Following poor performing spring rains, the number of people receiving humanitarian assistance has increased from 5.6 million to 7.8 million in the first quarter of the year and is expected to heighten further in the second half of the year. The joint Government and humanitarian partners’ seasonal *belg* assessment is completed and reports are being consolidated. The Mid-Year-Review of the 2017 Humanitarian Requirements Document that will inform the actual humanitarian needs is expected to be launched in late July. Increased funding is needed urgently, in particular to address immediate requirements for food and nutrition, as well as clean drinking water, much of which is being delivered long distances by truck as regular wells have dried up.

### Church leaders to work with Health Bureau in the fight against AWD in Amhara region

On 21 June 2017, the Amhara Regional Health Bureau (ARHB) in collaboration with the World Health Organization and other partners organized a consultative meeting between leaders of the Health Bureau and the Orthodox Church in Bahir Dar. This meeting brought together high officials of ARHB, the Bishops of East and West Gojam Orthodox Church and members of the “Sinodos,” including leaders from six monasteries where Acute Watery Diarrhea (AWD) cases have been reported and discussed AWD contamination risks at Holy Water sites. The scale of contamination at these sites is very high particularly during such major pilgrimage seasons.

Positive lessons and experiences were shared from leaders of Wonkshet Gabriel and Andassa Monasteries where AWD prevention measures are implemented and promoted. These include, among others, health education on AWD prevention, construction of latrines for pilgrims visiting Holy Water Sites (Andassa constructed 48 latrines), establishing sanitation committees and the mobilization of host communities in support of churches’ AWD prevention activities. The ARHB recommended that leaders of the churches support health information and education so that church congregation and pilgrims reduce AWD risks. The Health Bureau reiterated its commitment to mobilize relevant government sectors to improve the churches’ access to safe water and to lead and coordinate AWD response.

### The Kingdom of Saudi Arabia extends the amnesty for irregular migrants by one month

The 90-day amnesty period during which irregular migrants were given the chance to leave the Kingdom of Saudi Arabia (KSA) voluntarily, ended on 27 June. Following extensive negotiation and lobby by the Ethiopian government, KSA extended the amnesty period by one month, setting a new deadline for 27 July. The decision was made to allow irregular migrants who did not take advantage of the amnesty period for various reasons, to leave the country.

A statement from the Ethiopian government said that the 90-day amnesty period was not enough given the vast number of Ethiopians willing to return and the inability of currently available flights to accommodate all ready-to-travel passengers before the deadline. The Minister of Government Communication Affairs Office, Dr. Negeri Lencho said that there was a slow uptake during the amnesty period because some people were hopeful that the Saudi authorities would not take action during the just ended period of Ramadan. So far, from an estimated 500,000 Ethiopians who reside in Saudi Arabia, the Ethiopian Embassy in KSA has issued travel documents to more than 110,000 irregular migrants of whom 45,000 have arrived.

### Government and partners to distribute 3,000 ES/NFI kits in Somali region

UNICEF plans to distribute Emergency Shelter and Non-Food Items (ES/NFI) kits to 3,000 households in five zones of Somali region through the Ethiopian Red Cross Society (ERCS). Beneficiaries are drawn from Barey (567), Dollo Bay (450) and Charati (550) woredas of Afder zone, Karsadula (885) *woreda* of Liben zone and Hudet (548) *woreda* of Dawa zone. In addition, the Regional Disaster Prevention and preparedness Bureau reported it has a stock of 6,000 partial NFI kits to be prioritized through the cluster, based on severity of needs.

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