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NATIONAL PUBLIC HEALTH EMERGENCY OPERATION CENTER (PHEOC), ETHIOPIA

COVID-19 PANDEMIC PREPAREDNESS AND RESPONSE IN ETHIOPIA

WEEKLY BULLETIN

WHO Epi-Week-51 (December 15 – 20, 2020)

BULLETIN Nº: 34

Issue Date: December 26, 2020

I. HIGHLIGHTS

- COVID-19 new variant is detected in different countries including UK, South Africa and other countries
- A total of 37,342 laboratory samples were tested in the WHO-Epi-Week-51, which is a 2.12% decrease compared to that of the WHO-Epi-Week-50.
- The laboratory test positivity rate for the WHO-Epi-Week-51 is 8.52%, which is a bit lower than the preceding week (9.50%).
- A total of 3,182 new confirmed COVID-19 cases and 47 COVID-19 related deaths were reported during the WHO Epi-Week-51 bringing the total cases and death to 119,951 and 1,853 respectively.
- The number of recovered COVID-19 cases in Ethiopia surpassed 100,000.
- A total of 67,142 COVID-19 confirmed cases have been at Home Based Isolation and Care so far; 9,376 of these are enrolled in the WHO-Epi-Week-51.
- Out of a total of 308,577 contacts of COVID-19 confirmed cases, 1,066 contacts were identified during the WHO Epi-week-51.

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 December 20, 2020, COVID-19 pandemic affected 235 countries/territories causing 74,354,712 cases and 1,668,323 deaths (CFR=2.24%) globally.
- Of the total cases and deaths reported since the beginning of the outbreak, 4,576,557 cases and 78,295 deaths were reported during the WHO Epi-Week-51.
- The United States of America (USA) reported the highest number of cases (17,133,984) with CFR of 1.81% followed by India (10,031,223) cases) with a CFR of 1.45%.
- In Africa, 57 countries/territories have reported COVID-19 cases.
- As of December 20, 2020, a total of 2,498,028 cases and 58,452 deaths were reported across the continent (CFR=2.34%). Of these 129,685 cases and 2,772 deaths were reported during the WHO-Epi-Week-51.
- In Africa, South Africa reported the highest number of cases (912,477) with CFR of 2.68% followed by Morocco (415,226 cases) with a CFR of 1.66%.
- Ethiopia reported the highest number of COVID-19 confirmed cases in East Africa. See the summary dashboard below.

TIPS

-What is known about the new variant detected in South Africa?

A. Unusual for new variants to contain multiple mutations

B. Not only detected in South Africa but also other parts of the world e.g UK

C. Early signs that the new variant is spreading fast

D. It is widespread probably across South Africa

-What is not known about the new variant?

A. Where did it come from and why did it happen? It is first detected at Nelson Mandela Base in South Africa

- B. Is it more severe? No answer and early to tell
- C. Is it re-infecting people who got infected in the 1st wave?
- D. Will the current vaccines work against this variant?

