



NATIONAL PUBLIC HEALTH EMERGENCY OPERATION CENTER (PHEOC), ETHIOPIA

COVID-19 PANDEMIC PREPAREDNESS AND RESPONSE IN ETHIOPIA

WEEKLY BULLETIN

WHO Epi-Week-44 (October 26 - November 01, 2020)

BULLETIN No: 27

Issue Date: November 02, 2020

I. HIGHLIGHTS

- A total of 42,728 laboratory samples were tested in the WHO-Epi-Week-44, which is a 9.46% decrease compared to that of the WHO-Epi-Week-43. The total lab test so far is 1,487,270.
- The laboratory test positivity rate for the WHO-Epi-Week-44 is 7.6%, which is lower than the preceding week (8.91%).
- A total of 3,240 new confirmed COVID-19 cases and 52 COVID-19 related deaths were reported during the WHO Epi-Week-44 bringing the total cases and death to 96,583 and 1,478 respectively.
- There were total of 5,909 newly recovered COVID-19 cases during the WHO Epi-Week-44, bringing the total number of recovered cases to 53,452.
- A total of 27,043 COVID-19 confirmed cases have been on Home Based Isolation and Care so far.
- A total of 6,662 contacts were identified during the WHO Epi-week-44.
- EPHI conducted a workshop on 2013 EFY quarterly performance and future plans, in which COVID-19 response was addressed.



Workshop on 2013 quarterly performance and future plans, October 30, 2020, Bishoftu, Ethiopia

II. BACKGROUND

The Ministry of Health (MOH) and Ethiopian Public Health Institute (EPHI) in collaboration with partners have intensified response efforts to prevent the spread and severity of Corona Virus Disease 2019 (COVID-19) in Ethiopia. The national and the regional Public Health Emergency Operations Center (PHEOC) has been activated and laboratory diagnosis capacity has been expanded to other national institutions, subnational and private laboratories.

The national and regional PHEOC are playing a pivotal role in coordinating resources from different responding agencies and coordinating COVID-19 related information through regular EOC meetings and partners' coordination forums. The MOH and EPHI are providing information to the public and stakeholders on a regular and uninterrupted manner using different means of communication modalities.

The WHO and other partners are currently supporting in scaling-up preparedness and response efforts and implementation of related recommendations suggested by the IHR Emergency Committee.

III. EPIDEMIOLOGICAL SITUATION

Global Situation

- Between December 31, 2019 and November 01, 2020, COVID-19 pandemic affected 235 countries/territories causing 45,973,500 cases and 1,193,904 deaths (CFR=2.60%) globally.
- Of the total cases and deaths reported since the beginning of the outbreak, 3,430,890 cases and 45,381 deaths were reported during the WHO Epi-Week-44.
- The United States of America (USA) reported the highest number of cases (8,952,086) with CFR of 2.56% followed by India (8,184,082 cases) with a CFR of 1.49%.
- In Africa, 57 countries/territories have reported COVID-19 cases.
- As of November 01, 2020, a total of 1,795,873 cases and 42,964 deaths were reported across the continent (CFR=2.39%). Of these 76,716 cases and 1,742 deaths were reported during the WHO-Epi-Week-44.
- In Africa, South Africa reported the highest number of cases (725,452) with CFR of 2.66% followed by Morocco (219,084 cases) with a CFR of 1.69%.
- Ethiopia reported the highest number of COVID-19 confirmed cases in East Africa. See the summary dashboard below.

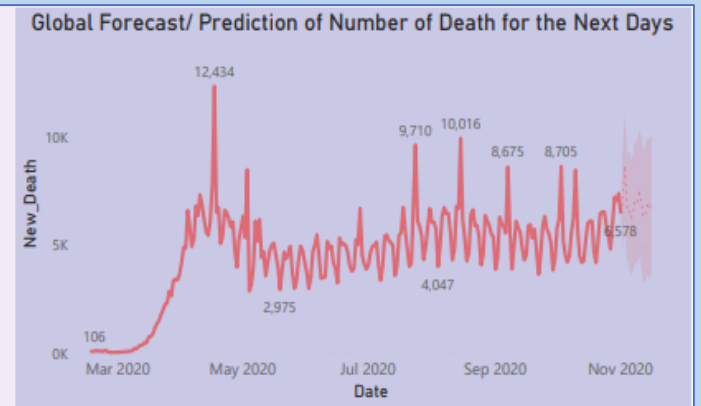
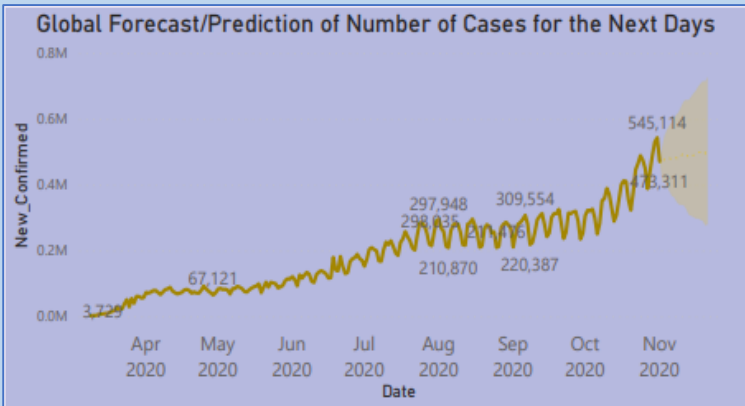
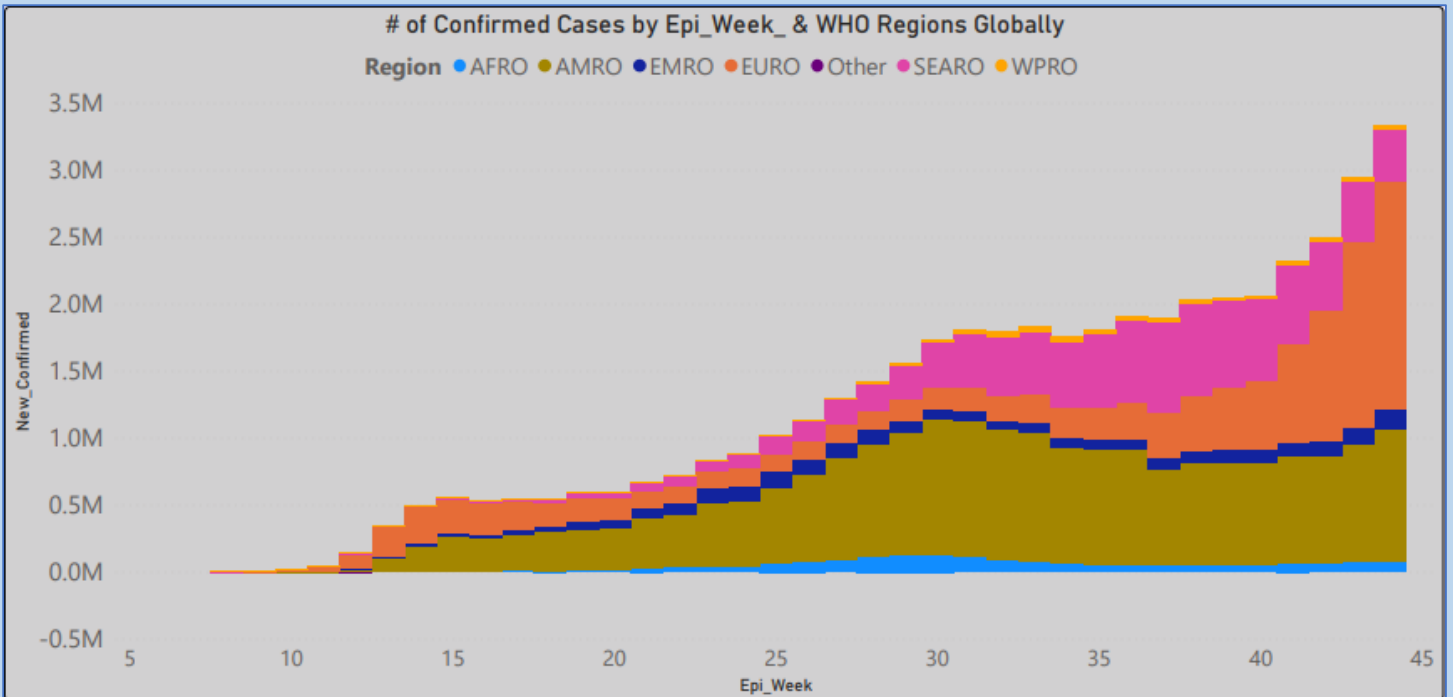
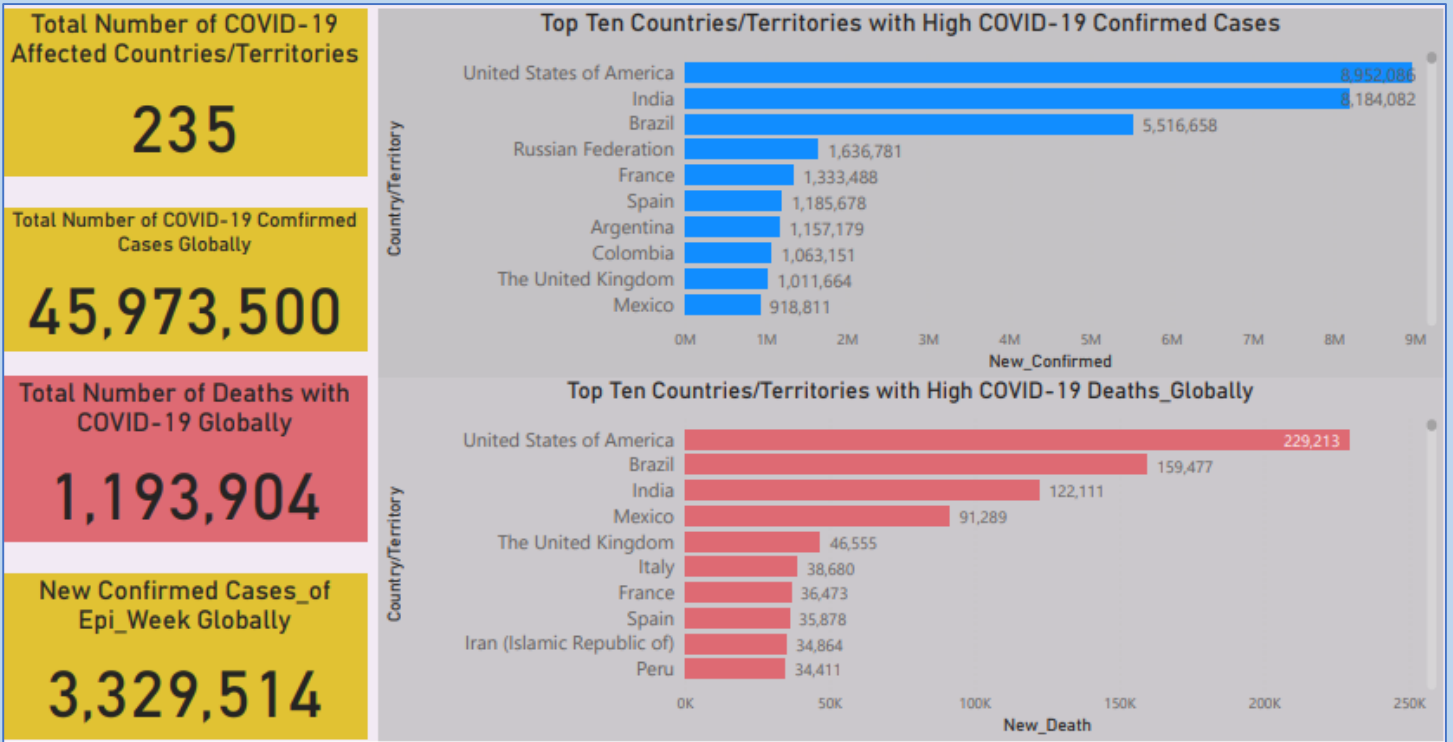


