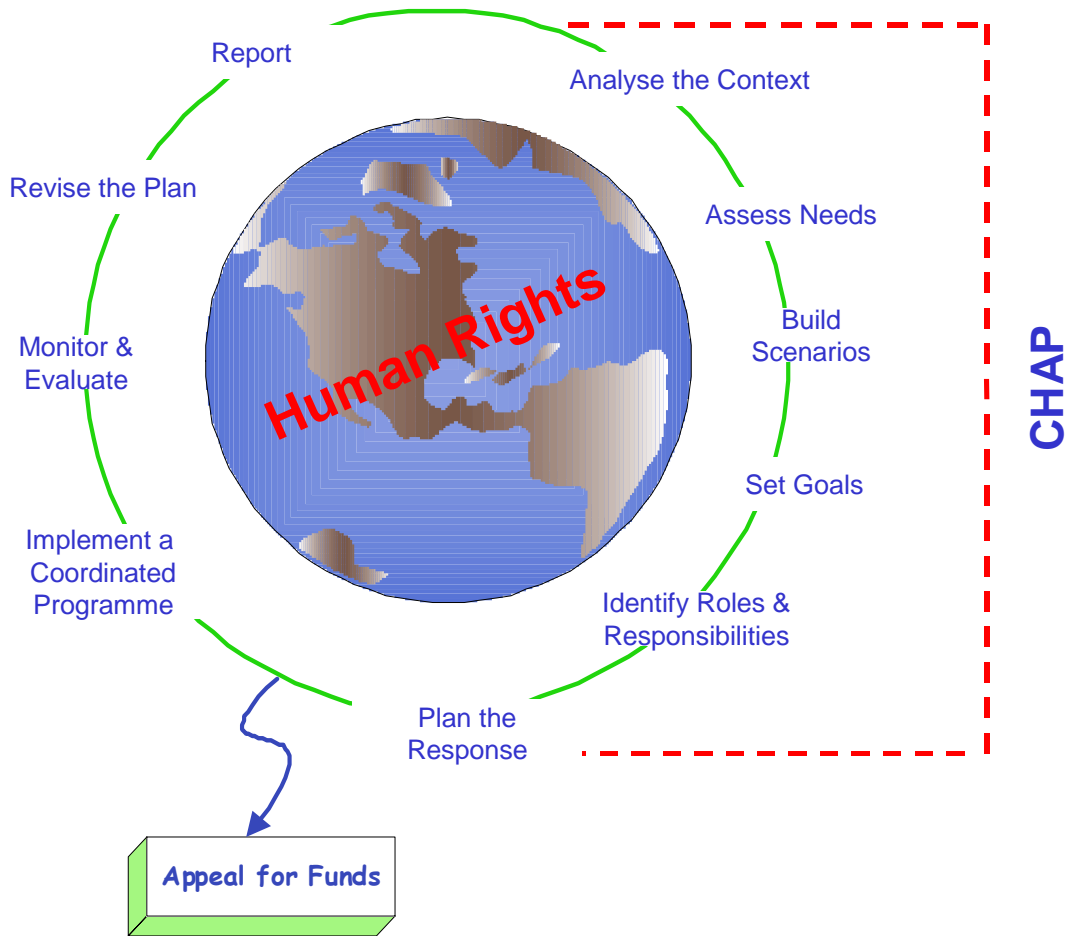
1. What did you think of the review of 2004?  
How could it be improved?
  
2. Is the context and prioritised humanitarian need clearly presented?  
How could it be improved?
  
3. To what extent do response plans address humanitarian needs?  
How could it be improved?
  
4. To what extent are roles and coordination mechanisms clearly presented?  
How could it be improved?
  
5. To what extent are budgets realistic and in line with the proposed actions?  
How could it be improved?
  
6. Is the presentation of the document lay-out and format clear and well written?  
How could it be improved?

Please make any additional comments on another sheet or by email.

Name:  
Title & Organisation:  
Email Address:

# The Consolidated Appeals Process:

*an inclusive, coordinated programme cycle in emergencies to:*



## OFFICE FOR THE COORDINATION OF HUMANITARIAN AFFAIRS (OCHA)

NEW YORK OFFICE  
UNITED NATIONS  
NEW YORK, N.Y. 10017  
USA

GENEVA OFFICE  
PALAIS DES NATIONS  
1211 GENEVA 10  
SWITZERLAND

TELEFAX: (1 212) 963.3630

TELEFAX: (41 22) 917.0368