West Guji Joint Flood Assessment report
May 21-24, 2020

Background:
In West Guji zone flood due excessive rain affected about six woredas (including Gelana where assessment was done two weeks ago) during the Gena 2020 season. The flood resulted in displacement of people, loss of livelihoods, damaged homes, social infrastructures such as schools, health facilities and water schemes.

Multi agency team comprised of Zone DRMO, IOM, OCHA, UNHCR, WHO, UNICEF, PI, DRC, WV, GOAL, CRS UNFPA and ERCS conducted rapid assessment in five woredas between 21-24 May 2020. The woredas are Dugda Dawa, Buhle Hora, Abaya, Suro Berguda and Melka Soda; The assessment was initiated by Zone DRMO through issuing letter to all humanitarian partners. The assessment team managed to visit three out of five woredas. The visited woredas are Dugda Dawa, Bule Hora and Abaya. The team managed to visit at least one kebele per woreda while in Dugda Dawa two kebeles were visited. The assessment team used methods such as data collection at the zone and woreda level, discussion with woreda sector offices, discussion with key informant and focus group in the visited Kebeles as well as observation by visiting displaced community houses, IDP living condition and flood affected farm lands. The objective of this rapid assessment is to identify and prioritize major needs, gaps for concerned and timely humanitarian response. The team summarized below the major findings, the detail situation, needs, gaps, ongoing response and immediate assistance required by respective sectors in a table by Woredas.

Findings:
The data collected from zone DRMO indicates that about 9,605 HHs (60,068 Individuals) are affected in 47 kebeles in five woredas while 1,031 HHs (6,210 Individuals) are displaced from 8 kebeles in the three woredas: Bule Hora, Abaya and Dugda Dawa. The team confirmed the same during the visit and discussion with three woredas regarding the number of affected and displaced by flood. Overall, the flood resulted in displacement of people, loss of livelihoods, damaged homes, social infrastructures such as school’s health facilities and water schemes. Total of 953 houses were damaged and flooded in the 8 kebeles. In all the affected kebeles 7,941 Ha of different crop lands belongs to 6,969 HHs were damaged by the flood.

In Dugda Dawa Woreda majority of the population practice both pastoralism and farming. The flood affected both their house and farm land, about 940HHs (5640 individuals) affected while 100HHs (500 individuals) are displaced, 2562 Ha of crop land damaged, 2 health facilities, 8 schools and 4 water schemes and latrines were damaged in 8 Kebeles. The displaced community in Medano and Finchawa 01 kebeles lost their food, houses and household items along with their livelihoods. People displaced from Medano are now living in school where as those displaced from Finchawa 01 are living with host community. In Hema Kircho Kebele the flood caused water lodging which completely damaged crop on about 400 ha farm land. The lodging also affected the pond which was used as a water source by about 600HHs (3,000 Individuals) as well as hindered access to health facility. The water lodging will soon be multiplication center for mosquito which will put the health of the affected community at risk. The team conducted discussion with key informant groups in the visited kebeles and identified that the affected community are in a critical need of emergency food, emergency shelter/NFI, WASH and health and nutrition as well as protection.

In Bule Hora woreda most of the livelihoods are farming coupled with pastoralism. The flood affected about 15 kebeles and a total of 6,097HHs (36,424 individuals) and displaced 346HHs (1,730 Individuals). The team visited Oga Dambi Kebele and observed the scale and severity of damage caused by flood. About 237
HHs (1,185 individuals) are observed residing in Oga Dambi primary and junior school and kebele administration office; in one class room about 8 – 10 HHs (an average 40 – 50 individual) sleep and 2 school latrines (not sex separated) are serving total population while others are living with host community. 6 out of 10 hand pumps are damaged by flood. No safe drinking water, IDPs source of drinking water is river and mostly children and women are going for fetching at estimated distance of 3 hours walking round trip. IDPs are living at collection site without separate sleeping room which is highly risky. Though no GBV report so far there are reports of domestic violence. The team conducted discussion with Women and men focus group as well as with key informants. According to the discussion; the affected and displaced community are in a critical need of emergency food, emergency shelter/NFI, WASH and health and nutrition and prioritized protections needs as indicated in the table under protection cluster.

