

2018 - 2020

RESULTS REPORT













UNDAF 2016 - 2020



**UNITED
NATIONS
ETHIOPIA**
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2020

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FOREWORD

by the UN Resident and Humanitarian Coordinator

It is my pleasure to present the UNDAF results report 2018-2020. This UNDAF results report covers the second half of the UNDAF 2016-2020. It describes the UNCT's collective achievements along the five pillars of the UNDAF focusing on: Inclusive Growth and Structural Transformation; Resilience and Green Economy; Investing in human capital and expanded access to quality, equitable basic social services; Good governance, participation and capacity development and Equality and empowerment. It is a contribution of the UNCT in partnership with the Government of Federal Democratic Republic of Ethiopia to support the country in achieving the ambitious goals set in the Growth and Transformation Plan (GTP II) and the SDGs. It is a real pleasure to be part of this journey with Ethiopia at this historical juncture.

It is worth mentioning that this implementation period had witnessed significant positive developments in the country that provided opportunities and level ground for our operations. At the same time, it was constrained by a range of unprecedented global and local challenges. During these times we have demonstrated our collective and strong commitment to achieve the goals we had set focusing on the most vulnerable and

left behind. The COVID-19 crisis alone forced us to divert our attention and resources to the fight against the pandemic and response to its negative socio-economic impacts. We have demonstrated our agility and responsiveness during this time to save lives.

Now with this report, we mark the end of the UNDAF 2016-2020. Starting July 2020, we have moved on to the implementation of a more ambitious and strategic partnership compact renamed as United Nations Sustainable Development Cooperation Framework (UNSDCF 2020-2025), which we signed off with the government of Ethiopia .

I would like to take this opportunity to thank all UNCT's heads of agencies, agency colleagues, government implementing partners and development partners who have taken part in partnering and supporting the implementation of our joint effort.

As a Country Team, we are looking forward to another period of renewed partnership to continue working with the people, the government of Ethiopia and all our partners for a successful implementation of the new UN Sustainable Development Cooperation Framework 2020-2025.



A handwritten signature in black ink, reading "Catherine Sozi".

Dr. Catherine Sozi
United Nations Resident and
Humanitarian Coordinator for Ethiopia



COUNTRY CONTEXT OVERVIEW

The second half of the UNDAF period 2018-2020 which is the purview of this report is marked as eventful in the history of the country, that witnessed several reforms accompanied by opportunities that were applauded by many and in contrary faced with range of challenges that affected implementation of the government reform agenda and UN programmes.

In late 2018 the Government of Ethiopia undertook a major shift with the executive arrangement following the coming to power of H.E. Dr. Abiy Ahmed as a Prime Minister of Federal Democratic Republic of Ethiopia. This has come as an internal reform following the yearlong youth protests in different parts of the country. Following his oath of office, the prime minister introduced a range of political and economic reform in relatively shorter period for a country that had moved slowly in many fronts. To mention some: the release of political prisoners and journalists, opening up of political space, inviting political decedents to the country, more space for the free media, economic reforms including the introduction of the three years Home-Grown Economic Reform (HGER), launching the design of the ten years perspective plan which is a major policy instrument charting the country's vision to be "African Beacon of Prosperity", beginning preparatory work for privatization of the major state owned businesses. This period also saw introduction of several policy changes and drafting and endorsement of regulations to change the statuesque.

The reforms in the financial sector include regulatory changes to promote new types of financial service providers, including digital service providers. These changes are

considered as important for increasing the efficiency and effectiveness of current safety net programming in the country. The Rural Productive Safety Net Programme (RPSNP) also envisions incorporating the Humanitarian Food Assistance (HFA) into a single scalable safety net. This would enhance efficiency gains relating to timely and predictable payments, and lower per capita delivery costs. The forthcoming Urban Productive Safety Net and Jobs Project (UPSNJP) will support the implementation of refugees' rights outlined in the 2019 Refugee Proclamation and will contribute to the operationalization of the Comprehensive Refugee Response Framework (CRRF). The Organizations of Civil Societies Proclamation No. 1113/2019 is also an important step towards the transformation of policies and opening of the space for Civil Society Organizations (CSOs) to play an increasing role within the social protection sector. The period also seen drastic changes in the humanitarian context which demanded for additional humanitarian needs mainly emanated from the multi-sector socioeconomic impact of the COVID-19 pandemic since March 2020, which disproportionately affected vulnerable communities. The combination and recurrence of multiple, simultaneous and compounding shocks, including COVID-19, floods and desert locust upsurge ("triple threat") as well as sporadic droughts and related displacements have continued to affect many, mostly densely populated/frequented and pastoral areas in Ethiopia, generating new and significant needs that required additional resources.

Ethiopia has conducted review of progress in implementing its National Climate Resilience and Green Economy (CRGE) strategy. The

strategy articulated Ethiopia's commitment to continued economic growth while keeping its total greenhouse gas (GHG) emissions at roughly the level when the strategy was formalized. The government has recognized effects of climate change on health and water sector and taken promising policy and strategic actions and integrated Climate resilient WASH (CR-WASH) in to One WASH National Program (OWNP) phase-II (2018-2020) as one of the five core components with earmarked budget and revised coordination structures accordingly. As part of the organizational reform since 2018, restructuring has been made in Ministry of Environment Forest and Climate Change which has become Environment Forestry and Climate Change Commission (EFCCC) under the Prime Minister's office. Similarly restructuring had been made on WASH sector ministries and Ministry of Health upgrading Hygiene and Environmental Health case team to directorate level and opening climate change and health unit that is responsible to coordinate integration of climate change into health program interventions.


The Countdown study undertaken in 2015, has reported that there is a reduction in child mortality and was due to rapid economic growth and socio-economic progress, vastly increased investment in public health, and the expansion of health facilities and the health workforce, including comprehensive health sector planning, and the Health Extension Programme (HEP), which brought routine health services to rural areas. However, in 2020, COVID 19 pandemic has set a huge challenge in the health sector and beyond undermining implementation of health sector transformation plan. These and other situation influenced the health sector programme operation in the field to respond to several emergencies on top of the regular programme support.

In 2018, the government of Ethiopia has defined the list of key and priority populations

in the National Roadmap for HIV prevention (2018-2020) and the HIV/AIDS Strategic Plan. Additionally, in 2020 and as part of the dialogue for prioritizing Strategic actions for the new NSP (2020 – 2025) the key population list had been revised with the addition of new group closing on the people left behind. A Gender assessment of the National HIV response was undertaken in 2020 and the finding shows that there are gaps in terms of gender responsive policy and programming.

Investments in education continued to be a priority, with 27 per cent of on-budget total national expenditure, which has contributed to a rapid expansion of access to all education levels along with an increase in the number of schools, students and teachers. It has been more than 20 years since the Ethiopian Education and training policy, 1996 has been introduced in the Ethiopian education system. Lots of policy issues and challenges have been emerged for the last two decades which were not able to be addressed by the existing Education and training policy. To reform the education sector in accordance with the national vision and national development goals, the government has developed education road map (2018-2030) which outlined strategic shifts to transform the education system to accord with the 21st Century Educational Systems. The major shifts include change in the structure of the general education system (from 4-4-2-2 to 6-2-2-2), change on the entry age of primary education and curriculum reform are few.

Following the dramatic and far reaching changes underway, the political and democratic space has demonstrably opened up opportunities to contribute to efforts towards improving the Ethiopian democratic governance landscape which has provided opportunities for work in the governance sector. However, the democratic and political governance landscape remains complex and



liable to unravel in the face of multi-faceted internal and external challenges. In Ethiopia, the importance and observance of human rights and the rule of law, public accountability and inclusive political processes have been defined in the “Ethiopia: A New Horizon of Hope” policy and there is clear evidence that the governance is trying to put systems and structures in place.

The government ratified numerous instruments which obliges key institutions and actors to take appropriate measures to meet its obligations. In a bid to actualize these commitments, the government elaborated and integrated SDGs in its Second Growth and Transformation Plan (GTP II), 2019/2020, national development policies, strategies and sectoral programmes. The implementation of the government’s own Home-grown Economic Reform Programme, which is designed to eliminate macroeconomic imbalances and lay the foundation for sustainable and inclusive growth that has stimulated the generation of data for such an exercise from different stakeholders. Significant improvements in the Government’s acceptance for an independent evidence and data generation and the use of such evidence for the planning, implementation monitoring of national development plans, policies and strategies has been a commendable move by the government. The restructuring and reconstitution of the former Federal Vital Events Registration Agency (FVERA) in 2018 as the Immigration, Nationality and Vital Events Agency (INVEA), under the Ministry of Peace is part of the reform action.

The reform has positively contributed to policy changes and the promotion of women to key leadership positions. Following the reforms, Ethiopia achieved a 50% representation of women in the Council of Ministers and in an unprecedented manner women were holding key leadership positions such as the Minister of Peace and Minister of Defense at the outset.

Women were also appointed to high-level leadership positions that were traditionally male dominated including the FDRE Presidency, the President of the Federal Supreme Court and Chairperson of the National Electoral Board. Owing to these changes, the Global Gender Gap Index ranked Ethiopia 82nd out of 153 countries in 2020, an improvement from a rank of 117th/149 in 2018. The reform also brought a change in policy frameworks including the revision of the CSO law, the electoral law, the promulgation of Proclamation 1097/2018 which has given the Ministry of Women, Children and Youth the mandate to hold sectors accountable for their performance on GEWE, the revision of the Labour Proclamation No.1156/2019 Art 88/3): which has extended maternity leave from 90 to 120 days and addressed the issues of sexual harassment and the adoption of the Women Development and Change Package. Ethiopia also adopted regional human rights frameworks, the African Union Convention for the Protection and Assistance of Internally Displaced Persons in Africa (Kampala Convention) and the Protocol to the African Charter on Human and Peoples’ Rights on the Rights of Women in Africa (Maputo Protocol). The commitment of the government towards GEWE is still evident in the current on-going revision of the National Women’s Policy that has been in force since 1993.

During the reporting period, the government has put in action policy and strategic framework that inform and guide the development interventions across all sectors. Among others the launching of the ten years youth development plan, the National Youth Engagement and Participation Strategy, The National Youth Volunteers Strategy and the National Action Plan for Jobs Creation (2020-2025), Refugee Proclamation No. 1110/2019 come to the forefront.



PILLAR # 1

Inclusive Growth and Structural Transformation

OUTCOME # 1

By 2020 Ethiopia will achieve increasingly robust and inclusive growth in agricultural production and productivity and increased commercialization of the agricultural sector.

Co-convening UN Entities:
FAO - Secretariat
UNDP

Participating UN Entities:
UNIDO, IFAD, UN Women

Implementing Partners:
MoA, BoAs, MoTI, CTA, ATA, ILRI, EIAR, EIC

RESULTS

UN mobilized **USD 34,256,436**, procured and provided to the MoA: **40 vehicles, 110 motorbikes, 46 vehicle-mounted sprayers, 4 515 hand-held and 450 motorized knapsack Ultra-low volume (ULV) sprayers, 6000 PPEs, 3 spray aircrafts, 3 survey helicopters, 758,600 liters of pesticides (Malathion and Chlorpyrifos)**. This resource capacitated the GoE at all levels:

- Ground and aerial control operations were carried out using handheld, motorized knapsack and vehicle mountable ULV sprayer and as well as using spray aircrafts and helicopters and managed to control desert locust on 725,827ha by applying 678,627 liters of two organophosphate insecticides.
- Trainings were provided for 4,800 experts, development agents and local scouts (20% women) on desert locust survey and control standard procedures based on the guidelines developed by UN.

UN contributed significant amount of resources to support **three key initiatives** (nationwide):

- Improve regulation and supervision of microfinance institutions (MFIs) and rural financial cooperatives,
- Institutional development in the microfinance & cooperative sector, improve regulation of MFIs and cooperatives,
- Improve and increase rural finance outreach.