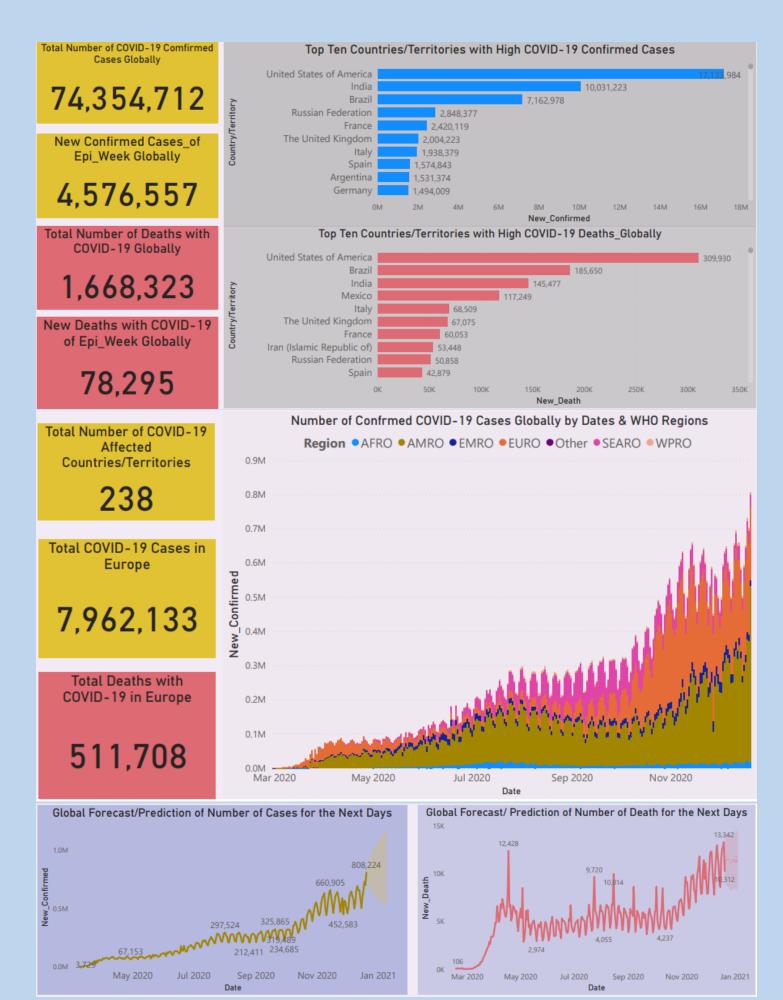


Fig. 1: COVID-19 Global Situation Update as of December 20, 2020 (Source: WHO)

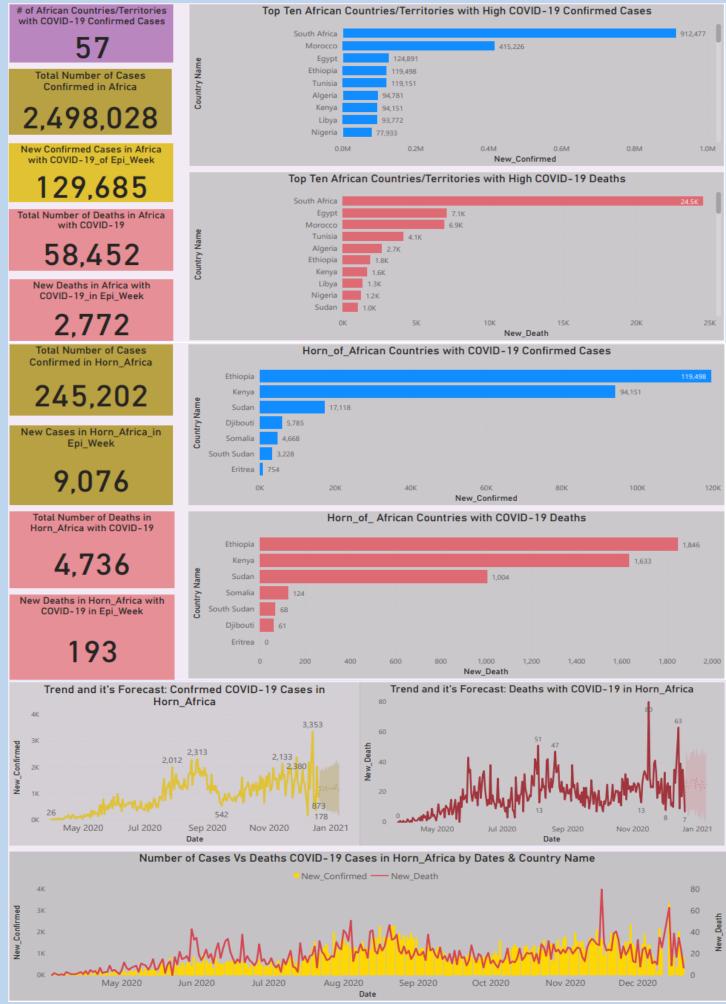


Fig. 2: COVID-19 Situation Update in Africa as of December 20, 2020 (Source: WHO)

National COVID-19 situation

- Three-thousand-one-hundred-eighty-two (3,182) newly confirmed COVID-19 cases (8% decrease compared to that of Epi-Week-50) and 47 COVID-19 related deaths (20% decrease compared to that of Epi-Week-50) were reported during the WHO Epi-Week-51.
- As of December 20, a total of 119,951 confirmed COVID-19 cases and 1,853 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-51