In Abaya Woreda one kebele called Ledo is affected by flood; the kebele is recurrently affected by overflow of Gelana River, which cross both Gelana and Abaya woredas. The flood displaced about 585HHs (3,980 individuals). About 88 houses are completely damaged while 497 houses are flooded and not live-able right now. The team visited and observed that the displaced people are literally in open air under erected ITN; few with relatives. The flood damaged total of 620 hectares of farm land with perennial and annual crops. The area is fertile mainly producing fruits such as banana, mango, Pawpaw, cassava and other annual crops such as maize. The community are dependent on flood water using water treatment chemical provided by the woreda water office which is not adequate. The health service is at a distance of about 3 hours round trip. The team conducted community discussion at the visited kebele with women and men groups; the critical gaps identified are food, Emergency shelter and NFI, WASH, health and nutrition and protection needs.

In Suro Berguda and Melka Soda Woredas 15 and 7 kebeels are affected by flood respectively. In Suro Berguda total of 8,504(1,063HHs) and in Melka Soda 5520 individuals(520HHs) are affected. The community lost most of the produces. The affected hectares in melka Soda and Suro Berguda is 1165 and 1068 respectively. Although the team hasn’t visited the two woredas; based on the information collected at zone level the affected people are in need of food assistance; livelihoods support.

The major needs by priority according to the woreda and key informant discussion in the all visited Woredas and Kebeles is as follow:

1. Food  
2. Emergency shelter/NFI  
3. Mobile health and nutrition  
4. WASH  
5. ITN  
6. Emergency seed support

Major recommendations:

Immediate:

- Emergency shelter and NFI’s (To include plastic sheets, sleeping mats, blankets, kitchen sets, mosquito nets, mattresses etc.) 8 kebeles in three woredas: Bule Hora, Abaya and Dugda Dawa
- Immediate food assistance for the affected 60,068 people for the next six months; which is end of October 2020
- Mobile health and nutrition team deployment to provide both health and nutrition response in the affected kebeles which has lifesaving Sexual Reproductive Health (SRH) services component and Availing referral service (ambulance) for basic and comprehensive emergency obstetric and new born care at health center and hospital level.
- Psychosocial support services including dignity kit provision
- Provision of water trucking for immediate response where the accessibility allows such as Ogo Dambi Kebele in Bule Hora Woreda and distribute water treatment chemicals for the IDPs not accessible;
- Conduct minor scheme maintenances by replacing the damaged schemes in Ledo of Abaya and in Meda Finchawa and Kilta Misoma kebeles of Dugda Dawa
- Provision of Hygiene Kit (Full kit) and regular awareness creation Hygiene Promotion activity
- Provision of water collection and storage containers (WASH-NFI) and construction/rehabilitation of emergency latrine in IDPs sites such as Oga Dambi kebele of Bule Hora and Ledo Kebele of Abaya and Meda Finchawa, Kilta Misoma kebeels of Dugda Dawa Woreda
- Provision of ITN to families affected by flood, in particular in Ledo Kebele of Abaya and Meda Finchawa, Kilta Misoma and Hema kircho Kebeles of Dugda Dawa malaria endemic
- Strengthen supportive supervision by the zone health department to the woreda and also affected kebeles
- Provision livestock drugs for the disease specifically endemic to areas such as Dugda Dawa, Melka Soda, Suro Berguda and Abaya Woredas
- Provision of seed for the flood affected communities in all the woredas
- The need for security situation assessment by UNDSS in Melka Soda for real time information and advisory

**Medium and long term:**

- Support the reconstruction of damaged IDP houses
- Support families with livelihood assistance such as cash for recovery
- Reconstruct, maintain and refurbish the damaged facilities such as Water schemes, health facilities and schools
- Conduct comprehensive study in the catchment and watershed to mitigate or prevent the recurrent flood of Abaya; working with development organizations and Bule Hora University
- Strengthen safe hygiene practice of the IDP by regular HP activity; support HH latrine construction
- Provision of scholastic materials for school children and also support school furniture and WASH facilities when schools resume