OUTPUTS

	UN Entities	Assessment*	Expenditures (USD)	% of Expenditures	
1. Farmers and pastoralists have strengthened technical capacity and skills to adopt improved farming practices and inputs for increased production and productivity.	UNDP UNIDO FAO	>75% 74-50% <49%	5,349,293	4%	
2. Farmers and different value chain actors have strengthened technical capacity and skills to adopt inclusive value chain approaches in the commercialization of selected agricultural commodities.	UNDP UNIDO UNWomen	>75% 74-50% <49%	4,058,285	3%	
3. Federal and regional institutions have strengthened capacities to plan, deliver and monitor agricultural services including financial services.	FAO UNDP UNWomen IFAD	>75% 74-50% <49%	125,192,186	93%	
4. Vulnerable groups, particularly women, girls, youth and targeted pastoralist communities have increased access to productive resources and community demand driven economic and social services.	UNWomen	>75% 74-50% <49%	108,282	0,1%	
TOTAL:		>75%	134,708,046	100%	

INDICATORS

	Baseline	Target value	Actual value	Is indicator met?
1. Total major food crop (cereals, pulses & oil seeds) production disaggregated by farmer type	total: 251.05 ml; smallholder farmers: 241 ml; commercial farms:10 ml	8% annual increase		Yes
2. % annual increase in crop production and productivity	Production: 5.3%; Productivity: 9.1%	8% increase		Yes
3. Agriculture, value added (% of GDP)	40%	5% annual increase		Yes
4. Volume and value of export of agricultural products	\$ 2.3 bl	-		-
5. Increase in livestock and fisheries production and productivity	30% of Ag GDP or 16% of GDP	10% annual increase		Yes
6. % pre and post-harvest crop losses reduction on key commodities	pre-harvest: 30% post-harvest: 15-20%	pre-harvest: 3% post-harvest: 10%		Yes

*
 >75% fully achieved
 74-50% partially achieved
 <49% not achieved



INDUSTRY

2

RESULT GROUP



PILLAR # 1

Inclusive Growth and Structural Transformation

OUTCOME # 2

By 2020 private-sector driven manufacturing and service industry sector growth is inclusive, sustainable, competitive and job rich.

Co-convening UN Entities:
UNIDO - Secretariat
ILO

Participating UN Entities:
IOM, WHO

Implementing Partners:

MoTI, MoA, MoLSA, MoF, MoUDHC, JCC, EIC, BoA, BOWCA

RESULTS

- Construction of the **4 IAIPs (Integrated Agro-Industrial Parks)** is **50-70% complete**; since the inception, approximately **21,000 jobs** (27% for women) created.
- 150 investors** have registered with the **Regional Industrial Park Development Corporations (RIPDCs)** in 4 regions.
- Linkages between locally-sourced agricultural inputs and processing facilities within the Parks fostered. 8 value chain studies and 4 strategic analysis were developed; **364 value chain actors** were assisted through extension services.
- Textiles and apparel employment** opportunities have been created for **369 young graduates**.
- Mekelle Garment College Centre of Excellence (CoE)** was established in September 2019.
- Common Production Unit was officially inaugurated in April 2019 and will allow the **Ethio-International Footwear Cluster Cooperative Society (EIFCCOS)** enhance its production capacity (approximately 500 pairs of shoes per day).
- The 5 clusters employ **4,852 workers**, 33% increase since 2014. **48% are women and 90% are aged below 24 years old. 376 participating SMEs.** 273 SMEs benefitted from technology upgrading. Increase in profit margins (12.5%) and export (8%).
- 40 garment and textile factories** supported to comply with national and international labour standards and improve working condition, productivity and competitiveness.
- Sustainable access to quality and safe medicines and health products supported:**
 - GMP (Good Manufacturing Practice) status of the local pharmaceutical manufacturers improved;
 - Feasibility studies, policy briefs, situational analysis studies commissioned;
 - Development of the **Kilinto Pharmaceutical Industry Park** accelerated to realize a regional pharmaceutical industry hub;
 - International pharmaceutical investment promotional events (Exhibition and Conference) facilitated;
 - Support provided to local manufacturers: **two new pharmaceutical manufacturing investments** were inaugurated (Humanwel and Sansheng); others in pipeline (Kilitch-Estro PLC).
- Occupational safety and health, COVID-19 awareness and disinfection training** provided to factories.
- Virtual meetings and training sessions were conducted on business continuity planning to help institutions and enterprises cope up with the challenges faced due to COVID-19.

OUTPUTS

	UN Entities	Assessment*	Expenditures (USD)	% of Expenditures
1. Micro, Small and Medium Scale Enterprises (MSME) have increased and expanded access to innovative, inclusive, and client-oriented financial products and services.	UNIDO ILO IOM	>75% 74-50% <49%	7,347,600	45%
2. Priority manufacturing sectors identified in the GTP are more inclusive, job-rich, productive and competitive in regional and international markets.	UNIDO ILO WHO	>75% 74-50% <49%	5,708,050	35%
3. Private sector enterprises have improved skills, knowledge and technological capacity for increased productivity and competitiveness.	UNIDO ILO WHO	>75% 74-50% <49%	3,260,874	20%
4. Improved services and products and enabling environment for an expanded and sustainable tourism sector.		>75% 74-50% <49%	-	-
TOTAL:		>75%	16,316,524	100%

INDICATORS

	Baseline	Target value	Actual value	Is indicator met?
1. Share of manufacturing sector in the GDP	14.2% (MOFED 2013)	22.8	-	-
2. Share of the service sector in the GDP	46% (MOFED 2013)	GTP II	-	-
3. Share of employment in the manufacturing industry sector	7.2% (Labour force survey 2013)		-	-
4. % Share of manufacturing exports out of merchandize exports	13.4	25	-	-
5. % share of manufacturing in GDP	4	8	-	-
6. Income generated from tourism	USD 633,765,875 (2014)		-	-

*
 >75% fully achieved
 74-50% partially achieved
 <49% not achieved

PILLAR # 2

Resilience and Green Economy

OUTCOME # 3

By 2020, the Ethiopian people, particularly in disaster prone areas are resilient, have diversified sources of income and are better able to prepare, respond to and recover from emergencies and disasters.

Co-convening

UN Entities:

WFP - Secretariat
UNDP

Participating

UN Entities:

UNFPA




Implementing Partners:

NDRMC, MoA, National Metrology Agency


RESULTS

- The major public work activities carried from 2018 to 2020 included **soil and water conservations, rangeland management, forestry and agro-forestry development, gully rehabilitation, water development activities** (pond construction, shallow well construction and rehabilitation, reservoir construction), **social services** (schools, health posts, pastoralist training centers construction and maintenance), **range land development** (bush clearing, diversion of water to grazing lands, area closure).
- > **2,000,000 targets** reached with emergency assistance, including timely food and non-food assistance, environmental conservation support. More than 6 community based re-integration initiatives were also supported.
- Insurance for Work (IFW) schemes** are built into existing government social safety net programmes, and farmer assets are built through 'risk reduction' activities that promote resilience by steadily decreasing vulnerability to disaster risks over time.
- The Climate Risk Management R4 Initiative enrolled 27,279; 26,501; and 64,917 vulnerable farmers in 2018, 2019 and 2020 respectively into the Weather Index Insurance programme.**
- UN launched in 2018 the **Satellite Index Insurance for Pastoralists in Ethiopia (SIPIE) programme** in the Somali region, insuring 5,001 vulnerable pastoralists. The programme since scaled up to provide livestock index insurance to **15,504 pastoral households in 2020, with half of its participants being women**. SIPIE aims to protect pastoralists against catastrophic drought conditions, including crop and natural resource management (for example completion of two water diversion canals used to rehabilitate 600 hectares of farmland/pastureland in Adadle and Kebridehar woreda in June 2020).
- From 2018 until July 2020 **family planning (FP) and sexual and reproductive health and rights (SRHR) outreach services** were included at 56 food distribution sites in the Somali region. In 2019 and 2020 **804 community dialogues**, including with internally displaced persons (IDP), youth and community leaders, have been carried out.
- Results achieved from interventions in Somali Region include:**
 - >500 women and youth members supported with business and entrepreneurship skill development trainings; >100 female headed households were reached and supported with breeding stock; >5000 small holder farmers were reached with smart agriculture technology through providing training on smart agriculture production and agronomic practices and provision of solar pumps for small scale irrigation; >800 IDP households supported on a cash for work basis in response to COVID19.
- Results achieved from interventions in Oromia and SNNP Regions include:**
 - 693 youth (of which 277 are female) supported and engaged in income generation activities (IGAs); >2000 displaced women provided with start money and engaged in IGAs; 1,340 households who lost their livelihoods during the conflict were supported and grouped into 60 cooperatives and started IGAs; 2,354 houses were constructed for the most vulnerable households whose houses were damaged during the conflict; 16 schools and 2 health posts that were damaged during the conflict were rehabilitated and furnished; 7,400 affected farmers were supported with different types of agricultural tools and seeds to start crop production; >4500 households were engaged in natural resource conservation activities in exchange for cash support; >80 school peace clubs and 62 community peace committee were established to foster peace at community level; >15 health posts and 1000 individuals were supported with PPEs; 900 households whose livelihoods were affected by COVID-19 pandemic were supported with cash and good to cover their food gap.

OUTPUTS

	UN Entities	Assessment*	Expenditures (USD)	% of Expenditures	
1. Enhanced capacity of households and communities in disaster prone areas to diversify livelihood opportunities, and invest in natural resource management.	WFP UNDP	>75% 74-50% <49%	11,934,763	74%	
2. Capacity of national and sub-national institutions and partners to effectively anticipate and respond to hazards of emergencies enhanced.	WFP UNFPA	>75% 74-50% <49%	2,850,581	18%	
3. Livelihood, environment and basic social services of disaster affected communities restored and improved to withstand impact of future disasters.	UNFPA	>75% 74-50% <49%	1,300,000	8%	
TOTAL:		>75%	16,085,344	100%	

INDICATORS

	Baseline	Target value	Actual value	Is indicator met?
1. Disaster Preparedness Index (DPI)	5	8	-	-
2. Proportion of beneficiaries targeted for emergency assistance that receive timely food and non-food assistance	70%	75%	76% (Dec. 2019)	 Yes
3. Global acute malnutrition rate (GAM)	10-12% (2014)	<10%	-	-

*

>75% fully achieved
74-50% partially achieved
<49% not achieved



SOCIAL PROTECTION

4

RESULT GROUP



PILLAR # 2

Resilience and Green Economy

OUTCOME # 4

By 2020, the GoE has a social protection systems approach in place which ensures increased access to a comprehensive package of social protection programmes, interventions and services for poor, vulnerable and excluded citizens coping with social and economic risks, vulnerabilities and deprivations.

Co-convening

UN Entities:

UNICEF - Secretariat
ILO

Participating

UN Entities:

UNDP, WHO, WFP,
FAO, UNHCR, IOM

Implementing Partners:

MoLSA, BoLSA, MoE, MoA, MoH, MoF, NDRMC

RESULTS

Strengthened national capacity to develop, implement, coordinate and monitor the social protection system:

The Federal Social Protection Council directive was prepared and submitted for endorsement, but due to COVID-19 this process has been delayed. MoLSA launched a National Social Protection Platform, and four regional platforms were established. One federal level and four regional level (Amhara, Oromia, Tigray, SNNPR) costed action plans for social protection were finalized. An institutional and coordination framework for the effective implementation of the Social Protection Policy was completed and a validation workshop was conducted.

The Social Security Inquiry (SSI) statistical tool captures national data on beneficiaries (gender disaggregated) and expenditure on social protection. Management Information Systems (MISs) for both the Rural and Urban Productive Safety Net Programmes (PSNPs) are now at an advanced stage of development.

A functioning Social Welfare Workforce and Community Based Structures:

An effective case management system for Permanent Direct Support and Temporary Direct Support sub-components of RPSNP was developed and implemented in seven RPSNP woredas (three in Amhara, and two each in Oromia and SNNPR regions). A National Child Protection Case Management Framework was developed and ready for roll out. Nine TVETs trained 1,076 Community Service Workers, and 1,200 Community Service Workers and 600 Social Workers have been deployed. There are also over 7,000 Community Care Coalitions in all regions.

GoE's capacity is strengthened to expand the coverage of social protection schemes (pension schemes and health insurances):

The Ethiopian Health Insurance Agency (EHIA) has made great efforts to expand the Community-based Health Insurance (CBHI) scheme nationally. There is currently 31 million people enrolled, of which 6.7 million are provided with a fee waiver. CBHI is now covering 770 woredas in the countrywide. By 2020, across a total of 221 villages in Tigray and Amhara, 64,917 (23,231 female) mostly RPSNP households have been registered for crop insurance under the German Development Bank (KfW) funded R4 Rural Resilience Initiative for 2020 cropping season.

GoE's capacity is strengthened for evidence-based planning, policy dialogue, formulation, revision and implementation of legal frameworks on social protection:

UN has completed the endline for the Improved Nutrition through Integrated Basic Social Services and Social Cash Transfer Pilot Program (IN-SCT) in Oromia and SNNP Regions.