Fig. 1: COVID-19 Global Situation Update as of November 01, 2020 (Source: WHO)

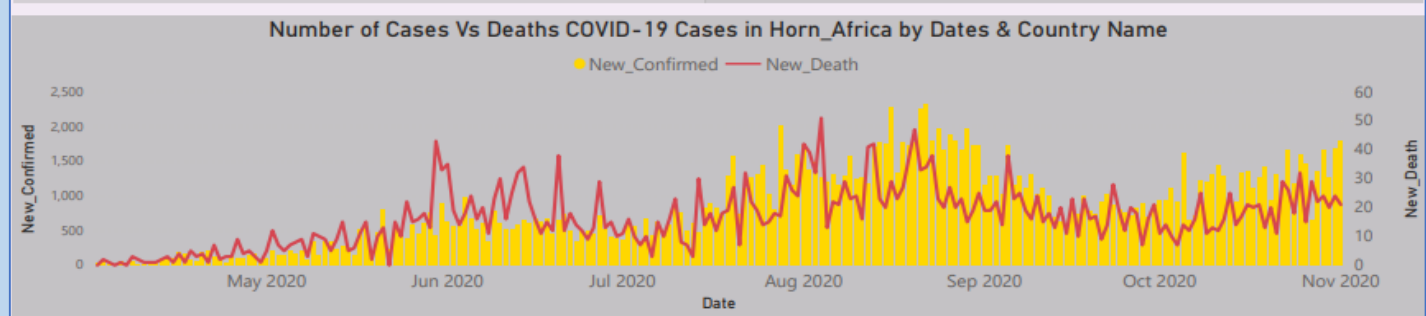
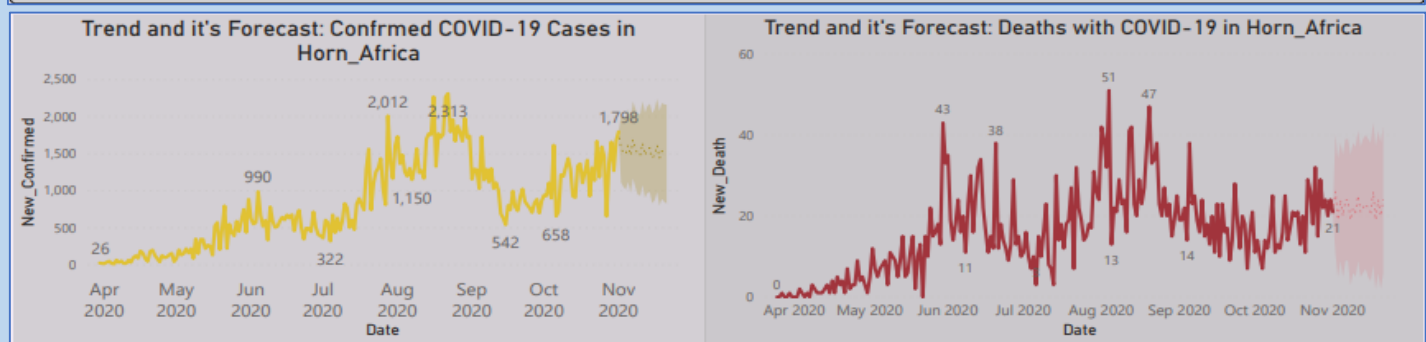
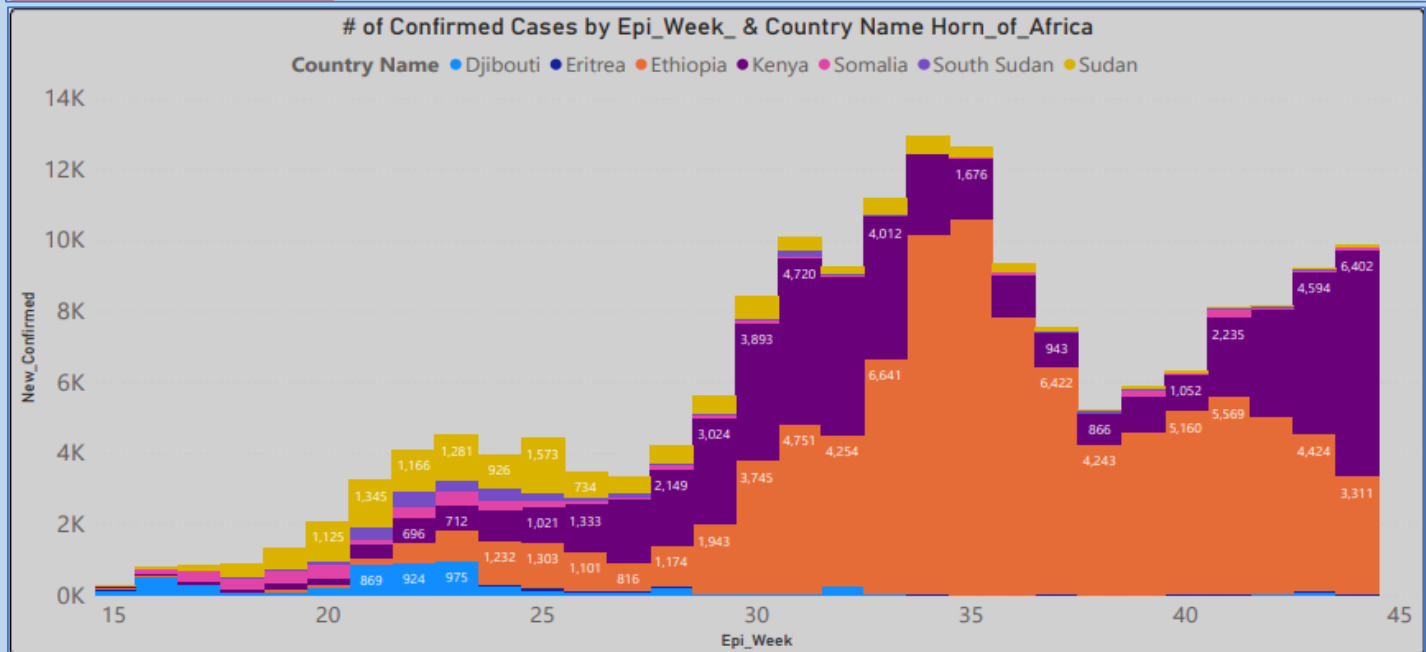
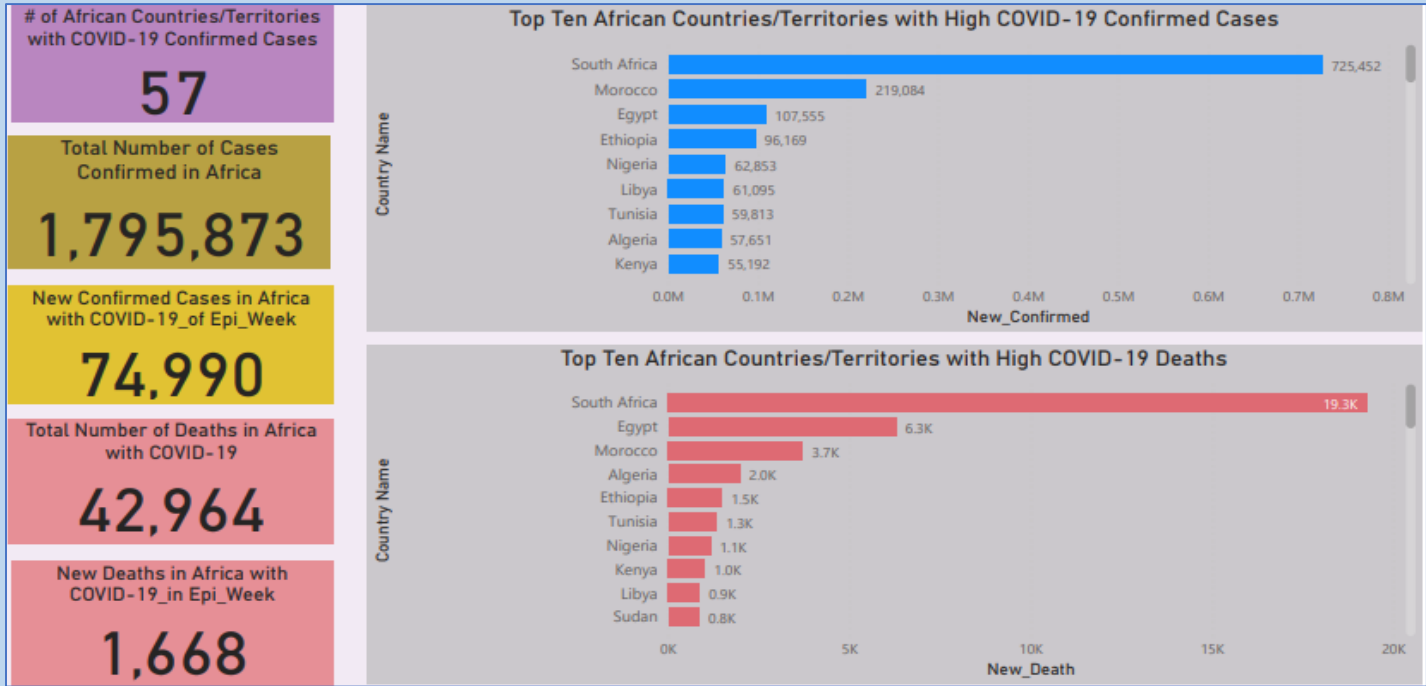