**Limitation:**

- Lack of compiled, disaggregated and organized data at Kebele and Woredas
- Poor road conditions or flooded which impeded access to the affected kebeles; in parts of Bule Hora

**Access and Security:**

According to the woreda administration Office; volatile security condition in the kebeles of Dugda Dawa woreda in the last 3 years due to the UAG movement; the military operation against UAG exposed the population to multi fold risks including limited access to means of livelihood, physical injury and deaths. However, the access to most of the kebeles is improving recently. In Abaya Woreda ledo kebele which is at about 85 Kms from the center of the woreda (Guwanguwa) had some access issues along the road, but the situation improved, and no recent incidence reported. In the other hand, Melka Soda, which has been restricted for humanitarian due to UAG movement as well as operation between the security forces and the UAG; remains volatile with very limited access to the kebeles in the woreda.
### Table 1. Bule Hora Flood joint assessment summary finding by sector/cluster

<table>
<thead>
<tr>
<th>Sector</th>
<th>Overall situation</th>
<th>Findings/Needs and gaps</th>
<th>Ongoing response</th>
<th>Immediate response required</th>
</tr>
</thead>
</table>
| Food                 | The flood affected livelihoods such as farm lands, crops and disrupted the living condition of the IDPs and the affected communities | -The flood affected about 15 kebeles and a total of 6,097HHs (36,424 individuals) and displaced 346 HHs (1,730 Individuals)  
-22,995 Individuals (2,628HHs) lost their crop on the farm land  
-The coping mechanisms is significant reduction is number of meals as well as depend on relatives | No Ongoing food assistance                                                                                                                                          | -Emergency food assistance for the flood affected 36,424 individuals in the 15 kebeles  
-The food should be in full package                                                                                                                                  |
| WASH                 | -There is no nearby water source for the IDPs settled in Ogo Dambi; the sources were from roof catchment at the school compound which is already run out  
-The hygiene and sanitation situation in the current settlement is very critical with only one latrine at school compound while the second one is not functional (not completed) | -6 out of 10 hand pumps are damaged by flood  
-No safe drinking waters  
-IDPs source of drinking water is river & mostly children and women are going for fetching and take 3 hours walking  
-no hand washing facilities shortage of water chemicals  
-Potential risk of open deification in the settlement area in Ogo dambi  | No assistance                                                                                                                                                     | -Water tracking and water chemical distribution  
-Awareness creation on hygiene and sanitation including on COVID 19 prevention  
-providing hygiene kits and soaps  
-establishing temporary hand washing facilities and construction of emergency latrine  
-Rehabilitation of damaged water schemes                                                                                                                                     |
| Health and nutrition | The living condition of IDPs are very critical and vulnerable for disease outbreak including COVID 19, malnutrition and 4 kebeles (robi megada, galasa negeso, gorbicho gerba & mutru tilisa) have no road access for basic health services | -Shortage of essential drugs  
-No anti-malaria drugs & ITN  
-Received TSFP supplies washed away with homes  
-Shortage of contraceptive drugs (especially Piles & Depo-Provera) & there is high demand  
-There are only one toilet and open defecation is also common  
-Nutrition Screening result for a month of May 2020: < 5 years SAM 128, MAM 1903 & PLW 212 | -Nutrition screening is ongoing  
-Basic health service is in place, but the health posts are over whelmed                                                                                   | -Prepositioned essential drugs  
-Deployment of one MHNT for those have no road access for basic health service and Ogo Dambi settlement site  
-Decongestion of the collection site to minimize risk of disease outbreak  