GoE's capacity is strengthened to mitigate external risks through shock-responsive Social Protection measures:

UN has contributed 14.2 million USD to the RPSNP Contingency Fund, which has supported 1,727,965 people in need during this reporting period. UN piloted the PSNP-Humanitarian Response Plan (HRP) Cash Pilot to meet the expanding food assistance needs in Somali Region and to harmonize the systems for cash distributions between the Humanitarian Food Assistance (HFA) and PSNP, to strengthen the shock responsive mechanism under the integrated food-cash response plan. UN contributed USD 10,4 million which supported over 750,000 beneficiaries under the HFA between 2019 – 2020.

OUTPUTS

	UN Entities	Assessment*	Expenditures (USD)	% of Expenditures	
1. Strengthened national capacity to develop, implement, coordinate and monitor the social protection system.	UNDP, ILO, UNICEF, WFP, FAO, UNHCR	<div><div>>75%</div><div>74-50%</div><div><49%</div></div>	1,273,185	4%	
2. A functioning Social Welfare Workforce and Community Based Structures system providing social welfare services to the most vulnerable, deprived and excluded citizens in place.	UNDP, ILO, UNICEF, IOM, UNHCR	<div><div>>75%</div><div>74-50%</div><div><49%</div></div>	4,840,019	15%	
3. GoE's capacity is strengthened to expand the coverage of contributory social protection insurance schemes (pension schemes and health insurances).	UNDP, ILO, WHO, UNICEF	<div><div>>75%</div><div>74-50%</div><div><49%</div></div>	430,000	1%	
4. GoE's capacity is strengthened for evidence based planning, policy dialogue, formulation, revision and implementation of legal frameworks on social protection.	UNICEF, UNDP, ILO, WFP, IOM, UNHCR	<div><div>>75%</div><div>74-50%</div><div><49%</div></div>	1,900,000	6%	
5. GoE's capacity is strengthened to mitigate external risks through shock-responsive Social Protection measures.	UNICEF	<div><div>>75%</div><div>74-50%</div><div><49%</div></div>	24,600,000	74%	
TOTAL:		<div><div>74-50%</div></div>	33,043,204	100%	

INDICATORS

	Baseline	Target value	Actual value	Is indicator met?
1. % of households covered by at least one Social Protection program or intervention	11% rural HH, 10% male headed rural HH, 15% female headed rural HH	15% of the total population	32% of the total population	Yes
2. A functional federal social protection council in place	A federal social protection council (FSPC) does not exist	FSPC in place and functional	FSPC directive prepared and submitted for endorsement	No

*

>75% fully achieved
 74-50% partially achieved
 <49% not achieved

PILLAR # 2

Resilience and
Green Economy

OUTCOME # 5

By 2020 Key government institutions at federal and regional level are better able to plan, implement and monitor priority climate change mitigation and adaptation actions and sustainable natural resource management.

Co-convening

UN Entities:

UNEP - Secretariat
UNDP

Participating

UN Entities:

UNIDO, UNHCR, FAO, IOM,
UNCTAD, UNOPS

Implementing Partners:

EFCCC, MoA, MoUDHC, MoWIE, MoE, MoF

RESULTS

Sustainable Consumption and Production (SCP): UN supported the development of a manual for promoting a shift to SCP practices. The manual provides a basis and guide for raising awareness of young consumers on sustainable livelihoods, lifestyle and consumption. UN supported strengthening of existing environmental certification or eco-labelling practice. Selected coffee producers in the agro-forestry coffee sub-sector now have access to an environmental certification/eco-labelling scheme.

Green Economy: Through Switch Africa Green Programme, support is provided to enable the transition to inclusive green economy. The programme is promoting the uptake of innovative green businesses and SCP across national priority sectors (Agriculture, Manufacturing and Integrated waste management). The GoE has now prepared an action plan for implementation of the programme.

Nationally determined contributions (NDC): UN supported the implementation of the updated NDC in Ethiopia in the areas of climate finance strategy development; enhancing the private sector involvement in NDC implementation; Long Term Strategy (LTS 50years) development, establishment of National web based monitoring and evaluation system.

Renewable Energy: UN supported the development of National standards on solar energy technology products and its implementation strategy and made available for enforcement. UN supported the dissemination of renewable energy technologies among the off-grid communities - until now a total of 761,963 different types of improved cook stoves and 494,563 different sizes solar energy technology products disseminated in different parts of the country. As a result, a reduction of 2.618 million tons of CO₂ achieved; and 55,135.35 hectares of forest protected from deforestation and conserved from land degradation. Capacity building training and financial support amounting USD 350,000 provided to 153 Rural Energy Technology enterprises (79 owned by males and 73 owned by females). Over 230 jobs for rural youth and women (164 males and 66 females) created.





Forest management: UN supported the development of Ethiopia's Ten Years (2018-2028) National Forest Sector Development Programme. Supported strengthening of the forest management offices at the federal and regional levels. Following community forestry approach 19,181 hectares of land covered with fast rotation plantation by raising 58,422,850 seedlings. 151,322 hectares of land covered with Assisted Natural Regeneration (ANR) approach. Employment opportunities created for 285,782 people. UN supported the establishment of the Challenge Fund which is an innovative financing mechanism for forest sector transformation.

Land rehabilitation: UN supported the rehabilitation of >21,000 ha of degraded urban and peri-urban land that will make the cities more resilient to flooding and excess heat caused by climate change. A total of 91,329.4 tons of compost has been produced from 300,456.9 tons of organic waste diverted from land fill in the last three years.



Climate Sensitive Disease (CSD) surveillance and air pollution: UN supported MoH in establishment of 11 CSD surveillance sentinel sites in the country. UN supported the finalization of the report on Household Air Pollution Country Scoping Project. Technical support provided on air quality monitoring (identification and installation of air quality monitoring in Addis Ababa).

COVID-19: USD 500,000 disbursed to build the resilience capacity of the local communities participated in the forest conservation.



OUTPUTS

	UN Entities	Assessment*	Expenditures (USD)	% of Expenditures	
1. Support the government in the implementation of CRGE Strategy.	UNDP UNEP	>75% 74-50% <49%	11,696,000	25%	
2. Capacity of key institutions strengthened for climate information and early warning systems including institutional arrangements and data managements systems to support the national and relevant sectors MRV system in place and fully operational.	WHO, UNEP, UNDP, UNHCR	>75% 74-50% <49%	5,484,935	12%	
3. Technologies and practices including finance and market mechanisms that promote a climate resilient green economy introduced and scaled up.	UNDP, UNHCR	>75% 74-50% <49%	9,066,572	19%	
4. Capacity of region and city administration to plan, implement and monitor/ sustainably manage forests and other natural resources for their social, economic and ecosystem services including NFI in the context of REDD+.	UNDP UNEP	>75% 74-50% <49%	20,280,000	44%	
TOTAL:		74-50%	46,527,507	100%	

INDICATORS

	Baseline	Target value	Actual value	Is indicator met?
1. Tons of CO ₂ equivalent reduced	150 million tons of CO ₂ equivalent	2010 emission level by 2030	2.618 million tons of CO ₂	Absence of MRV
2. Coverage of affordable, clean and efficient renewable energy in rural and urban areas	8702GWH	496,703GWH		 Yes
3. Hectares of Forests and other natural resources protected and sustainably managed for their social, economic and ecosystem services	1.2 million ha	6.7 million ha	230,692 ha forest	 No

*

 >75% fully achieved
 74-50% partially achieved
 <49% not achieved

PILLAR # 3

Investing in human capital and expanded access to quality, equitable basic social services

OUTCOME # 6

By 2020, Ethiopian Population in particular Women, Newborn, Children, Adolescent and Youth including vulnerable groups have improved access to and utilization of quality and equitable health services.

Co-convening

UN Entities:

WHO - Secretariat
UNICEF

Participating

UN Entities:

UNFPA, IOM, UNHCR, UNAIDS

Implementing Partners:

MoH, RHBS, ARRA, EPHI

RESULTS

Immunization: Penta 3 coverage has improved from 53% (EDHS 2016) to 61% (mini-EDHS 2019). UN supported:

- Development of Expanded Program on Immunization (EPI) roadmap, strengthening routine immunization micro-planning, improved data quality, vaccine forecasting, procurement and monitoring, provision of immunization services.
- Procurement and installation of 6,000 solar device refrigerators for health posts, which enabled significant portion health posts to have refrigerators for the first time.
- National scale up strategy and plan for the new human papillomavirus (HPV) vaccine introduction.
- Since 2014, Ethiopia has been free of the wild polio virus and further campaigns were launched to prevent vaccine-derived polio virus (cVDPV).

Maternal, newborn and child health (MNCH): The coverage of proportion of births conducted in health facility improved from 26% in 2019 (EDHS 2016) to 58% in 2020 (DHIS 2). In addition, the proportion of newborns receiving early post-natal care increased from 30% in 2019 (EDHS) to 77% in 2020 (DHIS 2). UN supported:

- Expansion and strengthening of MNH services through capacity building on basic emergency obstetric and newborn care (BEmONC) contributing to 64% of health facilities providing BEmONC services and 78 % health centers with newborn corners established.
- Establishment of Neonatal Intensive Care Unit (NICU) contributing to increase from 90 hospitals providing NICU services in 2017 to 196 in 2020.
- The national scale up of child health services. Nationally, about 87% of the health centers are now providing Integrated Management of Newborn and Childhood Illness (IMNCI) services; about 86% and 92% of the health posts respectively are providing community-based newborn care (CBNC) and integrated community case management (iCCM) services.
- 94 % of facilities nationally are now providing birth notification, an impetus for birth registration.

Family Planning (FP)/Sexual and Reproductive Health (SRH): UN supported:

- National Maternal and perinatal death surveillance and response (MPDSR) system evaluation technically and financially.
- FP and maternal health products that worth over USD 10 million were procured and donated to MoH and NGO partners.
- > 470 health professionals were trained on youth friendly service provision; 120 health facilities were capacitated with technical support and provision of commodities.
- 151 emergency affected health facilities were equipped with lifesaving emergency RH drugs, equipment's and FP commodities. Minimum Initial Service Package (MISP) for RH was rolled out in drought affected 34 districts, 21 IDP sites and 10 refugee camps in Gambella and Dollo Ado.

Disease outbreaks:

- UN supplied medical equipment and supplies (oxygen concentrators, room heaters, hand operated resuscitators, glucose meters, thermometers) to emergency affected areas contributing to curbing the outbreaks of cholera, dengue fever, and measles in different parts of the country.
- UN supported the cholera response by deploying technical consultants for training, coordination, planning, and monitoring of the response and distribution of 30 Cholera Treatment Centers. In 2020, cholera was one of the emergencies faced and 11,448 (170 confirmed) cholera patients received care and treatment which led to a lower-case fatality rate of 1.5%.
- UN successfully advocated with the government to use the wording cholera for Acute Watery Diarrhoea, making outbreaks easier to manage. Ethiopia subsequently successfully applied for the Oral Cholera Vaccine, which has been instrumental in controlling outbreaks.

Mobile health and nutrition teams (MHNT): UN supported 55 MHNTs.

- UN supported the primary health care services for IDPs in 3 regions.
- Close to 1.2 million received medical consultation through MHNT.
- UN supported rehabilitation and reconstruction of health posts damaged during conflicts. 7 health posts have been completed with 1 under rehabilitation (a COVID-19 isolation unit).

Health technologies:

- Electronic adverse drug event reporting using electronic and mobile application (MEDSAFETY) introduced and launched that enabled increase efficiency and effectiveness of Adverse Drug Reaction reporting and feedback system.
- Prequalification including accreditation of blood transfusion services and safe blood transfusion clinical service were reinforced. 41 blood bank and blood collection sites across the country were equipped with trained staff on data management and reporting.

COVID-19: UN supported the GoE in preparation and response to COVID-19.

- >1,200 health workers were capacitated and are conducting surveillance activities of case investigation; >6 million received COVID messages; PPEs were procured for 200,000 health workers. UN further procured 380 oxygen concentrators for improved management of COVID-19 patients.
- UN advocated for the Continuation of Essential Primary Health Care Services for the reinstatement of the measles campaign, where over 15 million children aged 9 months to 15 years of age (96% coverage of target) were vaccinated. UN supported health system strengthening to enable continuity of SRH and SGBV information and services.



PILLAR # 3

Investing in human capital and expanded access to quality, equitable basic social services

OUTCOME # 6

By 2020, Ethiopian Population in particular Women, Newborn, Children, Adolescent and Youth including vulnerable groups have improved access to and utilization of quality and equitable health services.