Fig. 2: COVID-19 Situation Update in Africa as of November 01, 2020 (Source: WHO)

National COVID-19 situation

- Three-thousand-two-hundred-forty (3,240) newly confirmed COVID-19 cases (23% decrease compared to that of Epi-Week-43) and 52 COVID-19 related deaths (30% decrease compared to that of Epi-Week-43) were reported during the WHO Epi-Week-44.
- As of November 01, a total of 96,583 confirmed COVID-19 cases and 1,478 deaths were recorded in the country.
- For detail, see the summary dashboard below.

Table 1: Summary of National COVID-19 situation in the WHO-Epi-Week-44

Regions	New_Tested	New_Case	New_HF_Admission	New Death	Positivity Rate	Recovery Rate
Addis Ababa	20355	1586	259	21	8.0	32.6
SNNPR	6251	133	149	3	2.1	89.7
Oromia	4249	657	229	14	15.7	22.4
Tigray	3432	115	70	1	3.4	75.0
Amhara	2151	233	123	5	10.6	52.0
Somali	2000	37	2	0	2.1	30.3
Afar	1329	77	0	0	5.7	47.6
Sidama	1068	199	96	6	19.4	76.4
Dire Dawa	765	73	20	0	8.7	35.0
Benshangul	573	89	4	0	16.0	27.8
Harari	247	16	12	2	8.4	29.0
Gambella	188	1	1	0	0.1	60.3
Benishangul G	120	24	3	0	19.5	28.0
Total	42728	3240	968	52	8.5	48.2

**** Positivity & Recovery Rates are Weighted Averages of Regional Distributions of Rates

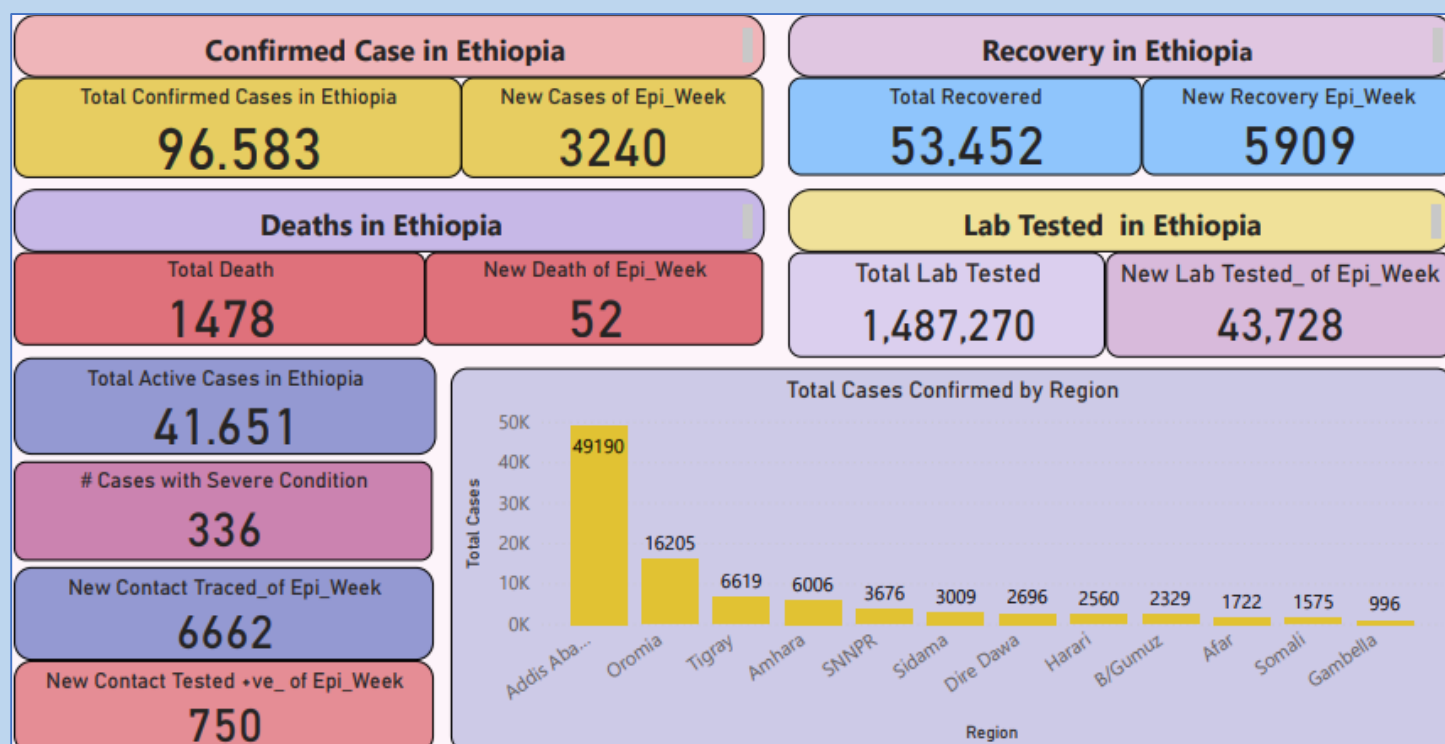


Fig. 3: Weekly summary of the COVID-19 situation in Ethiopia as of November 01, 2020, Ethiopia