-Prepositioned of TSFP supplies for the existing beneficiaries and newly identified MAMs  
-Temporary construction of public toilets                                                                                                                     |
<table>
<thead>
<tr>
<th>Emergency Shelter and NFI</th>
<th>- There are about 346 HHs displaced in the woreda in five kebeles: Ogo Dambi, Galessa Nagesso, Kuye, Bule Anno and Dibisa Ogo. The displaced people are residing in schools and with the host community.</th>
<th>- 346 HHs were reported damaged or flooded in all the five kebeles. - The displaced people lack shelter and NFIs.</th>
<th>No response</th>
<th>- Emergency shelter and NFIs for the 346 HHs in five kebeles. -</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education</td>
<td>- The IDPs are temporarily hosted in the school in Ogo Dambi; the class rooms and facility is overburdened; the furniture are damaged due to misuse by the crowd.</td>
<td>- 7 primary &amp; junior schools are partially damaged from 4 kebeles (3 galasa Negeso, 1 keletu sawa, 2 kelecha hache, &amp; 1 Ogo Dambi kebeles).</td>
<td>No rehabilitation activities</td>
<td>- Rehabilitation of damaged schools - Furniture support for Ogo Dambi school - Latrine rehabilitation.</td>
</tr>
<tr>
<td>Protection</td>
<td>- IDPs are living in a very congested condition which makes them vulnerable for disease outbreak and sexual exploitation as in the cases of Ogo Dambi; - Psychological trauma due poor protection environment (they are living in make shift settlement with no sufficient basic needs and services).</td>
<td>- Their current settlement type might increase exposure to COVID_19 pandemic, Cholera other diseases due to lack of access to pure drinking water, sanitation and hygiene service, dignity kits and unable to maintain social distancing since they are living in a one class room with 9-10 HHs particularly in Bule hora. - High risk of GBV.</td>
<td>- No ongoing response</td>
<td>- Strengthen the existing community structure for SGBV prevention and/or address the concerns through community-based protection. - Community based complain mechanism complemented by protection monitoring - Psychosocial support service. - Avail referral Pathways for SGBV and CP cases. - Targeted assistance to PSNs (persons living with disability, pregnant women and lactating mother, elderly and children). - PSEA and awareness raising education on protection and human rights issues.</td>
</tr>
<tr>
<td>HLP</td>
<td>- Government has a plan to relocate 5 kebeles (Oga Dambi, sole wachu, robi megada, haro madana kelecha hache) but no proper discussion was held with the IDPs.</td>
<td>- There is no identified feasible area for the relocation. - No consent from the IDPs.</td>
<td>No support</td>
<td>- Discussion with the government on the relocation plan - Support the government to conduct proper location planning - Arrange time and space for proper discussion with the IDPs to get their consent.</td>
</tr>
<tr>
<td>SMS</td>
<td>- A total of 346 HHs displaced by flash flood out of which 237 HHs are currently settled in OGO Dambi Kebele primary school and the Kebele Administration compound in a dire condition in</td>
<td>- Poor information management system. -- No functional complaint and feedback mechanism in place.</td>
<td>No</td>
<td>- Strengthening the established structure or community representatives through training and mentoring.</td>
</tr>
</tbody>
</table>
a crowded living space and with limited WASH services. Some of the displaced people live in a host community and with their relatives.
-6 members of the IDP representatives have been created to oversee and coordinate the activities in the two compounds/locations. The locations are adjacent to each other’s (exist sided by side) to manage easily

- No or limited service providers or humanitarian assistance in all the sites.
- No regular service monitoring and gap identification system
- No full profile of the affected populations

- Improving participation of women/girls in the community.
- Strengthening the coordination and information management system
- Conducting regular service monitoring and gap identification if service provision improved.
- conducting more awareness creation and community mobilization activities on COVID-19 (decongestion)
- Establishing complaint and feedback mechanism for accessing to the basic services.