Regions	New_Tested	New_Case	New_HF_Admission	New Death	Positivity Rate	Recovery Rate
Addis Ababa	26540	2449	271	34	9.3	27.6
Oromia	3113	438	67	6	14.6	23.9
SNNPR	3078	89	9	0	3.6	91.7
Afar	1337	11	0	0	0.9	44.0
Amhara	990	46	16	2	5.3	53.7
Sidama	808	112	6	1	12.4	73.4
Somali	553	3	0	0	0.4	30.0
Benshangul	367	3	1	0	8.0	27.0
Gambella	225	7	0	0	0.7	60.0
Harari	190	15	6	3	9.4	29.0
Dire Dawa	141	9	0	1	4.4	35.0
Tigray	0	0	0	0	0.0	76.0
Total	37342	3182	376	47	**** 5.8	**** 47.6

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

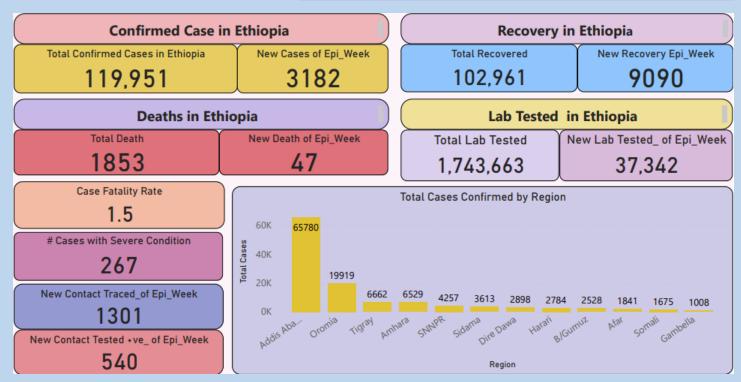


Fig. 3: Weekly summary of the COVID-19 situation in Ethiopia as of December 20, 2020, Ethiopia

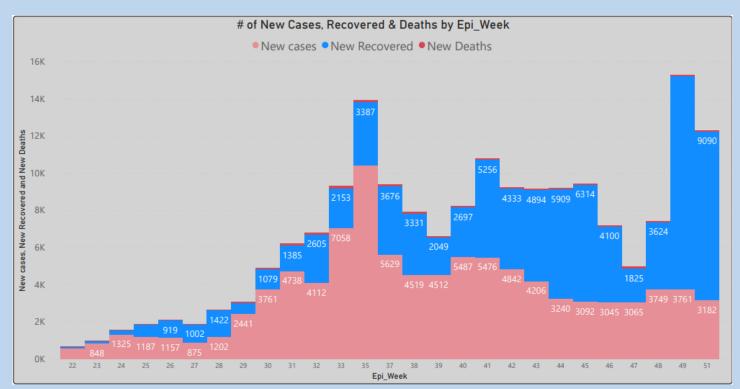


Fig. 4: COVID-19 confirmed cases, recovery and death by WHO Epi-Week as of December 20, 2020, Ethiopia

Epi-Surveillance and Laboratory Related Activities

There is ongoing travelers' health screening at point of entries (POEs), follow-up of international travelers, 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, contacts of confirmed cases, SARI/pneumonia cases and community members.

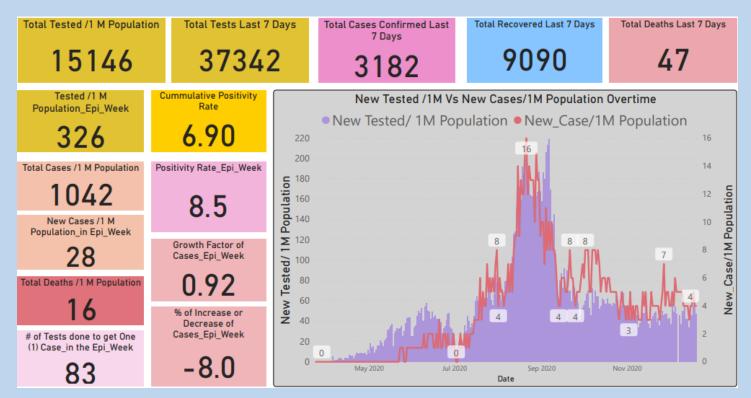


Fig. 5: Summary of COVID-19 confirmed cases in Ethiopia as of December 20, 2020.