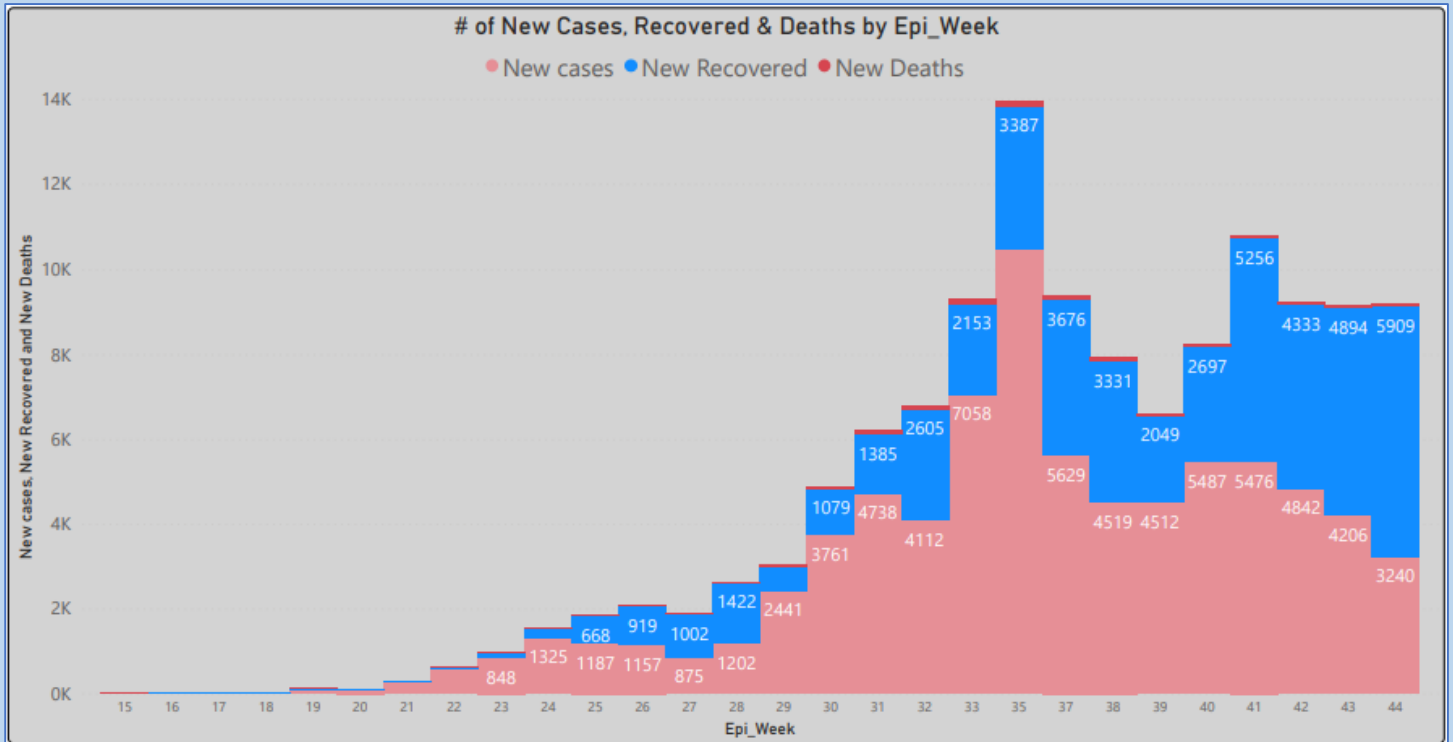


Fig. 4: COVID-19 confirmed cases, recovery and death by WHO Epi-Week as of November 01, 2020, Ethiopia

Epi-Surveillance and Laboratory Related Activities

There is ongoing travelers' health screening at point of entries (POEs), follow-up of international travelers, mandatory quarantine of passengers coming to Ethiopia, rumor collection, verification, investigation and information provision via toll free call center, active case detection by house to house search, contact listing, tracing and follow-up of persons who had contact with confirmed cases. There is also laboratory investigation of suspected cases, quarantined individuals, contacts of confirmed cases, SARI/pneumonia cases and community members.

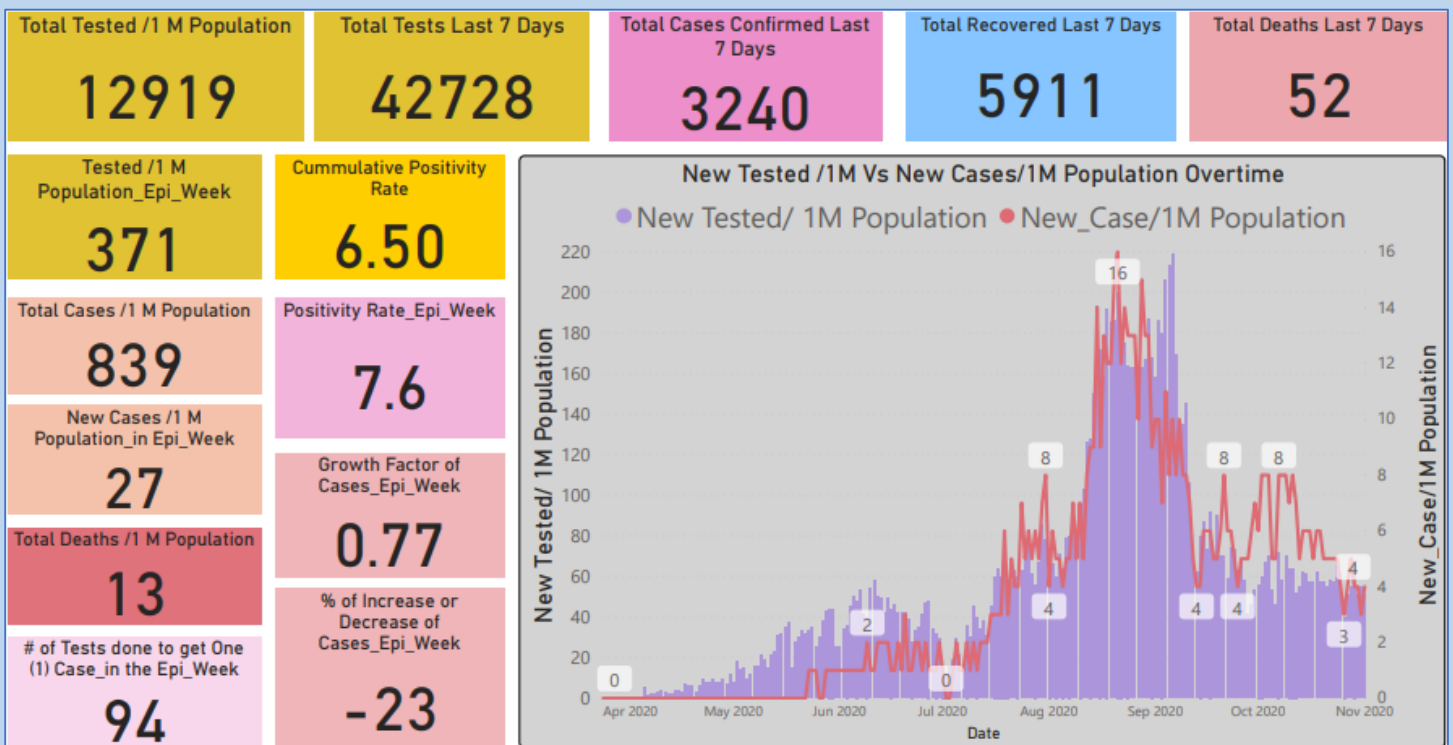


Fig. 5: Summary of COVID-19 confirmed cases in Ethiopia as of November 01, 2020.