Livelihood and agriculture
- Most of agricultural farm lands are flooded
- Food stock was either washed away or damaged
- Livelihoods disrupted

- All livelihoods of IDPs are damaged by flood
- There is critical food insecurity in the IDPs

- Immediate food assistance at least for the next 6 months until the next production
- Support with agricultural seeds and agricultural tools

Cash
- The livelihood and income source of the affected people is damaged by the flooding; unable to fulfill immediate basic need at this time.
- The IDPs lost almost all their food stock, houses, house hold assets and means of livelihoods

- Support the IDPs mainly the most vulnerable with multipurpose cash
- Undertake proper market assessment

Table 2 Abaya Flood joint assessment summary finding by sector/cluster

<table>
<thead>
<tr>
<th>Sector</th>
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<tbody>
<tr>
<td>Food</td>
<td>- Although Ledo kebele is fertile with access to irrigation water and producing fruits such as banana, mango, Pawpaw, cassava and other annual crops such as maize; the produces are damaged by flood</td>
<td>- The flood damaged total of 620 hectares of farm land with perennial and annual crops. - The community is dependent on Mogo (Not consumed in normal</td>
<td>- Maize (4 kg/HH and wheat flour 6 kg/HH was distributed to</td>
<td>- Need for immediate emergency food assistance for 585HHs (3,980 Individuals) - The food assistance should be provided for six months until next harvest - The food should include supplementary food</td>
</tr>
</tbody>
</table>

- The IDPs lost almost all their food stock, houses, house hold assets and means of livelihoods

- Support the IDPs mainly the most vulnerable with multipurpose cash
- Undertake proper market assessment
- People are displaced from their homes and farm lands times) as coping mechanisms since all stocks are depleted

**WASH**
- Most of HH latrine has been damaged by the flood as well as underground water which can lead to contamination of water service exposing the already vulnerable peoples to diseases.
- There is high risk of communicable disease outbreak due to overcrowded living condition.
- No latrine
- Shortage of water treatment
- The displaced people are currently using unsafe water (river) for drinking and other domestic use.
- Abaya woreda water office provided 100 CTN of Water purifier
- Emergency water trucking to fill the immediate water gap
- Temporary sanitation hygiene kits need to be given to the affected community
- Provision of water guard and access to clean water is a vital need for prevention of diseases outbreak
- Construction of emergency latrine

**Health and nutrition**
- The area is known by malaria endemic and there is also report indicating that there was 2 malaria case death over the past weeks, and there is still series risk of malaria outbreak as people were entirely exposed to the hazardous environment due to lack of shelter.
- There is high risk disease outbreak (Cholera, COVID-19 etc.) and risk of its transmission due to poor access to appropriate sanitation and hygiene practice at the site.
- Nutrition screening conducted in May in the kebele (Ledo) indicate 10 moderate acute malnutrition and 1 sever acute malnutrition of U5 children whereas for PLW indicate 38 PLW with acute malnutrition.
- Women delivers in the “collective sites” without medical assistance
- Shortage RDT and anti-malaria drugs.
- No nearby health facilities people need to walk 10-15 km for 2-3 hr to reach the nearest HP (Ledo Tora) for basic health/nutrition services.
- Irregular TSFP distribution for target beneficiary due to volatile security situation
- Access is restricted due to damaged road which will further affect the referral service as vehicle (Ambulance) couldn’t able to reach the site.
- Women and girls reported that they are forced to default family planning utilization due to road access.
- No Ongoing response
- Immediate repositioning essential life-saving therapeutic nutrition and medical supplies to avert complicated catastrophe.
- Ensure the continuity of basic health and nutrition activities through deploying one MHNT as a temporary intervention which has lifesaving SRH services like availing condom, clean delivery kit, family planning, CMR, STI management etc.
- Nutrition screening to identify nutrition status of affected peoples and prepositioned of TSFP supplies for existing and newly identified beneficiaries
- Spray for malaria and provision of ITN to families as the current ITN is being used as shelter
- Referral service (ambulance) for basic and comprehensive emergency obstetric and new born care Nutrition
| **Emergency Shelter and NFI** | -Flood displaced people are settled in communal land in Ledo kebele of Abaya Woeda  
- The IDPs are living in something cannot be considered as shelter (ITN erected using local materials); it doesn’t protect them from any cold or sun  
- few of the IDPs flee to find shelter with their relatives in adjacent kebele of Gelana Woreda | -No Shleter for the IDPs  
- No NFI for cooking or used as night clothes | No response | -Emergency shelter and NFI fro 585 HHs displaced in Ledo Kebel of Abaya woreda |
| **Protection** | -Social protection in place is weak, mutual support at household and community levels are affected due to separation of the family members (It was stated as some family members moved to nearby kebeles of Galana woreda whereby others moved to the existing collective centers).  
- Their current settlement type might increase exposure to COVID 19 pandemic, Cholera, malaria and other diseases due to lack of access to drinking water, sanitation and hygiene service, dignity kits and unable to maintain social distancing since they are living in congested situation in literally open air.  
- Families are separated, children and women are in vulnerable situations, susceptible to physical and psychological problems including child labor, sexual exploitation and abuse. | -Deaths and physical injuries (03 cases in Lado kebele,  
- About 26 PSNs are reported (19 women and 7 men) in Lado kebele of Abaya  
- Psychological trauma due poor protection environment  
- Child labor  
- Adolescent girls are culturally protected from SGBV in the community. However, some unconfirmed reports indicate SGBV incidents in connection to their current living condition. On the other hand, reporting is either discouraged and/or denied due to influence of the culture over the | No Ongoing assistance in protection sector | - Strengthen the existing community structure for SGBV prevention and/or address the concerns through community-based protection.  
- Community based complain mechanism complemented by protection monitoring  
- Psychosocial support service.  
- Avail referral Pathways for SGBV and CP cases.  
- Targeted assistance to PSNs (persons living with disability, pregnant women and lactating mother, elderly and children). |
|                |政府结构。已婚妇女面临强奸；有一起案件在评估期间报告。早婚，不希望怀孕/早孕，离婚而没有得到适当的资源分享，家庭暴力在Lado Kerbele常见。
- 缺乏安全转介机制和报告系统，用于SGBV和CP案件。
- 在IDP营地，妇女和女孩买不起尊严包。
- PSEA和提高保护和人权问题的认识教育。
- 尊严包的提供。

