It has been more than one year since the start of the conflict between the Ethiopian National Defense Force (ENDF) and the Tigray People’s Liberation Front (TPLF). The security situation in northern Ethiopia continues to deteriorate. Since the withdrawal of the ENDF from Tigray in June 2021, the conflict has expanded to seven zones in the Amhara region (North Gondar, South Gondar, Wag Hemra, North Wollo, South Wollo, North Shewa and Oromia special zone) and two zones in Afar (Zone 1 and Zone 4). Recently, the conflict spread even further, to Central Gondar, Bahir Dar, Gondar City and West Gondar zones. As of December 16, ENDF had taken control of Chifra in Afar, as well as Dessie and other towns in South Wollo.

Most recently, there has been an influx of an estimated 145,000 internally displaced persons (IDPs) from Dessie and from other locations in South Wollo toward Debre Berhan, the capital of the North Shewa Zone. These numbers are increasing every day and we are continuing to monitor movement in to other zones. The IDP needs are acute, with lifesaving health, nutrition and WASH interventions required. So far, the security situation in Debre Berhan is stable but unpredictable.

This expansion of fighting has displaced an additional estimated 2.2 million IDPs in Amhara and 376,500 IDPs in Afar. It has rendered 1,436 health facilities nonfunctional in the Amhara and Afar regions, including 271 health centers, 1,146 health posts and 23 hospitals. Out of the affected health facilities, 163 health centers, 642 health posts and 14 hospitals have been destroyed and looted of equipment and supplies. With the recent increase in violence, we can expect this number to increase.

The emergency response effort in Tigray continues to be hampered by the disruption and suspension of electricity, telephone and internet networks, and banking services, as well as fuel shortages and logistical challenges in transporting critical supplies, including essential drugs. As a result, medical supplies are in extremely short supply in Tigray.

**International Medical Corps Response**

International Medical Corps is providing vital nutrition, health, gender-based violence (GBV), mental health and psychosocial support (MHPSS), and water, sanitation and hygiene (WASH) services to IDPs in the Afar, Amhara and Tigray regions. International Medical Corps operates 23 mobile medical units (MMUs) in the regions, with nine in Tigray/Shire, 11 in Amhara and three in Afar. Our programs are operating in areas that contain 590,000 people located across 39 IDP sites. In the past two weeks, we have provided 11,854 outpatient consultations, screened 5,446 people and served 1,125 MHPSS clients. The MMUs provide a range of services, including outpatient consultations, nutrition screenings, perinatal consultations, family planning services and health education.
The recent escalation in the conflict has meant that International Medical Corps has had to constantly move its MMUs to ensure the safety of the teams and the IDPs. Accordingly, we have paused our medical team activities in Dessie, in the Amhara region. Some of those team members redeployed to Debre Berhan, located 130 kilometers from Addis, to launch two MMUs to serve an influx of IDPs. All other teams remain operational in Amhara and Tigray.

The withdrawal of some humanitarian organizations from Shire has created huge gaps in healthcare delivery. International Medical Corps continues providing emergency healthcare services in one of the biggest camps, Embadanso, with 140,000 IDPs. Host communities are also accessing our services due to a lack of healthcare in the region. This has created an additional burden on our teams and our stocks.

Since the beginning of our response, International Medical Corps MMUs have provided 183,474 outpatient consultations, with 107,226 in Shire, Tigray; 59,627 in Dansha (in Wolkait, Tsegede and Kafta Humera); 13,234 in Amhara; and 3,387 in Afar. We have begun providing services in Chifra (in the Afar region) over the last five days.

Our MMUs have screened 117,159 children under 5 and pregnant and lactating women (PLWs) for malnutrition. Of the children and PLWs screened, 47,476 were in Tigray, 54,628 were in Dansha, 9,519 were in Amhara and 5,536 were in Afar. The proxy prevalence of moderate acute malnutrition for children under 5 and PLWs is 10.2% and 29.3%, respectively, while the prevalence of severe acute malnutrition is 2.6%. Over the past two weeks, International Medical Corps' emergency response teams in Afar/Semera, Gondar and Shire provided 11,854 consultations and screened 5,446 children under 5 and PLWs for malnutrition.

International Medical Corps also has been providing WASH services in Axum, Shiraro and Shire woredas. In the past two weeks, we reached more than 10,200 people through hygiene promotion, covering such topics as handwashing, proper use of latrines, safe household-water handling and COVID-19 prevention. International Medical Corps teams also are delivering clean water via trucks daily, providing 614 cubic meters in the last two weeks. The total amount of water delivered to date is 11,046 cubic meters. Since the beginning of our intervention, we have reached 108,189 people with WASH activities.

In response to the region's lack of supplies and logistical hurdles, International Medical Corps' logistics team is working closely with the UN Logistics Cluster. Through these collaborations, the team has successfully delivered 80 metric tons of WASH supplies. To maintain medical services despite these supply-chain constraints, International Medical Corps is exploring options to procure drugs from the Ethiopian Pharmaceutical Supply Agency and other quality-assured local vendors. In the meantime, the Regional Health Bureau has contributed medicines and Suhul Hospital has provided pediatric formulations for use by the Stabilization Center at Sheraro, supported by International Medical Corps.