Co-convening

UN Entities:

WHO - Secretariat
UNICEF

Participating

UN Entities:

UNFPA, IOM, UNHCR, UNAIDS

Implementing Partners:

MoH, RHBs, ARRA, EPHI

OUTPUTS

	UN Entities	Assessment*	Expenditures (USD)	% of Expenditures	
1. Capacity of health system strengthened to ensure universal access to quality and evidence-based package of basic high impact maternal, newborn and child health interventions.	WHO UNICEF UNFPA	>75% 74-50% <49%	14,091,095	18%	
2. Strengthened capacity of national institutions to provide quality adolescent and youth friendly sexual and reproductive health information and services.	WHO UNICEF UNFPA	>75% 74-50% <49%	12,659,321	17%	
3. By the year 2020, National capacity strengthened to reduce the burden of communicable diseases (Malaria, Tuberculosis and neglected tropical diseases).	WHO UNICEF	>75% 74-50% <49%	4,425,984	6%	
4. Enhanced preventive, curative and rehabilitative capacity of health service delivery to address noncommunicable diseases including injuries/ violence, elderly and disabled.	WHO UNFPA	>75% 74-50% <49%	853,497	1%	
5. Improved national capacity for minimizing the health-related outbreaks by early detection, rapid response and recovery to reduce morbidity and mortality.	UNICEF IOM WHO	>75% 74-50% <49%	30,936,628	40%	
6. Enhanced national health system capacity to plan, mobilize domestic and external resources, implement, monitor and evaluate health programmes towards universal health care and quality of health care services.	WHO UNICEF UNFPA	>75% 74-50% <49%	13,626,486	18%	
TOTAL:		>75%	76,593,011	100%	

INDICATORS

	Baseline	Target value	Actual value	Is indicator met?
1. Proportion of births attended by skilled birth attendants	15%	80%	63%	<input type="radio"/> No
2. Proportion of children aged under one year vaccinated with Penta 3 and measles	Penta 3: 87%; Measles: 84%	Penta 3: 97%; Measles: 96%	Penta 3= 100% Measles= 95%	<input checked="" type="radio"/> Yes
3. % of teenage pregnancies from overall pregnancies	12%	3%	12.5%	<input type="radio"/> No
4. % of unmet need for family planning for adolescents and youth	33%	22%	22%	<input checked="" type="radio"/> Yes
5. % of the refugee population with access to primary health care services		100%		-

*
 >75% fully achieved
 74-50% partially achieved
 <49% not achieved



PILLAR # 3

Investing in human capital and expanded access to quality, equitable basic social services

OUTCOME # 7

Enhanced appropriate feeding and care practices for improved nutrition status of children under five years, adolescents, pregnant and lactating women.

Co-convening

UN Entities:

WHO - Secretariat
UNICEF

Participating

UN Entities:

FAO, WFP, UNHCR, IOM, UNOPS

Implementing Partners:

MoH, RHBs, ARRA, NDRMC

RESULTS

Access to preventative, promotive and curative nutrition services continued to improve in Ethiopia. UN supported:

- Health facilities providing treatment of Severe acute malnutrition (SAM) children, which increased from 18,036 in 2017 to greater than 20,000 in 2020.
- Implementation of the Comprehensive Integrated Nutrition Services (CINuS) in 100 woredas through routine health services and the Community-Based Nutrition programme. The CINuS is a package of preventative and curative nutrition services provided at every delivery platform and will improve adolescent, pregnant and lactating women PLW, and children's nutritional status.
- Promotion of Safe Infant and Young Child Feeding (IYCF) Practices and Healthy diet in Ethiopia in Context of COVID-19, including guidelines on IYCF, breastfeeding and wasting management, through national media and monitoring system has been in place through mobile phone surveys to assess the media reach.
- 17 pilot woredas to provide nutrition services for adolescent and developed a collaboration with Girl Effect using their TV show "yegna" to provide context and age-specific nutrition messages.

Government's capacity to deliver, monitor and coordinate nutrition services also improved. Ethiopia maintained the quality of SAM treatment above the international standards, with a cure rate above 90 per cent (minimum acceptable threshold is 75 per cent) and death rate below 1 per cent (maximum acceptable threshold is 10 per cent). UN supported:

- Provision of nutrition services to underserved, vulnerable populations in hard-to-reach areas of Afar and Somali regions through 49 Mobile Health and Nutrition Teams (MHNTs). The MHNTs delivered an integrated package of health, nutrition, and WASH services, including treatment for SAM children. Young children, adolescents and pregnant and lactating women (PLW) also benefitted from preventative quality nutrition services, including growth monitoring and promotion (GMP), Vitamin A supplementation, deworming, and monitoring the quality of iodized salt.
- Approximately 8 million children aged 6 to 59 months received vitamin A supplements twice per year and 5 million children aged 24-59 months received deworming prophylaxis yearly. The household use of iodized salt was 89 percent, though the quality of iodisation remained a challenge. Nearly, 2 million adolescents received deworming in selected woredas with high prevalence of intestinal worms.
- Strengthening of the District Health Information Systems and End User Monitoring, a real-time monitoring system to assess health workers' knowledge (HWs) on service provision, beneficiary satisfaction, and Supply management.
- Ministry of Health to roll out the Unified Nutrition Information Systems (UNISE) by incorporating it into the District Health Information system (DHIS2) to accelerate the information revolution agenda.

OUTPUTS

	UN Entities	Assessment*	Expenditures (USD)	% of Expenditures	
1. National, subnational and partner capacity (multisectoral nutrition technical committees and nutrition coordination bodies at all levels) strengthened for National Nutrition Programme (NNP) implementation, coordination, monitoring and reporting.	WHO UNICEF	>75% 74-50% <49%	9,771,221	7%	
2. Improved nutrition care practices for infants, young children, adolescents, and pregnant and lactating women (PLW).	UNICEF	>75% 74-50% <49%	12,374,894	9%	
3. Enhanced capacity of the health system to provide quality preventive and curative nutrition services for infants, young children, adolescents, and pregnant and lactating women.	UNICEF	>75% 74-50% <49%	117,821,020	84%	
4. Strengthened nutrition information monitoring and utilization for effective evidence-based decision making for the National Nutrition Programme.	UNICEF	>75% 74-50% <49%	- <i>combined with outputs 2 & 3</i>	-	
TOTAL:		74-50%	139,967,135	100%	

INDICATORS

	Baseline	Target value	Actual value	Is indicator met?
1. Proportion of children 6 to 23 months with minimum acceptable diet	4.1% (EDHS 2011)	10%	13% (EDHS 2016)	Yes
2. Proportion of children under 6 months exclusively breastfed (disaggregated by national & refugee population)	National: 52% (EDHS 2011) Refugee: 50%	National: 70%; Refugee: 90%	58.8% (miniDHS 2019), no disaggregation in refugee exist	No
3. Proportion of women age 15-49 with BMI < 18.5	26.9% (EDHS 2011)	19%	22.3%	No

*
 >75% fully achieved
 74-50% partially achieved
 <49% not achieved



PILLAR # 3

Investing in human capital and expanded access to quality, equitable basic social services

OUTCOME # 9

By 2020, the Ethiopian population, in particular women, children and vulnerable groups will have access to/ and use of affordable, safe and adequate WASH services.

Co-convening

UN Entities:

UNICEF - Secretariat
UNOPS

Participating

UN Entities:

WHO, UNHCR, UNDP, IOM

Implementing Partners:

MoWIE, MoH, RHBs, MoE, EPHI, NDRMC

RESULTS

GoE has recognized effects of climate change on health and water sector and taken promising policy and strategic actions and **integrated Climate resilient WASH (CR-WASH) into One WASH National Program (OWNP) phase-II (2018-2020)** with earmarked budget and revised coordination structures. Water Development Commission (WDC) of the Ministry of Water, Irrigation and Energy (MoWIE) has developed **Water utility performance indicators**, including Climate resilient Water Safety Plan (CR-WSP) implementation. WASH sector actors agreed to pilot **Climate Resilient Sanitation Safety Plan (CR-SSP)** as a core component of CR-WASH.

- UN supported promotion of **household water treatment and safe storage (HWTS)** practices through strengthening capacity of the government through development of guidelines for monitoring Household Water Treatment (HWT) options in the country and provision of in-service training for health on promotion of HWT and safe storage practices, water quality monitoring and surveillance, development of HWT guidelines, and to the regulatory agency on evaluation of different household water treatment technology options.
- UN supported the government's effort to increase access to sanitation through strengthening coordination, involving in the development of the national **Open Defecation Free (ODF) campaign**, and review of Community Led Total Sanitation and Hygiene (CLTSH) approach and contributed in the reduction of open defecation practices from 27% in 2017 to 22%.
- UN involved in facilitation of **UN-Water Global Analysis and Assessment of Sanitation and Drinking Water (GLASS 2018/19)** country survey data collection through providing technical support to the MoH and MoWIE.
- UN provided technical and financial support to MoWIE to implement **Climate Resilient Water Safety Plans (CR-WSPs)** in a total of 14 urban and 17 rural pilot sites, which has benefited **1.25 million population**.
- UN provided technical support to MoH on development of the **national WASH-NTD (Neglected Tropical Diseases)** strategic framework, which will strengthen coordination between the sector actors and integration of program interventions towards improvement of health outcomes. Provided support in development of worda tool kit, piloting in 100 wordas.
- UN supported MoH in identification of five climate sensitive diseases associated with WASH including cholera, malaria, dengue fever, yellow fever and meningitis, selection and establishment of **11 Climate Sensitive Disease surveillance sentinel sites** based on geography, epidemiology, and factors such as meteorological information, and access to WASH services.
- UN contributed in conducting needs assessment, deployment of technical staff, capacity building training on **Infection Prevention and Control (IPC) and WASH**, development of WASH/IPC protocols/guidelines, provision of hand washing technology and infectious waste collection supplies/bins, household water treatment products, water quality monitoring and surveillance activities. UN continued its support to MoH on development of **National Cholera elimination plan and strengthening WASH emergency response coordination and partnership mechanisms**.

OUTPUTS

	UN Entities	Assessment*	Expenditures (USD)	% of Expenditures	
1. Strengthened capacity of WASH sector Ministry (water, health & education) in conducting strategic planning, coordination, leveraging, advocacy and implementation of development and emergency WASH interventions.	UNICEF, WHO, UNHCR, UNOPS, UNDP, IOM	>75% 74-50% <49%	3,750,000	4%	
2. Strengthened sector WASH capacity in knowledge management that informs improvements in service delivery, procedures, policies, monitoring and evaluation at federal and regional levels.	UNICEF, WHO, UNHCR, IOM, UNOPS, UNDP	>75% 74-50% <49%	8,750,000	10%	
3. Enhanced support for children and families leading to resilient and equitable, access to and use of safe and adequate water and sanitation services and adoption of appropriate hygiene practices in households and institutions in urban and rural areas.	UNICEF, WHO, UNHCR, IOM, UNOPS, UNDP	>75% 74-50% <49%	22,500,000	25%	
4. Populations affected by WASH Emergencies receive WASH services in line with minimum standards.	UNICEF, WHO, UNHCR, IOM, UNOPS, UNDP	>75% 74-50% <49%	54,000,000	61%	
TOTAL:		>75%	89,000,000	100%	

INDICATORS

	Baseline	Target value	Actual value	Is indicator met?
1. % of population using safe and adequate WASH services disaggregated by rural and urban areas	58%	83%	Overall = 69% Rural = 62% Urban = 97%	Target for urban was met, while for rural was not (WHO/UNICEF Joint Monitoring Programme 2019 report)

*

>75% fully achieved
74-50% partially achieved
<49% not achieved

PILLAR # 3

Investing in human capital and expanded access to quality, equitable basic social services

OUTCOME # 10

By 2020 equitable access created and quality education and training provided to all learners at preprimary, primary and post primary with a focus on the most disadvantaged and vulnerable children, populations and localities.

Co-convening

UN Entities:

UNESCO - Secretariat
UNICEF

Participating

UN Entities:

WFP, WHO, UN Women, UNHCR, UNFPA

Implementing Partners:

MoE, REBs, FTVETA

RESULTS

Over the past decade, Ethiopia made significant progress towards universal primary education. However, disparities remain that impact children's access to educational services. Drop-out and low attendance rates are considerably higher in regions with larger pastoralist and rural-agriculturalist communities, such as Afar, Somali and parts of Oromia and SNNP regions.