### HLP
- IDPs已定居在集体土地上，通过建立临时住所使用ITN，既不保护他们免受寒冷也不保护免受阳光。
- 没有合法的土地登记，但它被视为集体。
- 它在特定的区域更接近村庄。
- 没有支持。
- 需要澄清土地的合法性，并在集体庇护所和紧急化粪池建设的情况下用于集体目的。

### SMS
- Ledo Kebele的定居点是拥挤的情况，几乎没有庇护和NFI给家庭
- IDPs居住在ITN建立的临时住所，既不保护他们免受寒冷也不保护免受阳光。
- 没有社区结构来协调定居点。
- 需要建立社区结构来协调定居点。
- 建立适当的信息共享和投诉处理机制。

### Livelihood and Agriculture
- 大部分的农田被水淹没，严重影响了社区的生产。
- 其他生计手段是游牧，但家畜应迁移到其他地区寻找放牧土地。
- 受影响社区的粮食安全正在恶化；没有粮食库存，已被洗掉，人们使用Mogo（当地食物）作为食物来生存。
- 食物被大多数的孕妇和儿童因为其难闻的气味和食物的性质而嫌弃。
- 没有援助。
- 灾难粮食援助直到下一个收获
- 灾难种子支持为下一季种植
- 补偿失去的多年生作物如芒果、香蕉和番木瓜。
Cash - The livelihood and income source of the affected people is damaged by the flooding; unable to fulfill immediate basic need at this time.

- The IDPs lost almost all their food stock, houses, household assets and means of livelihoods