Contact tracing and follow-up:

- As of November 01, 2020:
 - A total of 294,015 contacts of confirmed cases have been identified. Of these, 6,662 contacts were identified in the WHO-Epi-Week-44.
 - Of total contacts, 266,594 (90.67%) have completed 14 days follow-up, while 5,227 contacts are still on follow-up.
 - 4,814 (1.64%) contacts have developed COVID-19 suggestive symptoms. Of these symptomatic contacts, 396 (8.23%) have tested positive.
- Overall, 22,160 (7.54%) of the contacts (symptomatic plus asymptomatic) have tested positive.
- Contacts of the confirmed cases contributed for the 22.94% of the total cases.

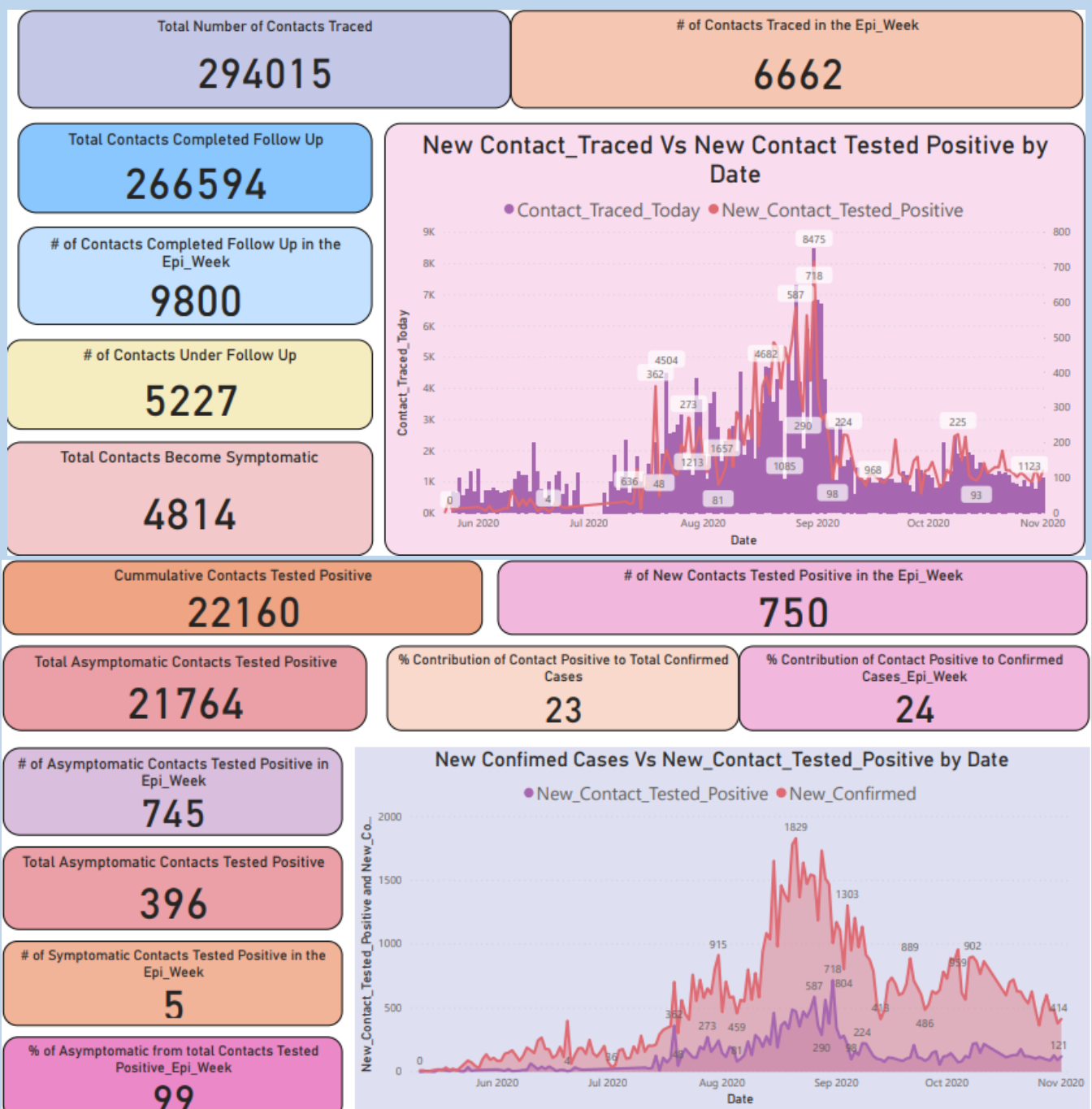


Fig. 6: Summary of COVID-19 contact tracing as of November 01, 2020, Ethiopia.

Rumors collection and verification from all sources

- As of November 01, 2020:
 - 306,268 rumors/alerts have been received and investigated. Of these, 4,266 rumors were reported in the WHO-Epi-Week-44.
 - 237,141 (77.43%) of the rumors/alerts have fulfilled the suspected case definition.

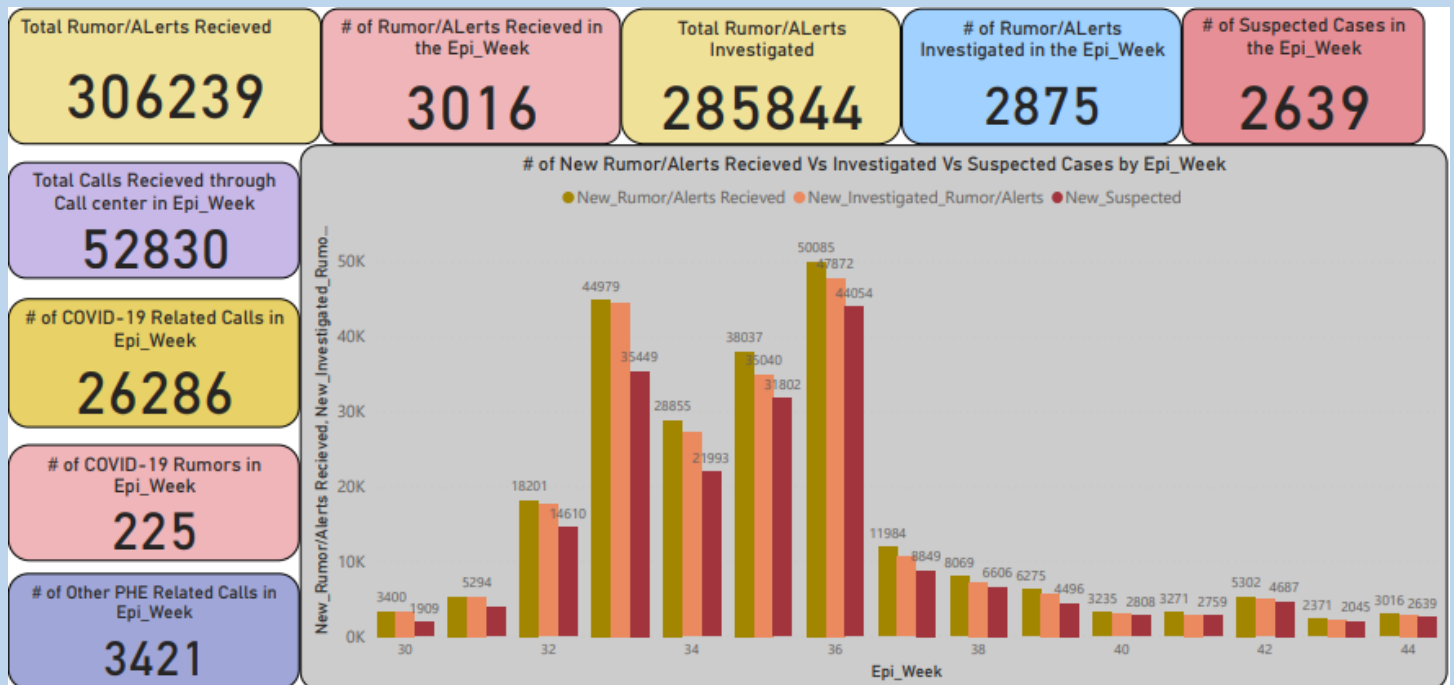


Fig. 7: Summary of COVID-19 rumor/alert investigation as of November 01, 2020, Ethiopia.

Point of entry and Quarantine related activities

- Since the start of the outbreak, 1,287,726 passengers have been screened at the Point of Entries of Ethiopia and 487,489 (37.97%) of them were screened at Bole International Airport.
- Of the total passengers screened, 31,887 were screened for COVID-19 in the Epi-Week-44.
- Based on Directive 30/2020 there is no Institutional Quarantine at the national level because all international passengers who pass through the point of entries should bring negative valid RT-PCR test result.
- The total number of population quarantined since March 23 to October 3, 2020 was 69,383.

