



# Tigray Conflict Response Strategy

ADDRESSING AN UNFOLDING HUMANITARIAN CRISIS | APRIL 2021 - APRIL 2022





Cover: In Qu'ha, Mekelle, day laborers unload food at the CRS warehouse, where 50.16 MT of food has been distributed to support recently displaced people.

Photo by Terhas Clark/CRS

# 4.5 million

PEOPLE IN TIGRAY ARE IN NEED OF URGENT HUMANITARIAN ASSISTANCE

## CONTEXT

Since early November 2020, armed conflict between federal and regional forces in the Tigray region of northern Ethiopia has continued against a broader backdrop of political transition, severe droughts, desert locust invasions and the continued burden of the COVID-19 pandemic. It is estimated that, throughout the country, 23.5 million people need urgent humanitarian assistance. Some 4.5 million of these are in Tigray and 1.7 million are believed to be displaced, although an accurate figure is elusive as many areas are still inaccessible. Of Tigray's affected population, an estimated 48% are children and 15% are people living with disabilities, highlighting their vulnerability.

In Tigray, violence is rampant across the Central, North Western and South Eastern zones, with reports of house-to-house searches accompanied by indiscriminate, extrajudicial killing. There has been widespread vandalism and looting of civilian infrastructure, that has damaged or destroyed functioning water systems, and the equipment and spares needed to operate them.<sup>1</sup> Between mid-December 2020 and early March 2021, nearly 70% of health facilities had been looted and only 13% were functioning normally.<sup>2</sup>

**Water, sanitation and hygiene programs will provide lifesaving measures, reducing COVID-19 transmission, diarrheal and infectious diseases, and reducing acute malnutrition resulting from the lack of access to safe water, inadequate sanitation and poor hygiene.**



Crops have also been looted or burned, particularly in the Eastern and Central zones, and livestock production across Tigray has been devastated.<sup>2</sup> Reports of gender-based violence have risen exponentially, and there is a lack of adequate support and response mechanisms for those affected.

Catholic Relief Services is responding in Tigray by scaling up first-phase emergency assistance. Working with local partners, CRS is building capacity and supporting recovering markets, but additional investment is needed to support internally displaced people, and host communities and returnees in Tigray and neighboring Amhara regions.

1. [Ethiopia - Tigray Region Humanitarian Update, Situation Report](#), March 30, 2021, United Nations Office for the Coordination of Humanitarian Affairs.

2. [People left with few healthcare options in Tigray as facilities looted, destroyed](#), March 15, 2021, Médecins Sans Frontières.

## CRS' CAPACITY TO RESPOND

Over the last 60 years, CRS Ethiopia has established a prominent position among development and humanitarian stakeholders with a strong reputation for organizational, operational and multi-sectoral technical expertise. CRS maintains a broad geographic reach, improving *woreda*, *kebele*<sup>3</sup> and community-level accountability through its network of local partners. CRS is a leader in emergency programming through our flagship Joint Emergency Operation Plan, or JEOP, alongside other activities funded by USAID, UN agencies, foundations and private donors. CRS' development-focused programming includes the United States Agency for International Development's Bureau for Humanitarian Assistance food aid program, the Ethiopian Livelihoods and Resilience Program, and other programs including integrated watershed resources management and the Regreening Africa land restoration program that have allowed CRS to build strong relationships with key government, community and partner stakeholders in Tigray.

In December 2020, CRS was among the first actors to respond to needs on the ground of displaced people in Tigray and Amhara, with distributions of food rations, emergency shelter, and hygiene and essential living supplies. JEOP quickly scaled up the response, expanding the caseload in Tigray from 300,000 to 3.8 million people in partnership with USAID and the Government of Ethiopia. By April 20, JEOP had reached 1.7 million people.

3. *Woreda*, a district, and third-level administrative division. *Kebele*, a ward or neighborhood, and the smallest administrative division.

## COORDINATION, LOCALIZATION AND PARTNER LEADERSHIP

### Tigray zones covered by JEOP



Zewudu Gebremehin and her children fled their home town, walking 93 miles to safety. Photo by Terhas Clark/CRS

**“When troops came, I fled into the bush with my children. Me and my family walked 150km to Mekelle in the hope of finding safety. I do not have any other support except this [JEOP food] support.**

**Zewudu Gebremehin**  
Mother of three who fled her home town of Zalambessa, on Ethiopia's border with Eritrea

At the regional and national levels, CRS is active in coordination structures for water, sanitation and hygiene, or WASH; emergency shelter and nonfood items, or NFI; health and nutrition; humanitarian access; and logistics and protection. CRS also serves as the co-lead for the Global Food Security Cluster.

Nationally, CRS works in partnership with the Ethiopian Catholic Church Social and Development Commission. The commission has become one of the leading humanitarian response agencies in Tigray and works in close partnership with the Government of Ethiopia. CRS' key partner in Tigray for non-JEOP programming, Adigrat Diocese Catholic Secretariat, was founded in 1976 as part of the commission. The secretariat's mandate is to initiate, promote and coordinate the social and development ministries of the Universal Church in Ethiopia.