- No ongoing assistance

- Support the IDPs mainly the most vulnerable with multipurpose cash

- Undertake proper market assessment

Table 3. Dugda Dawa Flood joint assessment summary finding by sector/cluster

<table>
<thead>
<tr>
<th>Sector</th>
<th>Overall situation</th>
<th>Findings/Needs and gaps</th>
<th>Ongoing response</th>
<th>Immediate response required</th>
</tr>
</thead>
</table>
| Food            | - Flood damaged crop farm that belongs to about 840 HHs (5,140 individuals) in seven kebeles while it affected the crop farm and food stock of about 100 HHs (500 individuals) in two kebeles of Dugda Dawa Woreda. | - There is critical food shortage for 5,640 individuals  
- Coping mechanisms is depending on relatives and borrowing                                                                             | - Relief food and PSNP is in Hema Kircho Kebele but supports only very few people                                                  | - Emergency food assistance for the affected communities for the next six months  
- Targeting and identification of those people already in the relief or PSNP in Hema Koricho kebele |
| WASH            | - Inadequate water supply as there was only one borehole for water supply and this imposed communities to utilize a river as option.  
- The flood affected the previous water source (pond) in the case of Hema Koricho kebeles d                                                                 | - The displaced people are currently using unsafe water for drinking and other domestic use  
- Most of HH toilets have been collapsed, some of the toilets spell over bad smell  
- Shortage of water treatment chemicals.  
- Mada Finca’a (02) kebele and Kilta Misoma kebele have five other boreholes pipe line which is not installed | No response                                                                                                                                               | - HH water treatment chemical should be provided and community mobilization for its utilization.  
- Urgent and immediate hand washing facility should be established in order to avoid disease outbreak.  
- Construction of public latrine for the affected community for human excrete disposal.  
- Installing pipe line for 5 boreholes  
- Distributing of WASH NFI for the affected peoples |
| Health and nutrition | - Pneumonia, Malaria, Malnutrition, Diarrhea and Scabies are top-5 morbidity for under-five children  
- There is unconfirmed scabies outbreak in the flood affected community.                                                                                                                                  | - Routine medication (antibiotic) stock out in Finchawa HC.  
- One health center has been partially damaged (Finchawa) and where as one health post is fully damaged.                                                                                                    | Routine health service by existing facilities                                                                                                    | - Pre-positioned of essential drugs for Finchwaha health center  
- Deployment of 1 MHNT for those kebeles have no access for medical care |
<table>
<thead>
<tr>
<th>Emergency Shelter and NFI</th>
<th>Nutrition screening conducted in May in the woreda indicate 922 moderate acute malnutrition and 42 severe acute malnutrition of U5 children whereas for PLW indicate 989 PLW with acute malnutrition.</th>
<th>- Access to four health post has been affected due to damaged road. - There is no TSFP for moderate acute malnutrition children and pregnant and lactating women. - Service Delivery; shortage of staff and delay of nutrition supply delivery to the end point-of-use due to logistic constraint.</th>
<th>• Prepositioned of TSFP supplies for existing and newly identified beneficiaries • Social mobilization on hygiene promotion activities. • Continued nutrition screening • Rehabilitation of damaged facilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education</td>
<td>Displaced people are hosted with relatives in Finchawa 01 and Madano kebeles</td>
<td>They have no shelter and NFI</td>
<td>-Shelter and NFI for the 100 HHs displaced in the two kebeles of Dugda Dawa Woreda</td>
</tr>
<tr>
<td>Protection</td>
<td>Two schools were flooded in Hema Koricho kebele</td>
<td>The flooded schools furniture is damaged</td>
<td>-Need for replacement of furniture</td>
</tr>
<tr>
<td>Protection</td>
<td>According to the woreda administration Office; volatile security condition in the kebeles of Dugda dawa woreda in the last 3 years following the military operation against UAG exposed the population to multi-fold risks including limited access to means of livelihood, physical injury and deaths. Moreover, the situation is aggravated with recent heavy rain which resulted to flooding and swampy water that overflow to the farm land and damaged the crops.</td>
<td>Unconfirmed numbers of death and physical injury due to insecurity in Dugda Dawa) Lack of basic needs such as food, water, health exposes them to negative coping mechanisms including opting to early marriage</td>
<td>-Strengthen the existing community structure for SGBV prevention and/or address the concerns through community-based protection. -Community based complain mechanism complemented by protection monitoring - Psychosocial support service. - Avail referral Pathways for SGBV and CP cases</td>
</tr>
<tr>
<td>SMS</td>
<td>There are 100 HHs reported displaced in Dugda Dawa Woreda in Finchawa 01 and Madano kebeles</td>
<td>Poor information management system No or limited service providers in all the sites. No regular service monitoring and gap identification system. No or</td>
<td>- As there was few numbers of displacement, the government can manage needful coordination with the service providers and the communities. No need for formulating the community governance was acknowledged.</td>
</tr>
<tr>
<td>Category</td>
<td>Issue Description</td>
<td>Solutions</td>
<td></td>
</tr>
<tr>
<td>------------------------</td>
<td>------------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Livelihood and agriculture</td>
<td>The flood affected the livelihoods of the communities; flooded farm land, flooded houses, flooded grazing land</td>
<td>• Service providing partners need to enforce the communities to improve the women’s participation in social activities. While providing the services, service providers/partners may need to strengthen the awareness prior to the service delivery so that the communities are aware of what they can do for improving the condition during the displacement settlement and coordinate/communicate within the communities as well as with the partners.</td>
<td></td>
</tr>
</tbody>
</table>
| Livelihood and agriculture | Food stock and farm lands flooded. Total of 2,562 hectares of land flooded affecting the livelihoods of 5,640 individuals | No assistance | - Emergency seed for the next season  
- Cash support to recover their livelihoods |
| Cash                   | The 100 IDPs lost all their livelihoods and their houses.  
- They are currently residing with relatives and school facilities  
- No means of livelihood | No assistance | - Cash assistance to the 100HHs should be prioritized to help them survive the critical time |
### Table 4: flood affected and displaced HHs and individuals by Woreda