Early Childhood Education (ECE): UN supported the MoE in revising the national Early Childhood Development and Education Policy Framework and implementing the ECE services such as the O-class, Child to Child (CtC), and Accelerated School Readiness (ASR). UN provided ECE for 43,715 children (20, 464 girls), including 344 children (141 girls) in IDP contexts.





General education curriculum: UN supported comprehensive review of the general education curriculum with a greater focus on the acquisition of foundational and transferable skills by 26 million children, adolescents and young people enrolled in pre-primary, primary and secondary schools. To improve teachers' classroom behavior, Assessment for Learning has been integrated into the Continuous Classroom Assessment module under the General Education Quality Improvement Programme (GEQIP-E) which covers 50% of the schools in Ethiopia. UN supported joint adolescent programme to enhance adolescent girls' and boys' life skills - a total of 154,000 adolescent girls were trained on skills development for learning, personal empowerment, active citizenship and/or employability.

Education in Emergency (EiE): UN strengthened federal and regional EiE clusters to assess the education needs and restore education through financial and technical support. With UN's support, a total of about 1.8 million children (including IDPs and refugees) affected by humanitarian situations were enabled to accessing formal or non-formal primary and secondary education.

General Education Proclamation: UN supported the development and refinement of the General Education Proclamation which is currently cleared by the Attorney General and submitted to the Councils of Minister for endorsement before approval by the House of Peoples Representative. The proclamation clarifies the rights, obligations, roles and responsibilities of the different actors of the education sector and stipulates free and compulsory education at primary level.

COVID-19 pandemic forced over 26 million children nationwide to stay out of school from mid- March 2020. UN advocated and supported the MoE to start home-based distance education using the already existing education radio stations, mass media and digital platforms. Addis Ababa, Amhara, Benishangul Gumuz, Dire Dawa, Gambella, Oromia, SNNP, Somali and Tigray regions delivered distance education to over 5.2 million (2,184,000 girls) primary and secondary school children (46%). Safe school reopening taskforce has been established, UN is supporting the government in the planning of safe school reopening .

OUTPUTS

	UN Entities	Assessment*	Expenditures (USD)	% of Expenditures	
1. Enhanced capacity of the education system to provide equitable access to early stimulation and quality school readiness programs to all children 4-7 years focusing on the disadvantaged and vulnerable children.	UNICEF	<div>>75%</div> <div>74-50%</div> <div><49%</div>	1,060,596	17%	
2. Enhanced technical and institutional capacity for equitable and improved delivery of quality general education provided to all children and youth of school age supported by strong alignment of quality curricula, teacher training, classroom practices, quality assurance and learning assessment to improve the learning outcomes.	UNICEF	<div>>75%</div> <div>74-50%</div> <div><49%</div>	1,729,423	28%	
3. Strengthened capacity of national and subnational institutions to ensure equitable and inclusive access and retention for in and out of school children in primary and secondary focusing on the vulnerable and disadvantaged groups including girls, pastoralist children and the urban poor.	UNICEF	<div>>75%</div> <div>74-50%</div> <div><49%</div>	2,578,327	42%	
4. Capacity of the education system enhanced for the creation, dissemination and use of knowledge for policy development, advocacy, governance, program and school management for enhanced quality education and learning.	UNICEF	<div>>75%</div> <div>74-50%</div> <div><49%</div>	790,574	13%	
TOTAL:		<div>74-50%</div>	6,158,920	100%	

INDICATORS

	Baseline	Target value	Actual value	Is indicator met?
1. GER at pre-primary by gender	33% (33% F, 50% M)	80% (80% F, 80% M)	40.7% (39.7% F, 41.9% M)	<input type="radio"/> No
2. Primary Education Completion Rate by Gender	46.7% (46.7% F, 46.7% M)	75% (75% F, 75% M)	62.1% (59.7% F, 64.4% M)	<input type="radio"/> No
3. NER at primary and secondary education by gender	93% (90.1% F, 95.1% M)	98% primary, 47% secondary	94.7% primary, 25.3% secondary	<input type="radio"/> No
4. Gender Parity Index at Primary Education	0.94	1	0.9	<input type="radio"/> No
5. % of grade 4, grade 8 and grade 10 students who score 50% or above the composite scores in NLA	Grade 4 = 43% (2012) Grade 8 = 44% (2012) Grade 10 = 23% (2014)	50% (50% F, 50% M) 50% (50% F, 50% M) 50% (50% F, 50% M)	4.74% (2015/16) Grade 8- 41.14% (2015/16) Grade 10 - data n/a	<input type="radio"/> No

*

■ >75% fully achieved
■ 74-50% partially achieved
■ <49% not achieved

PILLAR # 3

OUTCOME # 8

Investing in human capital and expanded access to quality, equitable basic social services

By 2020, targeted population groups have improved access to and use of quality, equitable, gender responsive and sustainable, HIV prevention, treatment, care and support services so that 90% of those HIV infected know their status, 90% of those tested positive have got treated and 90% of those treated have got viral suppression.

Co-convening

UN Entities:

UNAIDS - Secretariat
WHO

Participating

UN Entities:

UNICEF, UNFPA, WFP, UNODC, ILO, UNHCR, IOM, UN Women

Implementing Partners: HAPCO, MoH, RHBs, ARRA, MoLSA, EPHI, NEP+, NEPWE, MOE, MOY

RESULTS

79% of estimated People Living With HIV (PLHIV) know their HIV status, 90% of them were on antiretroviral therapy (ART) and 91% were virally suppressed.

Adolescent and youth related and key and priority populations (KPP) focused interventions were implemented during the reporting period. > 50,000 youth including young sex workers, HIV positive youth and youth with disabilities were reached. Since the COVID-19 outbreak, the necessary HIV prevention messaging was transmitted to adolescents and KPP integrated with COVID-19 response.

HIV National Strategic Plan: UN supported the development of the new NSP 2021-2025, which includes a targeted combination prevention approach for KPP categorizing geographical locations into high incidence/burden, medium incidence/burden, low incidence/burden. The NSP acknowledges the need to address human rights, gender and age-related barriers and inequities in access to services. Gender Assessment of the national HIV response was undertaken; the preliminary Gender Assessment report was used to inform the new NSP 2021-2025 and the 2021-2024 Global Fund application.

Prevention of mother-to-child transmission (PMTCT): Comprehensive PMTCT services are currently available in 2,865 health facilities in an integrated one-stop approach using the MNCH platform. The HIV testing coverage among pregnant women is 84% while 65% for syphilis (as of July 2020). The HIV PMTCT coverage is 81% (as of July 2020). The MTCT rate declined from 39.6% in 2000 to 13.6% in 2019. PMTCT of HIV has been provided as part of the comprehensive SRH services by the MHNTS. HIV/AIDS key messaging has been provided to IDP/returnee/Host communities. 14,211 targets have been reached.

Testing: The country has adopted a set of highly targeted and differentiated testing interventions for each identified population group. As of July 2020, 81.5% of identified HIV positive cases were linked to HIV care and treatment services.

UN produced **national estimation for HIV and AIDS using SPECTRUM 2019, national HIV/AIDS Epidemiological Synthesis** and supported finalization and dissemination of the **National Condom Strategy**.

UN supported national coordination platforms such as the **Global Fund to fight AIDS, Tuberculosis and Malaria Country Coordinating Mechanism (GFATM CCM)**, **Development Partners Group on HIV/AIDS (DPG-AIDS)** and provided technical support to the **Federal HIV/AIDS Prevention and Control Office (HAPCO)**, the secretariat for the coordination of national HIV response.

OUTPUTS

	UN Entities	Assessment*	Expenditures (USD)	% of Expenditures	
1. High impact HIV prevention program institutionalized nationwide and minimum package for prevention implemented in key sectors/ key populations.	UNAIDS, WHO, UNFPA, UN Women, UNICEF, WFP, ILO, UNHCR, IOM, UNODC	>75% 74-50% <49%	2,612,000	74%	
2. Enhanced technical and institutional capacity at national and subnational level for the provision of comprehensive HIV testing awareness and services.	UNAIDS, WHO, UNFPA, UN Women, UNICEF, WFP, ILO, UNHCR, IOM, UNODC	>75% 74-50% <49%	167,000	5%	
3. Strengthened capacity of relevant service providers and partners to ensure access and retention of eligible population on quality care and treatment.	UNAIDS, WHO, UNFPA, UN Women, UNICEF, WFP, ILO, UNHCR, IOM, UNODC	>75% 74-50% <49%	300,000	9%	
4. HIV sensitive social protection minimum package accessed by HIV infected, exposed and vulnerable children, adolescent and most at risk women, men and PLHIV.	UNAIDS, WHO, UNFPA, UN Women, UNICEF, WFP, ILO, UNHCR, IOM, UNODC	>75% 74-50% <49%	170,100	5%	
5. All regional and national programs generate and make use of quality gender disaggregated evidence to design and implement holistic sustainable policy and programs.	UNAIDS, WHO, UNFPA, UN Women, UNICEF, WFP, ILO, UNHCR, IOM, UNODC	>75% 74-50% <49%	259,500	7%	
TOTAL:		>75%	3,508,600	100%	

INDICATORS

	Baseline	Target value	Actual value	Is indicator met?
1. Number of new HIV infections in a year (M/F)	22,986	18,678 (Final draft spectrum HIV estimate)	15,000	Yes
2. Number of deaths due to AIDS (M/F)	23,532	7,286 (Final draft spectrum HIV estimate)	12,000	No
3. Percentage of adult (15-49) population having comprehensive knowledge about HIV AIDS (M/F)	24% F, 34% M	-	-	-

*

>75% fully achieved
74-50% partially achieved
<49% not achieved



PILLAR # 4

Good governance, participation and capacity development

OUTCOME # 11

By 2020, key government institutions and other stakeholders apply enhanced capacities to ensure the rule of law; an efficient and accountable justice system; and the promotion and protection of human rights in line with national and international instruments, standards and norms.

Co-convening UN Entities:
UNDP - Secretariat
OHCHR

Participating UN Entities:
UNICEF, UNODC, ILO, UNHCR
IOM, UN Women, UNESCO

Implementing Partners:
FSC, EHRC, MoWCY, OAG, ARRA

RESULTS

UN supported:

The Office of the Attorney General (OAG) to establish the Legal and Justice Affairs Advisory Council (LJAAC) including through recruiting experts to strengthen the technical capacity of the newly formed Council. Support was provided to the OAG to boost the capacity of **the Federal Police** to conduct complaint investigation in a rights based manner. The awareness raising sessions that involved thousands of police officers helped to enhance the capacity of the Police to abide by human rights laws and standards.

The Federal and Regional Prison Administrations to improve the conditions of the prisons and detention centers in line with applicable international standards; recent finalization of the prison curriculum; development of performance measurement tools for **Federal Public Prosecutors**, which are expected to foster the efficiency of Public Prosecutors to discharge their duties.

The reform process in **the Ethiopian Human Rights Commission (EHRC)** in various ways: enhancement of its internal capacity to deliver its mandate; review its legislation; development of a mobile application and a Telegram Chatbot focused on providing information on human rights standards and the work of the Commission to the public; the development of a human rights education manual on women and children's rights. The EHRC has developed independent monitoring tool to systematize child rights monitoring in the country. In 2019, EHRC conducted monitoring visits to 44 prisons, 47 police stations, 2 juvenile detention centers. Monitoring of prisons and detention centers in Jimma and Jijiga regions in relation to COVID-19 were also conducted.

Equipping the communications section of **the courts** with skilled human resource and technical support. UN supported alternative dispute resolution mechanism approaches strengthening the Court Annexed Mediation pilot initiative and relevant studies.

Regional OAG and Agency for Refugees and Returnees Affairs (ARRA) to launch mobile court services for IDPs and Refugees has helped expand the right to access to justice by the disadvantaged communities. UN engaged in advocating for providing technical support to ARRA throughout the development of the Refugees Proclamation.

Submission of overdue reports under **the International Covenant on Civil and Political Rights and the Committee Against Torture**, the ongoing finalization **the Convention on the Rights of the Child** report and the onset of preparations to report on **the Committee on Economic, Social and Cultural Rights and the African Commission on Human and Peoples' Rights**.

MoWCY to establish monitoring and evaluation mechanisms at all levels to improve the capacity of institutions to implement laws and policies on children effectively. **Ethiopian Institutions of Ombudsman (EIO)** undertake supervisions to ensure that the executive carries out its functions as per the law and respects the rights of individuals with special focus on children. The EHRC and EIO were engaged in monitoring the child rights situation. Accordingly, EIO supported two centres for the deaf-blind and children with mental disability and recommended that the government give special attention to people with disability.