Laboratory related activities

- As of November 01, 2020, a total of 1,487,270 samples have been tested for COVID-19 by laboratories across the country.
- 42,728 laboratory tests were processed during the WHO Epi-Week-44, which is a 9.46% decrease compared to that of Epi-Week-43.
- The laboratory test positivity rate for the WHO-Epi-Week-43 is 7.6%, which is lower than the preceding week, which was 8.91%.
- The overall positivity rate for the laboratory test since the occurrence of the disease in the country is 6.5%.

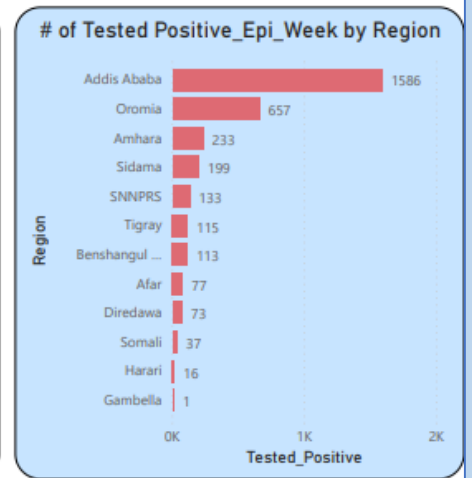
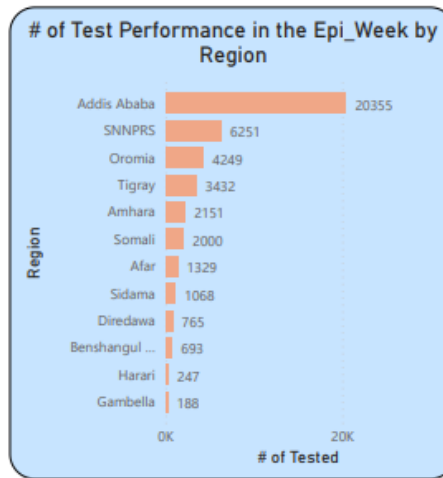
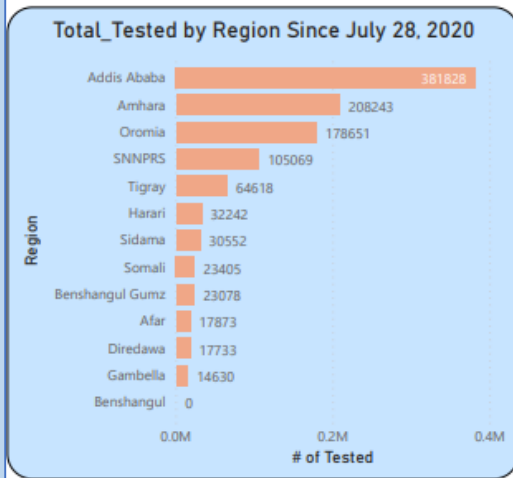
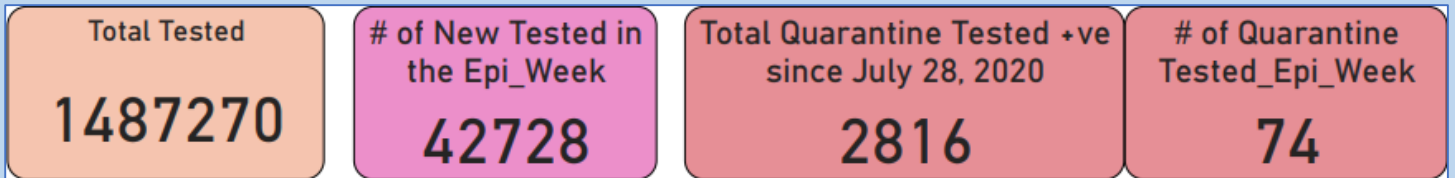
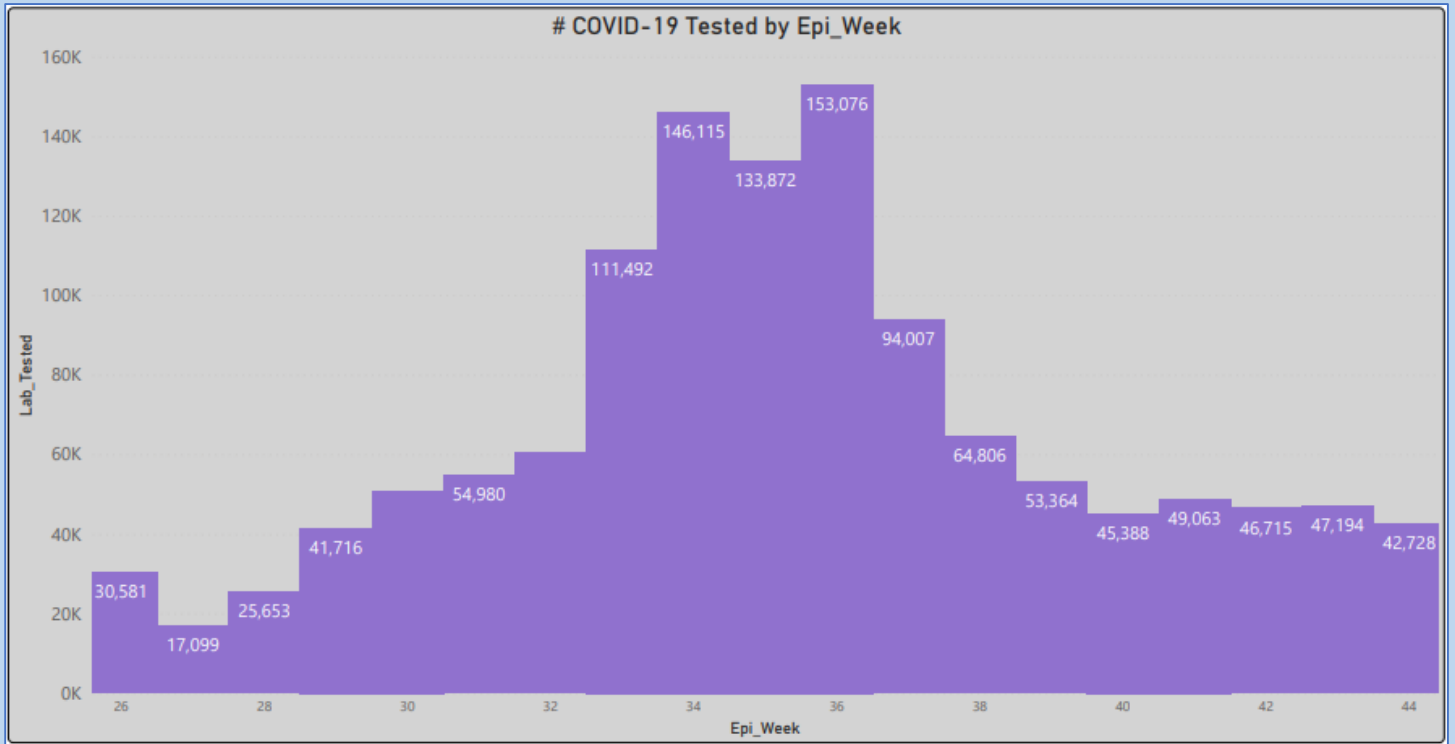


Fig. 8: Summary of COVID-19 laboratory testing as of November 01, 2020, Ethiopia.

IV. Coordination and Leadership

- The national PHEOC is collaboratively working with stakeholders: government agencies, partner organizations, UN agencies, embassies, hospitals, Industrial parks and others.
- Morning briefing of IMS is being conducted every day by core IMS staffs and key partners' representatives.
- Biweekly virtual (zoom) meeting is being conducted with technical working group members, which comprises members from subnational level focal, key partners and stakeholders.

- Weekly leadership and strategic virtual meeting, chaired by the H.E MOH Minister, is being conducted to oversee and guide the response efforts.
- A three days' workshop is conducted on 2013 Ethiopian Fiscal Year quarterly performance and future plans. The Ethiopian Public Health Institute's Planning, Monitoring and Evaluation Directorate held the three-day consultation with officials of regional public health institutes in Bishoftu town on quarterly performance and linking plans for the next nine months. Dr. Ebba Abate, Director General of the Ethiopian Institute highlighted the challenges posed by the COVID-19 pandemic and that the event was also an opportunity to gain experience and build capacity at national level. He also thanked all those who have made significant contributions to the prevention and control of the pandemic and called upon them to mobilize their efforts and work harder for further victory.

V. Case Management and IPC

- As of November 01, 2020:
 - A total of 23,262 suspected COVID-19 cases are admitted to isolation centers. Of these, 307 suspected cases are admitted in the Epi-Week-44.
 - 20,448 (169 in the Epi-week-44) initially suspected cases are discharged after laboratory test became negative.
- Among the currently existing COVID-19 cases, there are 336 patients in severe clinical condition.