Contact tracing and follow-up:

- As of December 20, 2020:
 - A total of 308,577 contacts of confirmed cases have been identified. Of these, 1,208 contacts were identified in the WHO-Epi-Week-51.
 - Of total contacts, 282,154 (91.44%) have completed 14 days follow-up, while 960 contacts are still on follow-up.
 - 716 (0.23%) contacts have developed COVID-19 suggestive symptoms. Of these symptomatic contacts, 571 (79.75%) have tested positive.
- Overall, 25,429 (8.24%) of the contacts (symptomatic plus asymptomatic) have been tested positive.
- Contacts of the confirmed cases contributed for the 21.20% of the total cases.

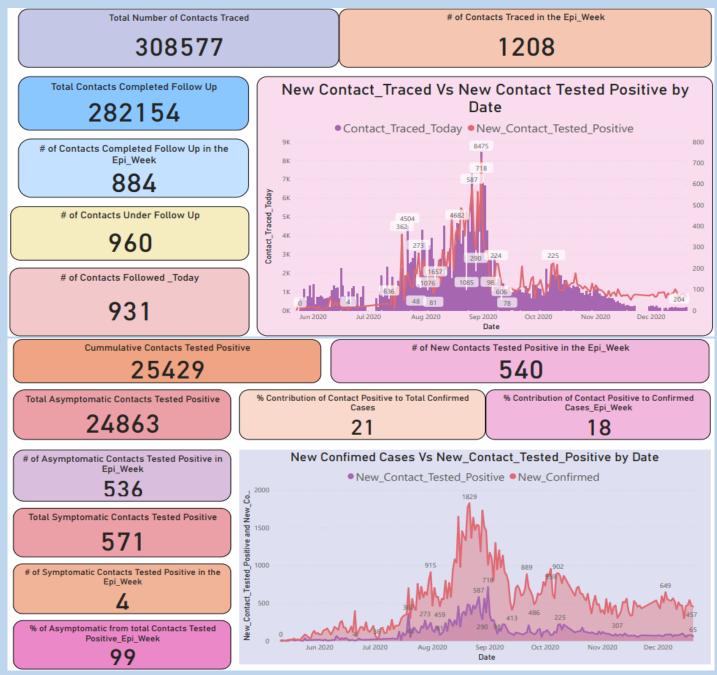


Fig. 6: Summary of COVID-19 contact tracing as of December 20, 2020, Ethiopia.

Rumors collection and verification from all sources

- As of December 20, 2020:
 - 320,312 rumors/alerts have been received and investigated. Of these, 1,638 rumors were reported in the WHO-Epi-Week-51.
 - o 246,324 (76.90%) of the rumors/alerts have fulfilled the suspected case definition.

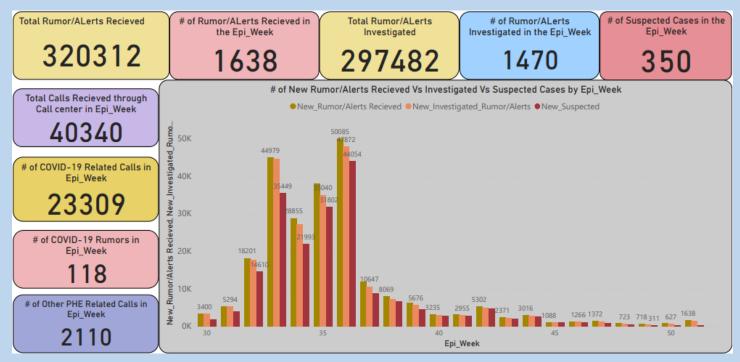


Fig. 7: Summary of COVID-19 rumor/alert investigation as of December 20, 2020, Ethiopia.