Piloting of an innovative Business Continuity Planning project intended to ensure continuity of key government functions during **COVID-19 pandemic**. EHRC produced two TV spots on the impact of COVID on the rights of the Child. UN assisted the government in integrating human rights perspectives in its socio-economic impact assessment of the pandemic. UN introduced digital complaint system and helpline services for refugees and asylum-seekers since the onset of COVID-19.

OUTPUTS

	UN Entities	Assessment*	Expenditures (USD)	% of Expenditures	
1. Enhanced institutional and technical capacity of the justice system to deliver accessible, efficient and accountable justice to all (with a focus on vulnerable groups).	UNDP IOM OHCHR	>75% 74-50% <49%	2,020,777	22%	
2. Enhanced capacity of key government bodies, human rights institutions and other stakeholders to promote, coordinate, report and follow up on their human rights obligations in line with international and regional standards.	UNDP UNICEF OHCHR	>75% 74-50% <49%	525,000	6%	
3. Strengthened technical capacity of key government institutions and other stakeholders to combat illicit trafficking, irregular migration and organized crime.	IOM	>75% 74-50% <49%	6,557,300	72%	
TOTAL:		74-50%	9,103,077	100%	

INDICATORS

	Baseline	Target value	Actual value	Is indicator met?
1. Proportion of citizens (disaggregated by sex and age) expressing the justice system as being physically and financially accessible, efficient and equitable	45%	60%	A national survey to measure the indicator has not been conducted due to the COVID 19 pandemic, which resulted in restriction of movements	<input type="radio"/> No
2. Number of UPR recommendations implemented	25%	75%	3rd cycle recommendation made in 2019 and not yet assessed	-

*
 >75% fully achieved
 74-50% partially achieved
 <49% not achieved



PILLAR # 4

Good governance, participation and capacity development

OUTCOME # 12

By 2020, key government institutions and other stakeholders utilize enhanced capacities to ensure equitable, efficient, accountable, participatory and gender-responsive development.

Co-convening

UN Entities:

UNDP - Secretariat
OHCHR

Participating

UN Entities:

UNODC, UNICEF, UNWomen, ILO, UN-Habitat, UNESCO, UNOPS

Implementing Partners:

HoF, NEBE, EHRC, MoWCY, EIO, EBA

RESULTS

UN implemented the flagship project **Elections for Ethiopia's Democracy Strengthening (SEEDS)** which commenced in 2019 to provide technical assistance to the reformed **National Electoral Board of Ethiopia (NEBE)** in light of upcoming national elections. UN supported NEBE to undertake a National Case Study of Mapping of Political Parties and Gender Equality (Gender Audit of Political Parties) in order to assess women's political participation and their inclusion in decision making processes. The project has developed a concept of Joint Election Operations Centre and software platform to report cases of politically motivated violence and activate a redress mechanism.

UN supported digitization of **the Federal Ethics and Anti-Corruption's (FEACC)** system for Declaration and Registration of Assets. The development of the system resulted in completion of the transfer of income and asset files of more than 220,000 registered appointees, electorates and selected public officers found at federal level and two city administrations that have been on paper.

UN supported **the Ethiopian Institution of the Ombudsman (EIO)** in developing and launching a hotline and call center system enabling complainants to lodge their complaints remotely from their respective localities. Supported EIO in production of a National Children Parliamentary Guideline and a Child-Friendly Cities framework. Assessment is done on the Child-Friendliness of 11 cities in Ethiopia Through the collaboration between MOWCY, EIO and regional councils six regional children parliaments.

UN supported **the Office of the Attorney General (OAG)** in implementing the National Human Rights Action Plan II (NHRAP II) and elaboration of the NHRAP III in a participatory manner. UN provided technical support to **the Ethiopian Reconciliation Commission (ERC)** in mid-2020 with the aim of strengthening its institutional capacity to deliver on its mandate.

UN supported **the Ethiopian Broadcasting Authority (EBA)** to raise awareness on the dangers of hate speech, to organize public consultations and write articles on media responsibilities, ethical considerations in journalism and reporting. Assessment of civic participation and media landscape that have led to the drafting of a Civic Engagement Policy Framework as well as a new Media Policy.

UN supported **the Ethiopian Human Rights Commission (EHRC)** to collaborate with **the Ethiopian Federation of National Association of Persons with Disability** to assess the challenges and risks of human rights violations towards persons with disability.

Through **the Peace Building project**, UN enhanced the capacity of federal and regional officials working around peace and security; women, children and youth rights; Education Bureaus and disaster and risk management on ways of developing interventions on conflict transformation, management, conflict sensitive planning, rule of law and peacebuilding. In partnership with **the Inter Religious Council of Ethiopia (IRCE)**, UN has fostered peace dialogues focused on religious and ethnic diversity targeting conflict hot spot areas.

As part of **the Women in Peace project**, UN strengthened the capacity of Parliamentarians, Regional State Councils members from Oromia, SNNPR and Somali as well as women leaders of CSO's, women peace ambassadors and traditional mediators to promote the role of women in peace.

UN with **the Governments of Ethiopia and Kenya, and the Intergovernmental Authority on Development (IGAD)**, implemented a **cross-border cooperation project between Ethiopia and Kenya** for conflict prevention and peacebuilding in Marsabit Moyale cluster.

OUTPUTS

	UN Entities	Assessment*	Expenditures (USD)	% of Expenditures
1. Strengthened capacity of key democratic institutions to deliver on their mandates and to promote participation, transparency, accountability and responsiveness.	UNDP, UNODC, UNICEF, UNWomen, OHCHR	<div><div>>75%</div><div>74-50%</div><div><49%</div></div>	75,000	19%
2. Local government in targeted regions enabled to design and implement sustainable, inclusive and result-oriented development strategies and to promote accountability and participation.	ILO, UNICEF, UNDP, UNWomen, OHCHR	<div><div>>75%</div><div>74-50%</div><div><49%</div></div>	317,518	81%
TOTAL:		<div><div>74-50%</div></div>	392,518	100%

INDICATORS

	Baseline	Target value	Actual value	Is indicator met?
1. % of public rating of the Ethiopian Civil Service as being accountable, transparent, responsive and efficient in doing its businesses	60%	85%		-
2. % of public rating of key democratic institutions vis-à-vis their independence and professional integrity	25%	75%	Assessment not done but improvement registered following the change in regime	
3. Percentage of women MPs at federal and regional levels	38.8% (federal); 40.7% (regional)	43% (federal); 45% (regional)	Election has not been conducted, and the actual is the baseline	
4. Percentage of women in top executive leadership/cabinet at fed. level			Following the government reform in Ethiopia since 2018, the proportion of women in top executive leadership/cabinet at federal level significantly improved towards 50%.	

*

■ >75% fully achieved
■ 74-50% partially achieved
■ <49% not achieved



PILLAR # 4

Good governance, participation and capacity development

OUTCOME # 13

By 2020, national and sub-national institutions apply evidence-based, result-oriented and equity-focused decision making, policy formulation, programme design, monitoring, evaluation and reporting.

Co-convening

UN Entities:

UNFPA - Secretariat
UNICEF

Participating

UN Entities:

UNCDF, UNDP, UN Women, UNCTAD, UNHCR

Implementing Partners:

CSA, PDC, MoF, MoH, INVEA

RESULTS

- UN supported initiatives in the generation of data in the country; such efforts include support to generating evidence through in-depth analysis, availing data disaggregated by age and sex to inform national development plans, support to the anticipated implementation of **the 4th Ethiopia Population and Housing Census (EPHC)**, implementation of **the Mini-EDHS (Ethiopia Demographic and Health Survey) in 2019**, implementation of **the Integrated Management Information System (IMIS)**, etc.
- UNDAF Result Groups were instrumental in making vital and timely contributions to the finalization of the GOE's initiative in the **assessment of the socio-economic impact of COVID-19 in Ethiopia**.
- UN made contributions in the efforts for the development of "bankable" proposals in different areas such as **the development of the joint "bankable" proposal towards the mitigation for the COVID-19** in the country in selected areas (namely Micro, Small and Medium Enterprises (MSMEs), creation of jobs, agricultural and rural economy and social protection) that can be used to attract resources from bilateral organizations to mitigate the effect of the pandemic.
- UN supported the completion, validation and dissemination of the **comprehensive assessment of the implementation of the 1993 Population Policy of Ethiopia** (which categorically suggested that the revision of the Population Policy of Ethiopia is mandatory in line with the current demographic architecture of the country).
- UN supported the preparation and finalization of a study on **"Demographic Dynamics and Priority Population Issues in the Country"**, which was instrumental in the formulation of the 10-Year Perspective Development Plan in the country.
- In the area of **the Demographic Dividend**, UN conducted a series of activities mainly at regional levels in stimulating knowledge on the concept of the demographic dividend and in the integration of population data in national/regional development plans.
- UN supported undertaking of **the comprehensive Civil Registration and Vital Statistics (CRVS) assessment to develop the second National CRVS Costed Strategic Plan**, which is expected to inform revision to the business process including to bring greater efficiencies and effectiveness since the system was launched in August 2016.
- UN contributed to ensuring stride achievements in **the registration of births, deaths, marriage and divorce rates at national as well as at regional levels** in accordance with the implementation of conventional and decentralized CRVS system put at national and regional levels.

OUTPUTS

- Improved capacity of federal and regional government institutions to operationalize a conventional and decentralized system of civil registration and vital statistics.
- Enhanced capacity of government institutions and national/regional actors to collect, analyse and utilize socioeconomic, gender, environmental, governance and other disaggregated data to formulate equity and evidence-based development policies, strategies and programmes.

UN Entities	Assessment*	Expenditures (USD)	% of Expenditures
UNICEF UNFPA	<div><div>>75%</div><div>74-50%</div><div><49%</div></div>	3,212,938	17%
UNICEF UNFPA UNDP	<div><div>>75%</div><div>74-50%</div><div><49%</div></div>	15,558,810	83%
TOTAL:	<div><div>>75%</div></div>	18,771,748	100%



INDICATORS

	Baseline	Target value	Actual value	Is indicator met?
1. Number of national/regional policies and strategies revised/adopted after analyses, including programme evaluations	N/a	Revision of the Population policy of Ethiopia	Partially done	<div> <div></div> <div>Yes</div> </div> <p><i>Comment:</i> A comprehensive assessment on the implementation of the 1993 Population Policy of Ethiopia has been financially and technically supported, completed, the results of which were disseminated during the reporting period. The assessment has recommended that revisions be made to the out-dated population policy in such a way that it considers incorporating the current demographic architectures in the country (also taking into account such emerging issues as the demographic dividend, Sexual Reproductive Health and Reproductive Rights as the bedrocks of the 1994 ICPD tenets and principles, urbanisation, migration, ageing, GBV and HTP. IDPs and refugees, etc.</p> <p>According to the recommendations of the compressive assessment of the implementation of the 1993 PPE, revision of the PPE is one of the priority areas during the implementation period of the next UNSDCF (July 2020-June 2025).</p>

*

>75% fully achieved

74-50% partially achieved

<49% not achieved



PILLAR # 5

Equality and empowerment

OUTCOME # 14

By 2020, increasingly women and girls are protected from violence, HTPs, exploitation, discrimination and are rehabilitated and reintegrated to enjoy and exercise their human rights.

Co-convening

UN Entities:

UN Women - Secretariat
UNFPA

Participating

UN Entities:

UNDP, IOM, UNICEF, WHO, WFP, ILO, UNESCO, UNAIDS, OHCHR, UNHCR

Implementing Partners: MoWCY, BoWCY, MoLSA, MoF, MoP, CSA, AWSAD, NEWA, HoPR, NEBE, EHRC, PDC, EWLA, AWiB, FSC, FAG, MoE, MoTI, EOC-DICAC, Norwegian Church Aid, AWSAD, ENWS, Agar Ethiopia, IPDC

RESULTS

Gender Equality Scorecard (GSC): UN conducted a GSC exercise, which identified opportunities and key challenges for the implementation of **Gender Equality and Women Empowerment (GEWE)**. The GSC exercise identified strategies and actions on how to better coordinate and implement GEWE interventions across UN agencies. A joint theory of change exercise was also conducted.

Gender mainstreaming in policies, strategic plans and frameworks: UN supported the GoE in the development of the **Ten-years Perspective Development Plan**, where gender has a separate pillar. The **UNSDCF (2020-2025)** was informed by a thorough gender analysis and the planning for the UNSDCF has made it possible for mainstreaming gender in the Framework. UN and other stakeholders joined forces with the MoWCY to undertake **a review assessment of the National Policy on Women (1993)**. UN led and contributed to the **National health sector strategic plan** to include gender mainstreaming, women empowerment and persons with disabilities as priority focus. In addition, a separate gender-based violence/sexual violence (GBV/SV) strategic plan 2020/21-2025/26 was produced.