Under the JEOP, CRS is working with CARE, Food for the Hungry Ethiopia, World Vision, and the Relief Society of Tigray to scale up the response. As our efforts expand, CRS will include other partners based on operational and programmatic capabilities, and alignment with CRS' Tigray response strategy.

## CRS' RESPONSE FRAMEWORK

CRS' emergency response strategy reflects the findings of rapid assessments and CRS' contextual understanding of affected areas developed through past experience and ongoing assessments. At the core of CRS' response is the layering and leveraging of multi-sectoral programming, with food assistance from JEOP as the foundation for broader support.

On top of this wide-reaching food assistance, CRS overlays shelter and support for essential living supplies, WASH services, and health and nutrition services, with the integration of CRS' protection mainstreaming framework. To promote recovery, CRS supports restoration of community and household assets lost as a result of the conflict. Agricultural and alternative livelihood support, including cash-for-work opportunities, will be phased in to help people restore productive livelihoods and bolster local economies.

Acknowledging the ongoing insecurity and political instability, CRS will promote social cohesion and peacebuilding as the evolving situation allows, starting with a detailed analysis of the conflict and impact on vulnerable groups.

<b>Goal: Conflict-affected households live in safety and with dignity, with access to essential food, health, WASH and shelter, and with restored access to the assets and services needed to promote individual and community recovery</b>		
<b>SO1: Conflict-affected households meet their immediate basic needs and live in safety and with dignity</b>	<b>SO2: Conflict-affected households have restored access to healthy environments, essential infrastructure, assets and services to promote recovery</b>	<b>SO3: Conflict-affected populations benefit from improved well-being and strengthened social cohesion</b>
<b>IR 1.1:</b> Participant households have access to lifesaving emergency food	<b>IR 2.1:</b> Participant households have access to inputs to restore agricultural and alternative livelihoods	<b>IR 3.1:</b> Conflict-affected women, girls, boys and men demonstrate improved psychosocial well-being through increased access to psychosocial support programming <sup>4</sup>
<b>IR 1.1:</b> Participant households have access to safe and dignified emergency shelter and essential living supplies	<b>IR 2.1:</b> Participant households have access to safe, durable transitional shelter and repair damaged homes	<b>IR. 3.2:</b> Communities have mechanisms to prevent and peacefully de-escalate conflict
<b>IR 1.2:</b> Participant households have access to life-saving WASH services	<b>IR 2.2:</b> Damaged and looted water-supply infrastructure is rehabilitated, and services restored	<b>IR 3.3:</b> Social cohesion within conflict-affected communities is restored
<b>IR 1.3:</b> Participant households have access to basic health and nutrition services at the community level	<b>IR 2.3:</b> Health facilities are supported to restore access and resume regular and outreach health and nutrition services	

4. PSS programming is defined as a "binding" activity within the CRS 3Bs (binding, bonding and bridging) and 4Ds (discover, dream, design and deliver) peacebuilding and social cohesion model.

## PROGRAM ACTIVITIES

### Emergency food, cash assistance and recovery of livelihoods and assets

- JEOP is providing basic food rations of 15kg cereals, 1.5kg yellow split peas and 0.5 liters of vegetable oil per person per month to 3.8 million people in Tigray through April 2022.
- CRS will maintain flexibility to provide cash support to highly vulnerable households to mitigate the impact of further erosion of household assets and livelihoods, and accelerate the recovery of affected households and communities where markets are active and accessible. Cash support will include one-off payments in the wake of new displacement to cover short-term needs through a minimum expenditure basket including essential living supplies and food. Ongoing cash support programs for the most vulnerable households will cover a percentage of their monthly expenses. The basket will include provision for transport, milling of cereals provided in-kind, and the purchase of highly nutritious fresh foods to supplement the basic food rations from JEOP. CRS will continue to coordinate with the Ethiopia Cash Working Group on participant selection, duration of support and transfer values.



- Focusing on the March 2022 planting season,<sup>5</sup> agricultural inputs will be supplied through market-based approaches, where appropriate in the local context. Households will receive information in advance on the seed varieties, livestock and other inputs available, allowing them to plan ahead.

5. [Tigray Sub-national crop calendar: Tigray](#), AgriLinks, May/June 2020.

### Shelter and critical household items

- Where families have been displaced from their homes or lost critical supplies, CRS will provide emergency shelter and essential living supplies, including sleeping and kitchen items, in-kind or through cash, to meet basic needs in the wake of displacement. In the initial phase of the emergency response, CRS constructs accessible communal shelter blocks using corrugated-iron sheets and tarpaulins, partitioned for individual households and considerate of the specific needs of vulnerable groups, such as pregnant women, the elderly and people living with physical disabilities.
- Moving toward recovery, CRS provides housing rental subsidies and construction of transitional shelter, and supports repairs to damaged homes. Rental subsidies for highly vulnerable households will remove the economic burden of paying rent to prevent families from resorting to negative coping strategies. Where homes are damaged or destroyed, CRS provides locally appropriate transitional shelters and supports homeowners to make repairs enabling them to return. Technical support remains central to all shelter assistance options, promoting “build back better” approaches.