Point of entry and Quarantine related activities

- Since the start of the outbreak, 1,465,375 passengers have been screened at the Point of Entries of Ethiopia and 536,734 (36.63%) of them were screened at Bole International Airport.
- Of the total passengers screened, 21,634 were screened for COVID-19 in the Epi-Week-51.
- The total number of population quarantined from March 23 to October 3, 2020 was 69,383.

Laboratory related activities

- As of 20 December 2020, a total of 1,743,663 samples have been tested for COVID-19 by laboratories across the country.
- 37,342 laboratory tests were processed during the WHO Epi-Week-51, which is a 2% decrease compared to that of Epi-Week-50.
- The laboratory test positivity rate for the WHO-Epi-Week-51 is 8.52%, which is a bit lower than the preceding week (9.50%).
- The overall positivity rate for the laboratory test since the occurrence of the disease in the country is 6.88%.

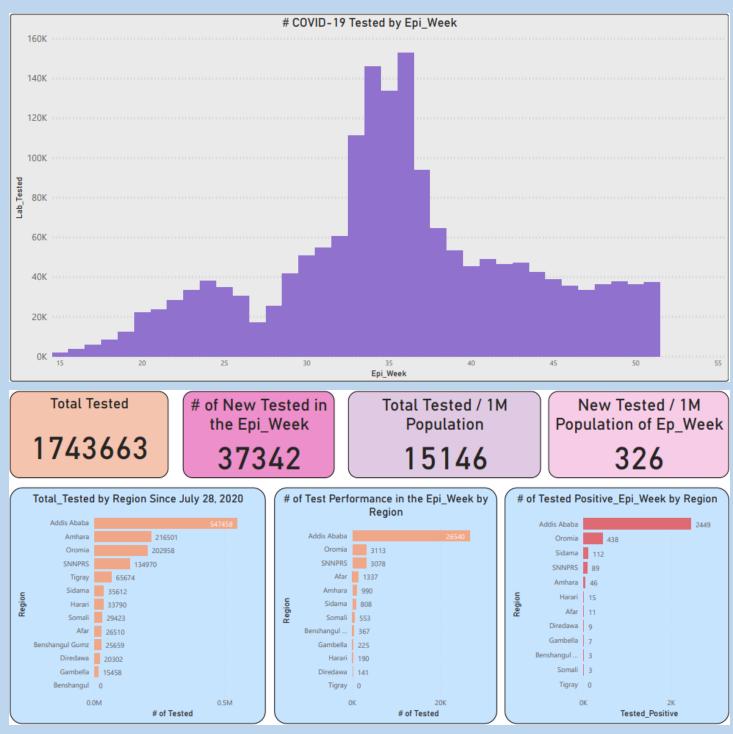


Fig. 8: Summary of COVID-19 laboratory testing as of December 20, 2020, Ethiopia.

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 Minster, is being conducted to oversee and guide the response efforts.

V. Case Management and Facility Readiness

- The number of recovered COVID-19 cases in Ethiopia surpassed 100,000.
- There were total of 9,090 newly recovered COVID-19 cases during the WHO Epi-Week-51, bringing the total number of recovered cases to 102,980.
- As of December 20, 2020:
 - Nationally, there are a total 23,716 beds in the COVID-19 treatment centers; out of which 1,052 are Intensive Care Unit beds.
 - A total of 24,702 suspected COVID-19 cases are admitted to isolation centers. Of these, 185 suspected cases are admitted in the Epi-Week-51.
 - 21,961 (219 in the Epi-Week-51) initially suspected cases are discharged after laboratory test became negative.
- Among the currently existing COVID-19 cases, there are 267 patients in severe clinical condition.

Home Based Isolation and Care (HBIC):

- So far, 67,142 COVID-19 confirmed cases have been on HBIC. Of them 60,819 (90.58%), have recovered and seven (0.010%) died.
- Of these, 9,376 cases have been enrolled to HBIC and 8,624 cases have recovered in the WHO-Epi-Week-51.
- As of December 20, 2020, there are 6,482 cases on HBIC.
- So far, 483 (21 of them in the Epi-Week-51) of the cases have been transferred from treatment centers to HBIC after improvement.
- So far, 317 (8 of them in Epi-Week-51) of the cases have been transferred from HBIC to treatment centers for better care.