COVID-19: UN supported the GoE's response to the pandemic: setting up of temporary shelter for survivors of violence during COVID-19, establishing of shelters for returnee/deportee survivors of violence, revitalization of hotline services, the establishment and revitalization of legal aid centers to ensure access to justice for women and girls, the National Survey on the Differential Impact of COVID-19 on women and men, the assessment on the gender responsiveness of COVID-19 prevention, response and recovery efforts, the integration of gender in the UN socio-impact assessment of COVID-19, the creation of public awareness on the disproportionate impact of the COVID-19 pandemic on women, provision of personal protective equipment (PPEs) for vulnerable women (women working in industrial parks and women domestic workers returned from the Middle East), media campaigning to minimize the impact of COVID-19, the translation of IEC materials in ten local languages and dissemination. In June 2020, two TV spots were broadcasted on national TV channels and SMS was sent out to 34 million individuals drawing attention to and calling for concerted effort to address the risk of GBV and other socio-economic consequences of the pandemic on women and children. With UN's support, the MoWCY provided dignity kits to 24,000 women and girls between January and October 2020 in Afar, Oromia, Somali, Gambella, Benishangul and Amhara, to distribute food items and PPEs for 300 vulnerable women and 1500 migrant returnees in Addis Ababa and Oromia.

Data and knowledge products (studies, assessments, manuals, guidelines) on GEWE:

- **A comprehensive study on GEWE and child well-being** based on EDHS data from 2000-2016 was conducted – findings will contribute to the upcoming 2021 EDHS.
- Different capacity building materials such as GEWE Training Manual for Women Developmental Groups, School Related Gender Based Violence (SRGBV) Training Manual for teachers, A guidance on workplace harassment 2020, and Gender analysis of primary school curriculum and text books were produced.
- The first ever **National Gender Information System (NGIS)** is established by MOWCY with support from the UNCT and African Development Bank. The NGIS will enhance the availability and accessibility of gender statistics in the country and enable MOWCY to track and report progress on gender equality across the domains of economic, social, political and human security.

Capacity building, advocacy and outreach:

- Health workers were trained on the health response to GBV/SV resulting in 206 health facilities providing comprehensive health care to survivors of gender-based violence (23 hospitals with one-stop center and 203 health center/primary hospitals with multi-disciplinary health team) across the country.
- Capacity building on the gender mainstreaming strategy was provided for multi-sectoral stakeholders (Ministry of Health, Ministry of Tourism, MoWCY, PDC, MoF and others) to familiarize the tools for gender analysis, gender audit and gender budgeting.
- >1000 IOM psychosocial support and MoWCY staff, GBV steering committee members, mental health and psychosocial support (MHPSS) community volunteers, health workers and front line responders and WASH technical working group members received training and awareness on GBV, COVID-19, and MHPSS aspect of COVID-19.
- 68,973 internally displaced persons (IDPs) and members of the host communities were reached with key GBV messages through socio-cultural activities and regular mass campaigns. 15,074 individuals during mental health day and 2,830 during International Women's Day were reached with key GBV and mental health messages.

Violence against women and girls (VAWG) and child marriage: UN supported:

- Undertaking of assessment on **'Cases of VAWG reported to police, investigated, prosecuted and adjudicated in Addis Ababa and Dire Dawa city administrations over the past three years (2015/16-2017/18)'**. The key recommendations of the assessment have already informed the ongoing institutional strategic plan of the Federal Attorney General. Furthermore, a "National Comprehensive Mapping and Analysis of National Laws in Ethiopia as a Step Towards the Elimination of Discriminatory Laws" was conducted.
- Development of a **National Roadmap (2020-2024) to end child marriage and FGM** (launched in August 2019). The Roadmap is the first evidence-based costed plan which includes key strategies and interventions to end child marriage and FGM. UN Violence Against Children and Women (VACW) coordination group was established.
- Development of **National Standard Operating Procedures (SOP) for shelters** providing services for women and girls survivors of violence, establishment of national hotline for SGBV survivors. **One-stop centers** were launched in Tigray, Oromia and Addis Ababa and additional one-stop center established in Afar Region in collaboration with AMREF-Ethiopia.



EQUALITY & EMPOWERMENT - WOMEN

12

RESULT GROUP



PILLAR # 5

Equality and empowerment

OUTCOME # 14

By 2020, increasingly women and girls are protected from violence, HTPs, exploitation, discrimination and are rehabilitated and reintegrated to enjoy and exercise their human rights.

Co-convening

UN Entities:

UN Women - Secretariat
UNFPA

Participating

UN Entities:

UNDP, IOM, UNICEF, WHO, WFP, ILO, UNESCO, UNAIDS, OHCHR, UNHCR

Implementing Partners: MoWCY, BoWCY, MoLSA, MoF, MoP, CSA, AWSAD, NEWA, HoPR, NEBE, EHRC, PDC, EWLA, AWiB, FSC, FAG, MoE, MoTI, EOC-DICAC, Norwegian Church Aid, AWSAD, ENWS, Agar Ethiopia, IPDC

OUTPUTS

	UN Entities	Assessment*	Expenditures (USD)	% of Expenditures	
1. Law enforcement agencies and judiciary have enhanced capacity to prevent and respond to violence against women and girls, including in humanitarian context.	UNWomen, UNICEF, IOM, UNFPA, UNAIDS, OHCHR, UNHCR	<div>>75%</div> <div>74-50%</div> <div><49%</div>	1,158,779	6%	
2. Improved coordination and accountability mechanism of government and nongovernment actors on ending child marriage, FGM/C and VAW.	UNWomen, UNICEF, UNFPA, WHO, IOM, OHCHR, UNHCR	<div>>75%</div> <div>74-50%</div> <div><49%</div>	9,887,513	52%	
3. Increased capacity of community members, religious institutions and CBOs to eradicate negative stereotypes that perpetuate human rights violations of women and girls.	UNWomen, UNFPA, UNICEF, WFP, OHCHR, UNHCR, WHO, IOM	<div>>75%</div> <div>74-50%</div> <div><49%</div>	2,402,308	13%	
4. Increased availability and accessibility of standardized and comprehensive services to survivors of violence including in humanitarian settings.	UNWomen, UNFPA, UNICEF, WHO, IOM	<div>>75%</div> <div>74-50%</div> <div><49%</div>	4,270,232	22%	
5. Enhanced capacities of institutions to coordinate, implement, track and report on national and international gender equality commitments.	UNWomen, UNDP, UNICEF, UNFPA, UNESCO, OHCHR	<div>>75%</div> <div>74-50%</div> <div><49%</div>	1,283,118	7%	
TOTAL:		<div>>75%</div>	19,001,950	100%	

INDICATORS

	Baseline	Target value	Actual value	Is indicator met?
1. Proportion of accepted CEDAW recommendations implemented	0	70%	TBD	<input type="radio"/> No
2. Prevalence of sexual, physical, psychological violence (SPPV) against women and girls, child marriage and FGM	TBD for SPPV, FGM 23.4 %, Child Marriage 41%	physical violence (reduction by 40%), psychological violence (reduction by 40%), sexual violence (reduction by 70%), FGM 0.5%, Child Marriage 0.5%	TBD (2021 EDHS)	<input type="radio"/> No
3. Number of women and girls survivors of violence and TIP (trafficking in persons) accessing comprehensive services	4,500 Survivors and 300 TIP; 3,600 survivors from one stop centres (OSC)	15,000 Survivors and TIP; 9,000 survivors from OSC	13,413 (Safe houses and OSC)	<input checked="" type="radio"/> Yes
4. % of reported cases convicted in targeted areas	82%	92% out of the prosecuted cases	Conviction rate for all crimes (including VAWG) at the federal level is 99.7%	<input checked="" type="radio"/> Yes

*

■ >75% fully achieved
■ 74-50% partially achieved
■ <49% not achieved

PILLAR # 5

Equality and empowerment

OUTCOME # 15

By 2020, women, adolescents and youth are empowered to influence decisions that concern their life and the development of the country.

Co-convening

UN Entities:

UNFPA - Secretariat
UN Women

Participating

UN Entities:

ILO, UNICEF, IOM, UNDP, UNOPS, UNEP, UNHCR

Implementing Partners:

MoWCY, BoWCY, MoLSA, MoF, MoH

RESULTS

UN supported and implemented programs aimed at **empowering and engaging young people**, with a focus on most vulnerable youth including young people with disability (YPWD), young people living with HIV, youth living in humanitarian and IDP contexts. **>585,000 young people** were reached through life skill training, peer to peer learning, leadership, women empowerment, gender equality and entrepreneurship training across the country.

Youth centres, youth Associations, model youth incubation centres were capacitated to avail a platform where young people can access information and services. **The Youth Friendly Space (YFS)** are equipped with youth friendly recreational and development materials to facilitate the meaningful participation of youth. **>150 youth development platforms** were capacitated through need based technical and material supports.

UN has provided extensive technical and financial support for the development of **digital platforms for youth**:

- A mobile phone application with information on sexual reproductive health and life skills was developed and disseminated.
- A digital platform along with a hotline service with information and service on health and education was developed for YPWD.
- A digital labour exchange web portal and mobile application (<http://www.ethiopianemploymentexchange.com.et/>) was established and availed to enhance the efficiency of Youth Employability services (YES) and Employment service centres.

UN has been raising awareness, building skills and advocating with regard to menstrual hygiene management and comprehensive, sustainable support for the most vulnerable girls. UN supported the provision of **menstrual hygiene and educational materials to >30,000 vulnerable and poor female students**. Opportunities were created for university students to discuss and raise their awareness on gender and women participation in politics and leadership.

UN supported the GoE's efforts to reduce unemployment among the youth. Along with continuous support through training on entrepreneurship and business development skill training, UN provided technical and financial support for the setup of **Youth Employability services (YES) centre**, which later up scaled to City Administration level **Employment Services Centre (ESC)**. UN **partnered with schools/ faculties of different Universities** to create field placements for students in community-based organizations. These partnerships are paving the way for improved pre-service and in-service training framework development in the country.

With UN's support, young people were also capacitated and mobilized to advocate for **climate change and environmental protection**. Among others, they were engaged in the awareness raising global events of World Environment Day and International Biodiversity Day.

COVID-19 response. UN supported youth-oriented interventions related to GBV, HIV prevention, care and support, livelihood and health service provisions. PPEs were procured and distributed to youth development platforms. COVID-19 prevention and response communication materials were developed in local languages and distributed to youth across the country. Food and sanitary material support were provided to young people living with HIV and youth living with disability. Refugee youth served as agents of change and participated in awareness raising activities on COVID-19 preventions.