Home Based Isolation and Care (HBIC):

- So far, 27,043 COVID-19 confirmed cases have been on HBIC. Of them 20,388 (75.39%), have recovered and 5 died.
- Of these, 1,308 cases have been enrolled to HBIC and 1,193 cases have recovered on the WHO-Epi-Week-44.
- As of November 01, 2020, there are 6,536 cases on HBIC.
- So far, 134 of the cases have been transferred from treatment centers to HBIC after improvement.
- So far, 248 (15 of them in Epi-Week-44) of the cases have been transferred from HBIC to treatment centers for better care.

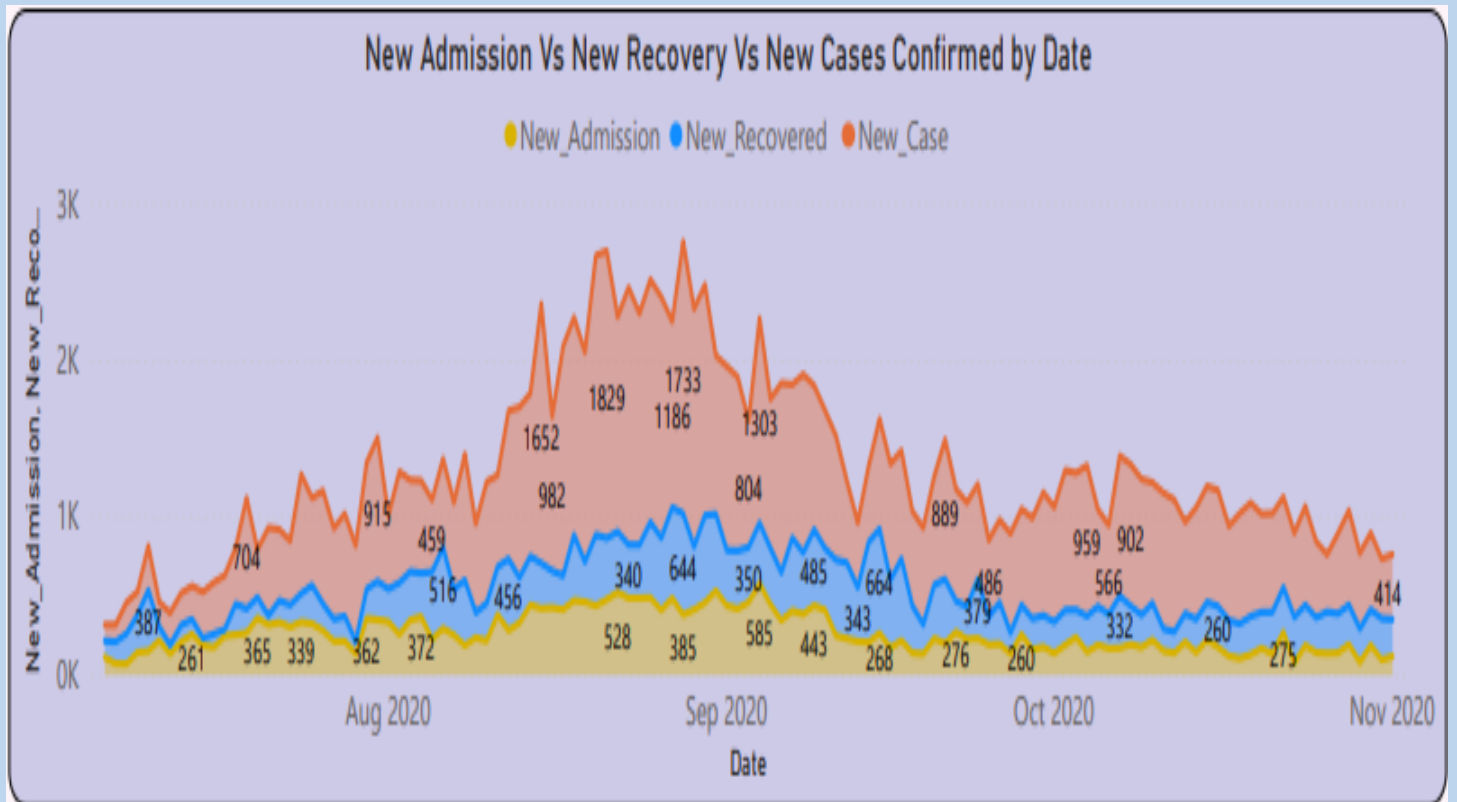


Fig. 9: Trends of New confirmed cases, admission and recoveries as of November 01, 2020.

VI. WASH and IPC:

- Communication with and follow up of each regions by assigned staff from the national Emergency Operations Center regarding WASH and IPC activities.
- Communication with regions on Monitoring of IPC practice in Non-COVID health care facilities, regular phone follow-up and support, compiling reports.
- Facilitation of disinfection whenever there is positive confirmed case and sending disinfectant based on need.

VII. Risk Communication and Community Engagement (RCCE)

- Daily press statement is being given on COVID-19 situation on daily basis through Mass Media.
- Consultative meeting conducted on a proposal for community perception on COVID-19 survey.



Fig. 10: Consultative meeting on proposal for community perception on COVID-19 survey, October 31, 2020, Addis Ababa, Ethiopia

- Religious leaders and health care providers' message on COVID-19 broadcasted based on visit conducted in Amhara region and Jimma zone.



Fig. 11: Message on COVID-19 from religious leaders and health care providers via mass media, October 30, 2020

- COVID-19 Risk Communication and Community Engagement (RCCE) related supportive supervision conducted at Gambella region.



Fig. 23: COVID-19 RCCE supportive supervision, October 29, 2020, Gambella, Ethiopia

- RCCE six months strategy development consultative workshop conducted from October 26 to 28, 2020 at Bishoftu.



Fig. 13: RCCE six months strategy development consultative workshop, October 26-28, 2020, Bishoftu, Ethiopia

- COVID-19 related key messages shared on social media.



VIII. Logistic and Supplies

- There is ongoing distribution of PPE, Viral Transport Media (VTM), swabs, pharmaceuticals and other medical supplies to quarantine, isolation and treatment centers.

Training and Orientation Activities

- There is ongoing training and orientation for the public and health professionals on COVID-19.
- Orientation on COVID-19 prevention and control provided for militaries in South Omo zone.



Fig. 14: Orientation on COVID-19 prevention and control for militaries in South Omo Zone, October 26, 2020

- Three days Risk communication and community engagement Campaign Strategy for COVID-19 Outbreak Response workshop for 20 professionals from different organizations provided at Bishoftu town.



Fig. 15: COVID-19 Risk Communication and Community Engagement training for health professionals, October 26-28, 2020, Bishoftu, Ethiopia

- Three days comprehensive COVID-19 training for 50 health professionals working in confined setting from Oromia regional health bureau is completed at Bishoftu town.



Fig. 16: Comprehensive COVID-19 training for health professionals, Oct. 30 – Nov. 1, 2020, Bishoftu, Ethiopia.

- Orientation provided on the new directive for Ministry of Peace, National Disaster and Risk Management Commission, Agency for Refugee and Returnee Affairs for 17 professionals from different organization.



Fig. 17: Orientation on the COVID-19 new directive, October 30, 2020, EPHI.

IX. Challenges and Way Forward

Challenges

- Weak compliance among the public to the non-pharmaceutical intervention such as physical distancing and facemask use which exacerbates the spread of COVID-19.
- Increasing number of COVID-19 cases in congregated settings.
- Increasing number of cases being detected in the community.
- Low stock status of personal protective equipment is still a problem.

Way Forward

- Advocate and strengthen Home Based Isolation and Care (HBIC).
- Conduct targeted testing of high-risk population group and contacts of confirmed cases for COVID-19.
- Enhance technical support, coordination and timely and accurate information sharing at all levels.
- Strengthened collaboration and coordination with key stakeholders and partners.
- Intensify risk communication and community engagement activities.
- Enhance active surveillance for COVID-19 such as house-to-house case search and detection in the community.
- Intensification of a capacity building trainings and orientation including through virtual/online platforms.
- Strengthen and sustain essential health services other than COVID-19.

X. Public Health Policy Recommendation

Advice for the Public:

- For any individual confirmed to have COVID-19 and who is candidate for Home Based Isolation and Care:
 - Properly isolate from other family members.
 - Take full responsibility in prevention of transmission
 - Strictly adhere to the National Directive of Home-Based Isolation& Care.
 - Provide reliable information during regular follow up either by phone or home visit.
 - Report to nearest health facilities/follow up team in case of any emergency, appearance of new symptoms or worsening of existing symptoms.
- It is important to be informed of the situation and act appropriately to protect yourself and your family.
 - Wash hands frequently
 - Don't touch your mouth, nose or eye by unwashed hands
 - Keep physical distancing; avoid mass gathering and shaking hands.
- For most people, COVID-19 infection will cause mild illness however, it can make some people very ill and, in some people, it can be fatal.
- Older people, and those with pre-existing medical conditions (such as cardiovascular disease, chronic respiratory disease or diabetes) are at risk for severe disease.
- If anybody had contact with a COVID-19 confirmed patient, he/she should call 8335 or 952 or report to regional toll-free lines or to the nearby health facilities.