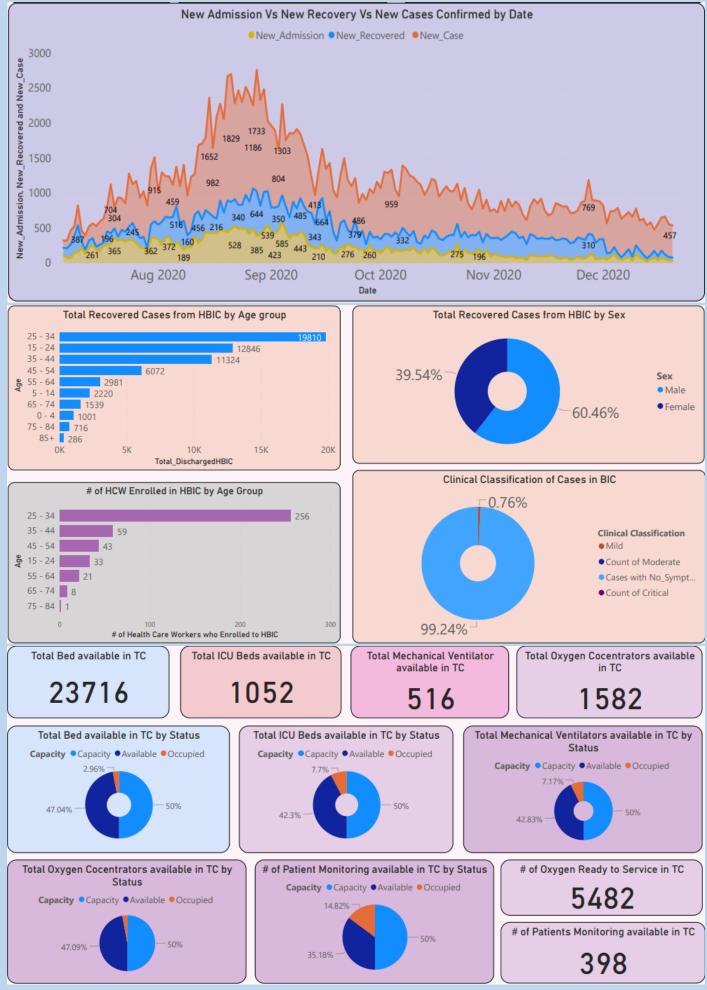


Fig. 9: Summary of COVID-19 case management and facility readiness in Ethiopia, as of December

20, 2020.

VI. Risk Communication and Community Engagement (RCCE)

- Daily press statement is being given on COVID-19 situation on daily basis through Mass Media.
- Panel discussion on COVID-19 prevention and control was held with Walta TV on tegelegaye TV show and on EBC on Tenawo Bebetiwo.
- Follow up of Mobile based training (MBT) at regional level is being monitored by the section.
- COVID-19 related key messages and updates shared on social media.



VII. Logistic and Supplies

- There is ongoing distribution of PPE, Viral Transport Media (VTM), swabs, pharmaceuticals and other medical supplies to isolation and treatment centers.
- Weekly stock status analysis report (Stock on hand, procurement, stock on pipeline, distribution update) was
 performed by incorporating the regional stock reports and laboratory commodity procurement was followed
 and monitored.

VIII. Training and Orientation

- Training provided for youth volunteers and community platforms on COVID-19 prevention at SNNPR.
- Training were provided for 22 health providers (11 from the SNNPR and 9 from Sidama Regional State) on Gender Based Violence (GBV) and Rape management during 24-30/3/2013 E.C. The training was aimed:
 - To aware health workers the importance of preventing sexual violence & respond to the needs of survivors in emergencies.
 - o To demonstrate the clinical management of rape and GBV
 - To make understanding of the role service providers play on multi sectoral and competencies needed to prevent sexual violence and respond to the needs of survivors.
 - o To fill trained professional gaps in the establishment of new one stop centres



Fig. 10: Training on Gender Based Violence and rape management, Dec. 3-9, 2020, Hawassa, Ethiopia

IX. Challenges and Way Forward

Challenges

- New variant detection in different parts of the world and risk of importation
- Weak public adherence to the public health and social preventive measures.
- Shortage of case management facilities for the critical cases.
- Increasing number of COVID-19 cases in congregated settings.
- Increasing number of cases being detected in the community.
- Happenings of super spreading events-Mass gatherings with poor physical distancing and facemask use which exacerbates the spread of COVID-19.
- Low stock status of personal protective equipment is still a problem.