<table>
<thead>
<tr>
<th>Woreda</th>
<th>No of kebeles affected</th>
<th>Affected HH</th>
<th>Individuals</th>
<th>Displaced HH</th>
<th>Individuals</th>
<th>No. Kebeles displaced</th>
<th>Farm land affected</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dugda Dawa</td>
<td>9</td>
<td>940</td>
<td>5640</td>
<td>100</td>
<td>500</td>
<td>2</td>
<td>2562</td>
</tr>
<tr>
<td>Melka Soda</td>
<td>7</td>
<td>920</td>
<td>5520</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>450</td>
</tr>
<tr>
<td>Bule Hora</td>
<td>15</td>
<td>6097</td>
<td>36424</td>
<td>346</td>
<td>1,730</td>
<td>5</td>
<td>2628</td>
</tr>
<tr>
<td>Suro Berguda</td>
<td>15</td>
<td>1063</td>
<td>8504</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1681</td>
</tr>
<tr>
<td>Abaya</td>
<td>1</td>
<td>585</td>
<td>3980</td>
<td>585</td>
<td>3980</td>
<td>1</td>
<td>620</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>47</strong></td>
<td><strong>9605</strong></td>
<td><strong>60068</strong></td>
<td><strong>1,031</strong></td>
<td><strong>6,210</strong></td>
<td><strong>8</strong></td>
<td><strong>7941</strong></td>
</tr>
</tbody>
</table>

### Table 5: Damaged and flooded Houses as well as IDPs by Woreda and Kebele

<table>
<thead>
<tr>
<th>Woreda</th>
<th>Kebele</th>
<th>CIS</th>
<th>Thatch Roof</th>
<th>Plastic</th>
<th>Flooded</th>
<th>Total</th>
<th>Remark</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bule Hora</td>
<td>Ogo Dambi</td>
<td>38</td>
<td>113</td>
<td>88</td>
<td>76</td>
<td>315</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Galessa Nageso Rural</td>
<td>7</td>
<td>15</td>
<td>0</td>
<td>0</td>
<td>22</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Kuye</td>
<td>1</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Dibisa ogo</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Bule Anno</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>0</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Abaya</td>
<td>Ledo</td>
<td>16</td>
<td>72</td>
<td>0</td>
<td>497</td>
<td>585</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Medano</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>63</td>
<td>63</td>
<td></td>
</tr>
<tr>
<td>Dugda Dawa</td>
<td>Finchawa 01</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>37</td>
<td>37</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td><strong>64</strong></td>
<td><strong>204</strong></td>
<td><strong>90</strong></td>
<td><strong>673</strong></td>
<td><strong>1031</strong></td>
<td></td>
</tr>
</tbody>
</table>