National/Regional official websites, social media pages and toll-free hotline for COVID-19 information

MOH/EPHI/Region	Facebook page	Toll-free hotline
Ethiopian Public Health Institute Main Website	https://www.ephi.gov.et/	8335/952
Ethiopian Public Health Institute COVID-19 Website	https://covid19.ephi.gov.et/	
Ethiopian Public Health Institute Facebook Page	https://www.facebook.com/ephipage/	
Ethiopian Public Health Institute Twitter Page	https://twitter.com/EPHIethiopia	
Ethiopian Public Health Institute Telegram Channel	https://t.me/EthPHI	
Ethiopian Public Health Institute YouTube Channel	https://www.youtube.com/channel/UCvvtzeY-IJiQfEFBULH9Mkw	
Ministry of Health, Ethiopia Website	www.moh.gov.et	952
Ministry of Health, Ethiopia Facebook Page	https://www.facebook.com/EthiopiaFMoH/	
Afar Regional Health Bureau	https://www.facebook.com/afarrhb.org/	6220
Amhara Regional Health Bureau	https://www.facebook.com/Amhara-Healthbureau-682065755146948/	6981
Benishangul Gumuz Regional Health Bureau	https://www.facebook.com/Benishangul-Gumuz-Health-Bureau-1676282159265517/	6016

Gambela Regional Health Bureau	https://fb.me/gambellaregionhealthbureau	6184
Harari Regional Health Bureau	https://www.facebook.com/Harari-Regional-Health-Bureau-1464182130355007/	6864
Oromia Regional Health Bureau	https://www.facebook.com/OromiaHealth/	6955
Somali Regional Health Bureau	https://www.facebook.com/srhbdotcom/...	6599
SNNP Regional Health Bureau	https://www.facebook.com/snnprhealthbureau/?ref=br_rs	6929
Tigray Regional Health Bureau	https://www.facebook.com/tigrayrhb/	6244
Dire Dawa city Administration Health Bureau	https://www.facebook.com/Dire-Dawa-Administration-Health-Bureau-1371606266279524/	6407
Addis Ababa City Administration Health Bureau	https://www.facebook.com/aahb.gov.et/	6406

Health Evidence summary

Articles/Comment/ Correspondence/ Editorials	Summary
<p>Role of favipiravir in the treatment of COVID-19. https://www.sciencedirect.com/science/article/pii/S1201971220322736</p>	<ul style="list-style-type: none"> Favipiravir is an established drug for treatment of influenza and is being explored more for its role in treatment of COVID-19. Favipiravir has shown promising results in clinical studies in China, Russia, and Japan, and more trials are underway in multiple countries including USA, UK, India.
<p>The art of the possible in approaching efficacy trials for COVID19 convalescent plasma. https://www.sciencedirect.com/science/article/pii/S1201971220322748</p>	<ul style="list-style-type: none"> This paper summarizes the results from randomized controlled trials (RCT) on COVID-19 convalescent plasma (CCP) published to date and analyzes their flaws and biases. COVID-19 convalescent plasma (CCP) is widely used as a treatment. Safety data are enough. High level of evidence efficacy data are missing. Randomized controlled trials (RCT) published to date have several flaws and biases.
<p>Asymptomatic hypoxia in COVID-19 is associated with poor outcome. https://www.sciencedirect.com/science/article/pii/S1201971220322712</p>	<ul style="list-style-type: none"> The absence of shortness of breath in old patient with co-morbidity merit medical attention and should not be considered as a good sign of wellbeing. The poor prognosis of asymptomatic hypoxia, highlight the severity of this mild clinical presentation. In these patient's pulse oximetry is an important mean to predict the outcome along with news score and low dose CT-scanner.
<p>Potential lessons from the Taiwan and New Zealand health responses to the COVID-19 pandemic. https://www.thelancet.com/journals/lanwpc/article/PIIS2666-6065(20)30044-4/fulltext</p>	<ul style="list-style-type: none"> Extensive public health infrastructure established in Taiwan pre-COVID-19 enabled a fast coordinated response, particularly in the domains of early screening, effective methods for isolation/quarantine, digital technologies for identifying potential cases and mass mask use. This timely and vigorous response allowed Taiwan to avoid the national lockdown used by New Zealand. Many of Taiwan's pandemic control components could potentially be adopted by other jurisdictions.
<p>Is there a vaccine for COVID-19? https://www.who.int/emergencies/diseases/novel-coronavirus-2019/question-and-answers-hub/q-a-detail/coronavirus-disease-(covid-19)-vaccines</p>	<ul style="list-style-type: none"> Not yet. Many potential vaccines for COVID-19 are being studied, and several large clinical trials may report results later this year. WHO is working with partners around the world to help coordinate key steps in this process.

	<ul style="list-style-type: none"> Once a safe and effective vaccine is available, WHO will work to facilitate equitable access for the billions of people who will need it.
<p>Residential context and COVID-19 mortality among adults aged 70 years and older in Stockholm: a population-based, observational study using individual-level data.</p> <p>https://www.thelancet.com/journals/lanhl/article/PIIS2666-7568(20)30016-7/fulltext</p>	<ul style="list-style-type: none"> Data from the cause-of-death register was used to identify recorded COVID-19 mortality and mortality from other causes among individuals (aged ≥70 years) in Stockholm county, Sweden, between March 12 and May 8, 2020. Compared with living in a household with individuals aged 66 years or older, living with someone of working age (<66 years) was associated with increased COVID-19 mortality. Living in a care home was associated with an increased risk of COVID-19 mortality compared with living in independent housing. Living in neighborhoods with the highest population density (≥5000 individuals per km²) was associated with higher COVID-19 mortality compared with living in the least densely populated neighborhoods (0 to <150 individuals per km²).
<p>Evaluating the effect of demographic factors, socioeconomic factors, and risk aversion on mobility during the COVID-19 epidemic in France under lockdown: a population-based study.</p> <p>https://www.thelancet.com/journals/landig/article/PIIS2589-7500(20)30243-0/fulltext</p>	<ul style="list-style-type: none"> Temporally resolved travel flows among 1436 administrative areas of mainland France reconstructed from mobile phone trajectories were used. Lockdown caused a 65% reduction in the countrywide number of displacements (from about 57 million to about 20 million trips per day) and was particularly effective in reducing work-related short-range mobility, especially during rush hour, and long trips. Lockdown was effective in reducing population mobility across scales.
<p>Catecholamine physiology and its implications in patients with COVID-19.</p> <p>https://www.thelancet.com/journals/landia/article/PIIS2213-8587(20)30342-9/fulltext</p>	<ul style="list-style-type: none"> Phaeochromocytoma and paraganglioma (PPGL) are tumors that secrete catecholamines, namely adrenaline and noradrenaline, often in excess. Because catecholamines are expected to have a role in patients with critical illness, patients on vasopressor infusions, and patients who sustain some acute and chronic physical stresses, the challenges involved in the management of catecholamine excess states are directly relevant to the treatment of patients with COVID-19.

COVID-19 updates and sources of evidence:

Source	Link
WHO Coronavirus (COVID-19) dashboard	https://covid19.who.int/
Africa CDC Dashboard, COVID-19 Surveillance Dashboard	https://au.int/en/covid19
WHO COVID-19 daily situation reports	https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports
WHO Academy mobile learning app for health workers, COVID-19 information	Android- https://play.google.com/store/apps/details?id=org.who.WHOA Apple- https://apps.apple.com/us/app/who-academy/id1506019873

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Call-Centers
FOR MORE INFO and
ALERT NOTIFICATION on
COVID-19



The above presented Quick Reader (QR) code takes you to a portal that you can access updates and all COVID-19 related information available (<https://www.ephi.gov.et/index.php/public-health-emergency/novel-corona-virus-update>)

DISCLAIMER

This weekly bulletin is produced based on figures pulled from official releases of the World Health Organization and activities and reports of all the sections under the Incident management System.

This Weekly Bulletin series of publications is published by the Ethiopian public health Institute (EPHI), public health emergency operation center (PHEOC). The aim of this bulletin is to inform decision makers within the institute and FMOH, UN agencies and NGOs about COVID-19 preparedness and response activities. All interested health and other professionals can get this bulletin at the Institute website; www.ephi.gov.et

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