Way Forward

- Enhancing PoE screening activities
- Initiating genomic surveillance
- Intensify risk communication and community engagement activities.
- Strengthened collaboration and coordination with key stakeholders and partners.
- Advocate and strengthen Home Based Isolation and Care (HBIC).
- Conduct intensive 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.
- 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.
 - o Take full responsibility in prevention of transmission
 - o 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
 - o 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.





COVID 19 Sample collection site and Sample collectors

S.No	COVID 19 Sample collection site	Sample collector team leader	Remark
1	Kirkos Sub City, Kasanchis Health Center	T1 (Dawit: 0911739640)	
2	Kirkos Sub City, Hiwot Amba Health Center	T15 (Achenef: 0948803472)	
3	Kirkos subcity, Meshualekia health center	T7 (Henok: 0928503308)	
4	Yeka Sub City, Yeka Health Center	T14 (Dr. Yotor: 0929480120)	
5	Yeka Sub City, Entoto Num2 Health Center	T20 (Worku: 0910199986)	
6	Yeka Sub City, Hidase Health Center	T2 (Tofik: 0910700220)	
7	Kolfe Sub City, Alem Bank Health Center	T6 (Kifle: 0939176982)	
8	Kolfe Sub City, Woreda 3 Health Center	T9 (Aminat: 0913926385)	
9	Bole Sub City, Dilfre Health Center	T8 (Dr.Newal: 0944166985)	
10	Bole Sub City, Amoraw Health Center	T18(Tsegaye: 09155300030	
11	Bole Sub City, Bulbula Health Center	T10 (Yisak: 0912421414)	
12	Gulele Sub City, Shegole Health Center	T13 (Tagay: 0917950772)	
13	Gulele Sub City, Addisu Gebeya Health Center	T4 (Dr. Tsion: 0912863892)	
14	Arada Sub City, Arada Health Center	T12 (Yimiserach: 0922857156)	
15	Arada Sub City, Afenchober Health Center	T21 (Dawit B: 0912069506)	
16	Addis Ketema Sub City, Ginbot 20 Health Center	T16 (Sultan: 0913335940)	
17	Addiss Ketma Subcity, Mesalemiya Health Center	T19 (Habtamu: 0920500792)	
18	Lideta Sub City, Teklehayimnot Health Center	T17 (Dr.Ashenafi: 0913669296)	
19	Akaki Kality Sub City, Akaki Health Center	T22 (Dr.Liya: 0924143875)	
20	Nifassilk Sub City, Woreda11 Health Center	T23 (Beza: 0912992576)	
21	Federal organization/institution Requisite from EOC order	T3(Dr. Molawork:0912906933)	
22	ABET Hospital	Hana(0912128745)	
23	Minilik Hospital	Dr.Alef(0910820385)	
24	Entoto Fana Health Center	Mihretu(0922115484)	
25	Hidassie Health Center	Dr Eden(0911048627)	
26	St Paul Hospital	Ayana(0913281164)	
27	EPHI(Ethiopian public health institute)		
27	Yekatit 12 Hospital	Alfiya(0924908932)	
29	Ras Desta Hospital	Meti(0938936024) Dr Liwam(0912642887)	
30	Zewditu Hospital	Dr Meron(0921300452)	
31	Tirunesh Beljing Hospital	Miressa(0929954537)	
32	Ghandi Hospital	Dr.Feven(0920221706)	
	Special Population:		
33		Dejene(0921103354)	1
34	Special Population:	Endalkachew(0913186148)	