OUTPUTS

	UN Entities	Assessment*	Expenditures (USD)	% of Expenditures
1. Enhanced capacity of adolescents and youth to lead a healthy and productive life with a special focus on the vulnerable including in the humanitarian settings.	UNICEF, UNFPA, ILO, IOM, UNFPA, UNEP, UNHCR, UNDP	>75% 74-50% <49%	901,639	83%
2. Enhanced institutional capacities to update and implement existing policies, strategies and programmes targeting youth and adolescents.	UNICEF, UNFPA, ILO	>75% 74-50% <49%	-	-
3. Increased capacity of women, youth and adolescents to participate, organize and network for effective participation, leadership and decision making.	UNWomen, UNICEF, UNDP, UNFPA	>75% 74-50% <49%	186,696	17%
TOTAL:		>75%	1,088,335	100%

INDICATORS

	Baseline	Target value	Actual value	Is indicator met?
1. Proportion of leadership positions at regional level held by women and youth	22% (Medium level -Women), 9.7% (Higher level -Women), Youth at regional council-TBD	50% (Women-Medium level), 30% (Women- Higher level) 35% Youth at regional council		No
2. Number of young people (disaggregated by sex) that benefited from interventions (standardized livelihood and youth friendly services) that facilitate their active and meaningful participation in matters affecting their lives.	400,000	921,600 (50% male/ female ratio)		Yes

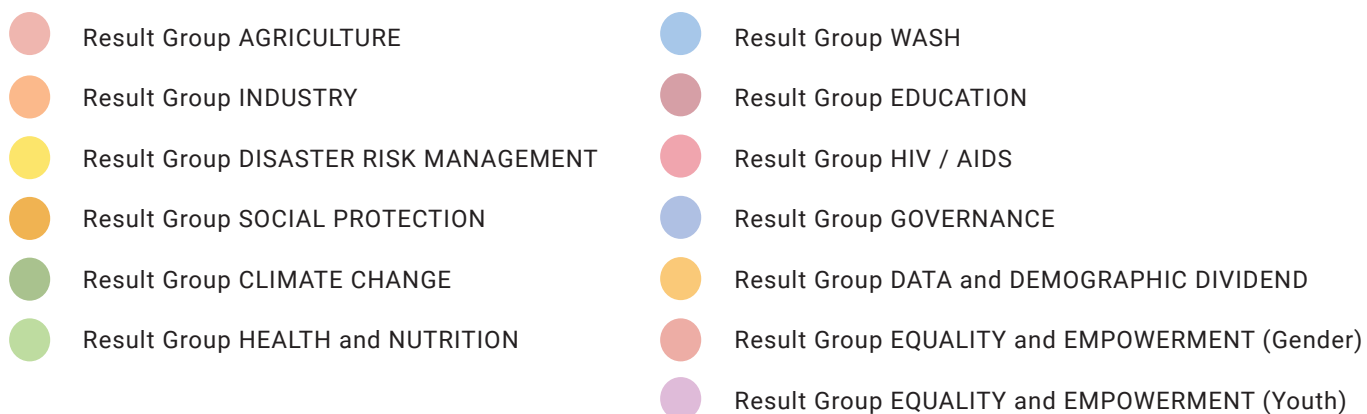
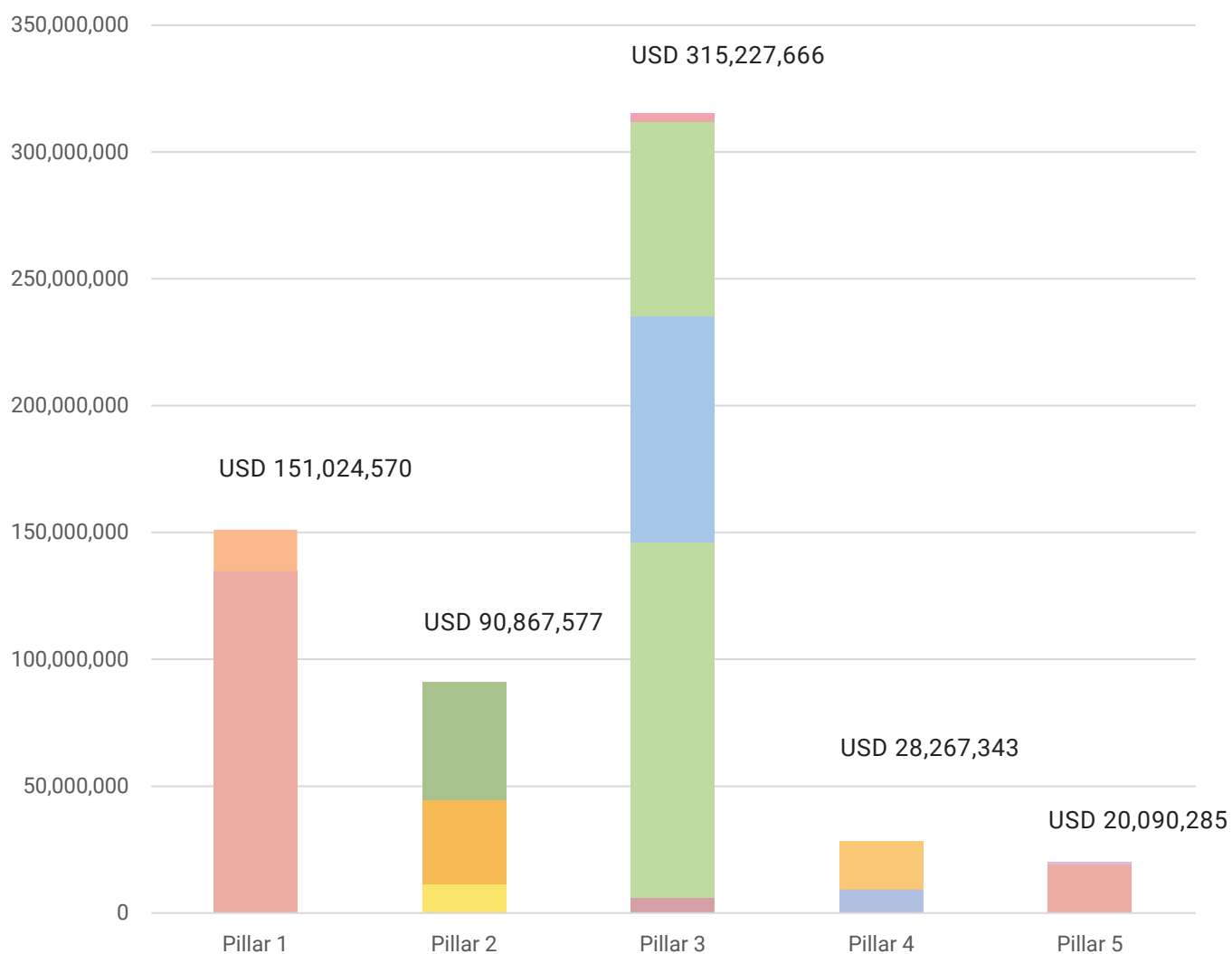
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>75% fully achieved
74-50% partially achieved
<49% not achieved

SUMMARY

FINANCIAL DELIVERY SUMMARY

Total Financial Expenditure = **USD 605,477,441**





KEY CHALLENGES

In general, the period between 2018-2020 was characterized by opportunities at the beginning and challenges throughout affecting overall programme implementation and obligating to divert attention and significant resources to address some emergencies.

Despite the positive moves the country saw during the reporting period, in the contrary it was accompanied by a number of challenges including protracted humanitarian situations induced by wide spread ethnic conflicts which resulted in record high number of internally displaced people in various regions, the occurrence of natural disaster including draught, flooding and the occurrence of the worst Desert Locust invasion in 50 years; the COVID-19 pandemic and the resultant economic downturn; the postponement of the planned 2020 elections and related challenges; and the indefinite postponement of the 4th Ethiopian Population and Housing Census as well as the Ethiopia Demographic Health Survey which has negatively impinged on the generation of up-to-date, timely and disaggregated data for the planning, implementation and monitoring of plans.


Although the above challenges cut across all the pillars and result areas there were also specific challenges that can be attributed to each results group.

Industrial development was constrained by shortage of hard currency to import raw materials and other inputs; Import dependency for almost all inputs including packaging materials; inadequate/inconsistent implementation of the approved incentive packages; non-compliance to the national and international CGMP requirements; lack of access to donor funded and programme related products market, limitations with the

availability of adequately skilled personnel, lack of integrated market data, declining capacity utilization (Approx. 30%), rigid regulation on manufacturing using semi-finished goods or secondary packing.

Implementation of the **Disaster Risk Reduction (DRR)** activities were challenged with significant obstacles due to COVID-19 travel and safety restrictions in Amhara, Tigray and Somali regions where R4 and SIPE programmes are implemented. Due to this Most of the community based DRR activities were postponed. Other major challenges include implementation capacity of regions (lacks expertise and skills, weak institutions and High staff turnover). Furthermore, mobility nature of the pastoralist and climate uncertainty also affected regular implementation of DRM activities such as public works.

Social Protection was disrupted during the periods of civil unrest in Amhara, SNNPR, Oromia and Somali which have temporarily disrupted services and transfers to safety net beneficiaries. This has been exacerbated by climate shocks, such as droughts, which have increased the number of people in need annually. In 2020, the worst locust infestation in 50 years hit Ethiopia, and the COVID-19 pandemic is expected to drive poverty levels across the country. There are additional challenges of unemployment, as more people, particularly in urban areas, are losing jobs, as well as facing increased food insecurity. This will require the expansion of safety nets, with an estimated 1.4 million jobs (19 percent of current employment), threatened due to the crisis. In terms of the National Social Protection Policy, there have been some challenges in government's ability to coordinate and implement aspects of the policy beyond individual programmes.



Climate change related programme implementation was constrained by gap in multi stakeholder coordination; lack of skilled professionals in climate change; recurrent turnover of skilled professionals and leadership; lack of air quality monitoring tools; limited budget allocation; other competing priorities with government counterparts and limited budget allocation for Climate Change and health interventions. Absence of necessary tracking mechanisms (M&E systems, MRV protocols, consistent indicators, and lack of documentation). It is this aspect of measuring what's being done that must change in the future as Ethiopia continues to maintain its leadership on climate change and progresses further towards its CRGE/NDC goals.

Water Sanitation and Hygiene (WASH), the CR-WSP auditing and program reviews have identified key challenges including recurrent turnover of skilled professionals and leadership which is the main cause of loss of institutional memory concerning CR-WSP implementation; other competing priorities with government counterparts that affected timely implementation of planned activities; limited budget allocation for water infrastructure improvement and to expand the program at wider scale, and absence of strong regulatory body to monitor effectiveness of water safety interventions.

The **Education** programme implementation was affected by widespread ethnic conflicts in the different regions. Prolonged and multiple climatic-related emergencies coupled with deteriorating security situations in several parts of the country (Oromia, Somali, Amhara, and SNNP regions) have also contributed to increased students' absenteeism and dropout rates. Children and young people affected by these emergencies abandon their studies as they relocate to temporary settlement in which there are limited and poor facilities. The conflict also resulted in diversion of planned

investments and stretched the capacities within UN and Government counterparts in seeking to respond to the impact of the humanitarian situation on sector plan targets. The insufficient early child education facilities available to cater for the large number of 4-6-year-old children, with service predominantly located in urban areas and the poor quality of O-classes and shortage of early learning materials were major challenges in delivering quality pre-primary education. Several Montessori materials used in O-classes were not age appropriate or aligned with the O-class Curriculum, and poor quality.

The challenges that surrounded the **HIV/AIDS programme** include relatively flat domestic spending with heavy reliance on donor funding; lack of platforms to organize the various key and priority populations to enable them play stronger roles in the fight against the HIV/AIDS epidemic; policy frameworks fail to address current context, lack of recognition and absence of programming for two populations who are among those most at risk of HIV: men who have sex with men, and transgender people. The country context does not recognize the presence of those groups; lack of clarity on the coordination role at federal and regional level and policy barrier to scale up PrEP beyond the existing target populations.

The negative effects of the COVID-19 pandemic created restrictions in the implementation of data collection as well as the dissemination of the results of research; restricted the implementation of activities due to the decline in the security situation of the country limiting travels to regions; birth registration rates falling behind due to security concerns. Restriction of movement has greatly affected the flow of services and resources to the people. Similarly, where resources have been disbursed, quality of distribution and utilisation cannot be properly verified and ascertained.

While the political will is there to invest in strengthening accountability, participation democratic processes and rebuild the trust of the public at large in its capacity, accountability/ democratic institutions still face numerous challenges concerning institutional capacity, adequate infrastructure and resources – human, material and financial. These represent important risks to the advancement of democratic and inclusive governance. In addition, the following were key challenges: sustained political instability and conflict; frequent change of government management and staff at all levels; continuous turnover of government staff requiring more investment on capacity building; limited government capacity at lower levels; limited resource considering the emerging demands and needs for participatory planning approach. Further, the child participation guideline and tool which

was developed as part of the Child-Friendly Cities framework has not yet been equally implemented across regions.

COVID-19 has impacted the implementation of programmes related to VAWG, GBV and HTPs especially where face to face interventions have been identified as critical ways of implementation. Moreover, essential services were partially interrupted due to the state of emergency including the restriction in movement that made it difficult for survivors to access services. Furthermore, the rise of domestic violence at the time of COVID-19 evidenced by global studies has added to the challenges encountered. The government has not been able to scale-up its response to VAWG at the time of COVID-19 to address the challenge.

LESSONS LEARNED

Some of the lessons learned include:

- Flexibility in programming and implementation to respond to emerging issue.
- The communication, progress update and monitoring should be continuous and regular.
- Strengthen risk management and mitigation measures to avoid disruption of planned activities.
- Put in place strong coordination structure with all UN participating entities involved for continuous information exchange, joint planning, Monitoring and reporting and mitigation measures, where appropriate. Remote exchange of information diminishes the value of collaboration leading to laissez-faire type of agreement with less accountability, contrary to the UN-delivering as one principle.
- Strengthen resource mobilization and dedicated resource allocation.
- Ensure high-level political leadership and buy-in of the programmes.
- Forge strategic partnership with key partners including INGOs.



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