## PROGRAM ACTIVITIES

### Water, sanitation and hygiene

- WASH programs will provide lifesaving measures, reducing the transmission of COVID-19, diarrheal and infectious diseases, and reducing acute malnutrition resulting from the lack of access to safe water, inadequate sanitation, and poor hygiene practices.
- Water supply and sanitation activities will be integrated with emergency shelter programming to address the WASH needs of those in communal shelters, especially those with specific needs, such as pregnant women, the elderly and people living with physical disabilities.
- CRS will focus on provision of safe water through trucking, where no alternatives exist. CRS will then begin restoring damaged and looted water supply systems at the earliest opportunity. Public institutions, including health facilities and schools, will be prioritized for infrastructure rehabilitation.
- Provision of hygiene items and hygiene promotion will be core to all WASH activities and closely integrated with health and nutrition services. Community health promoters will be trained by local health staff and their outreach activities coordinated with mobile health and nutrition units to promote referrals and the uptake of services.



Protection mainstreaming and accountability to affected populations address the different needs of women and men, girls and boys, and people with specific needs.

*Photo by Terhas Clark/CRS*

**With COVID-19 cases continuing to rise in Ethiopia, CRS' health and hygiene programs will integrate distribution of soap and face masks together with community awareness raising to support COVID-19 mitigation and prevention.**



### Health and nutrition services

- In the initial phase of the emergency, CRS is supporting mobile health and nutrition teams to deliver critical interventions until regular services resume. Teams will also provide nutrition screening, wasting treatment, micronutrient supplementation, and infant and young child feeding counselling.
- The teams will include staff trained in basic gender-based violence case management and psychological first aid to provide referrals to specialist services for survivors. They will also act as information hubs and gateways to protection referral pathways for people with physical disabilities who require specialized services including provision of assistive devices.
- Moving toward recovery, CRS will equip and support health facilities damaged by the conflict to restore regular health and nutrition services such as screening, immunization, chronic health care and establishing programs for community-based management of acute malnutrition. Capacity building for government health staff will include supportive supervision, coordination and linkages within the national health system.
- With COVID-19 cases continuing to rise in Ethiopia, CRS' health and hygiene programs will integrate distribution of soap and face masks together with community awareness raising to support COVID-19 mitigation and prevention, together with support for COVID-19 vaccination campaigns.

## PROGRAM ACTIVITIES

### Social cohesion, peacebuilding and inclusion

- To support conflict mitigation, CRS will focus on capacity strengthening for key local actors, and establish and strengthen community-level peace structures.
- CRS supports a series of community-level trainings through the internal “binding, bonding and bridging,” or 3Bs, social cohesion model. Binding encourages internal reflection and personal transformation within the safety net of referral pathways to psychosocial support, bonding activities strengthen relations within identity groups through dialogue and collaboration, while bridging activities bring together different identity groups to promote mutual understanding and trust.
- CRS and partner staff will receive training in foundational psychosocial support knowledge and skills, as well as protection issues identified in risk analyses or raised through the 3Bs activities, with utmost attention toward “do no harm” principles.
- Throughout its response, CRS will identify and reinforce positive, constructive and skills-building roles for young people aged 15 to 35. Actively engaging young people as resources in emergency response and recovery activities will help improve intergenerational communication.

- Programs will include conflict analysis, social “connector” projects, and civic education and participation. Youth training will be integrated within the connector projects, which bring communities together to help build community infrastructure, such as water points. The Community Conversations methodology—in which facilitated conversations can identify, prioritize and address community issues—will also be used to increase awareness of youth, women and other populations with specific needs, and to improve social cohesion across ethnic groups.

### Cross-cutting programming approaches

- **Mainstreaming a conflict-sensitive psychosocial approach supports the improved well-being of those who were displaced and exposed to violence:** CRS is training all response staff, partners and key stakeholders in psychological first aid and protection from sexual exploitation and abuse, or PSEA. CRS is also mapping referral pathways for protection services, mental health and psychosocial support, to share information on available services.

**Market-based responses support overall livelihood and market recovery, and allow participants to make choices based on their family’s needs.**



- **Protection mainstreaming and accountability to affected populations address the different needs of women and men, girls and boys, and people with specific needs:** Protection risks analysis, together with gender and inclusion assessments, are mainstreamed across the response, with analyses taking place at start-up, and mitigation measures integrated into programming and monitoring. The specific needs of highly vulnerable groups, including pregnant and lactating women, the elderly and people living with physical disabilities, will be determined through consultation to inform design of infrastructure and services, and to promote accessibility.
- **Market-based responses support overall livelihood and market recovery:** CRS prioritizes engagement with local markets and the use of cash assistance and value-based commodity vouchers where markets are functional and accessible. Market-based responses allow participants to make choices based on their family’s needs. Market price monitoring and assessments along with market early warning and surveillance systems through the JEOP will be used by the overall response to monitor impacts on local markets and inform programming decisions.