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	https://www.ephi.gov.et/	8335/952
Main Website		
Ethiopian Public Health Institute	https://covid19.ephi.gov.et/	
COVID-19 Website		
Ethiopian Public Health Institute	https://www.facebook.com/ephipage/	
Facebook Page		
Ethiopian Public Health Institute	https://twitter.com/EPHIEthiopia	
Twitter Page Ethiopian Public Health Institute	https://t.me/EthPHI	
Telegram Channel		
Ethiopian Public Health Institute	https://www.youtube.com/channel/UCvvTzeY-	
YouTube Channel	IJiQfEFBULH9Mkw	
Ministry of Health, Ethiopia	www.moh.gov.et	952
Website		
Ministry of Health, Ethiopia	https://www.facebook.com/EthiopiaFMoH/	
Facebook Page		
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	https://www.facebook.com/Benishangul-Gumuz-Health-	6016
Health Bureau	Bureau-1676282159265517/	0010
Gambela Regional Health	https://fb.me/gambellaregionhealthbureau	6184
Bureau		
Harari Regional Health Bureau	https://www.facebook.com/Harari-Regional-Health-	6864
	Bureau-1464182130355007/	
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	https://www.facebook.com/Dire-Dawa-Administration-	6407
Health Bureau	Health-Bureau-1371606266279524/	
Addis Ababa City Administration	https://www.facebook.com/aahb.gov.et/	6406
Health Bureau		

Health Evidence summary

Articles/Comment/ Correspondence/ Editorials	Summary
Psychological and Coping Responses of Health Care Workers Toward Emerging Infectious Disease Outbreaks: A Rapid Review and Practical Implications for the COVID-19 Pandemic <u>https://doi.org/10.4088/jcp.20r13450</u>	 Psychological support for Health Care Workers (HCW) in the current COVID-19 pandemic and future outbreaks should focus on both individual (eg, psychoeducation on possible psychological responses, self-care) and institutional (eg, clear communication, providing access to resources for help, recognition of efforts of HCW) measures.
Child and Family Outcomes Following Pandemics: A Systematic Review and Recommendations on COVID-19 Policies <u>https://doi.org/10.1093/jpepsy/jsaa092</u>	 Findings from this review suggest current gaps in COVID- 19 policies and provide recommendations such implementing "family-friendly" policies that are inclusive and have flexible eligibility criteria. Examples include universal paid sick leave for parents and financial supports for parents who are also frontline workers and are at an elevated risk for contracting the disease.

Airborne spread of infectious SARS-CoV-2: Moving forward using lessons from SARS- CoV and MERS-CoV <u>https://doi.org/10.1016/j.scitotenv.2020.1428</u> 02 SARS- CoV-2 seroprevalence and	 a modest effect on SARS-CoV-2 viability in the environment, as reported in previous studies to this date. However, these studies are experimental, and do not support the fact that the virus has efficiently spread in the tropical regions of the globe, with other transmission routes such as the contact and droplet ones probably being responsible for the majority of cases reported in these regions, along with other factors such as human mobility patterns and contact rates.
asymptomatic viral carriage in healthcare workers: a cross-sectional study https://thorax.bmj.com/content/thoraxjnl/75/1 2/1089.full.pdf	 A cross-sectional study of asymptomatic healthcare workers to determine the rates of asymptomatic viral carriage and seroprevalence of SARS- CoV-2 antibodies in healthcare workers. This study revealed that differences in the occupational risk of exposure to SARS- CoV-2 between hospital departments and confirm asymptomatic seroconversion occurs in healthcare workers.
Risk factors for delayed negative conversion of SARS-CoV-2 in patients with COVID-19 pneumonia: a retrospective cohort study. https://www.cambridge.org/core/services/aopc ambridgecore/content/view/FD030E69B7B6DB0 F42D532EE2821811C/S0950268820002940a.pdf /risk factors for delayed negative conversion of sarscov2 in patients with covid19 pneum onia a retrospective_cohort_study.pdf	 A retrospective cohort study that aimed to identify risk factors associated with delayed negative conversion of SARS-CoV-2 in COVID-19 patients. This study indicated that cough, leukocytes, neutrophils and ESR were positively correlated with delayed virus negative conversion, and CD3+CD4+ lymphocytes were negatively correlated.

COVID-19 updates and sources of evidence:

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





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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