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NATIONAL PUBLIC HEALTH EMERGENCY OPERATION CENTER (PHEOC), ETHIOPIA

COVID-19 PANDEMIC PREPAREDNESS AND RESPONSE IN ETHIOPIA

WEEKLY BULLETIN

Epi-Week- 18 (May 03 – 09, 2021)

BULLETIN Nº: 54

Issue Date: May 16, 2021

I. HIGHLIGHTS

- A total of 34,510 laboratory samples were tested in the Epi-Week-18 bringing the total number of samples tested to 2,620,593.
- A total of 4,318 new confirmed COVID-19 cases and 162 COVID-19 related deaths were reported during the Epi-Week-18 bringing the total cases and death to 262,702 and 3,888 respectively.
- A total of 173,461 COVID-19 confirmed cases have been at Home Based Isolation and Care so far; 6,108 of these are enrolled in the Epi-Week-18.
- Out of total of 361,807 contacts of COVID-19 confirmed cases, 4,049 contacts were identified during the Epiweek-18.
- National PHEOC & Regional PHEOCs IMS joint meeting conducted on COVID 19 response revitalization.
- A new variant of SARS-CoV-2 in India is declared a Variant of Concern (VOC) within lineage B.1.617.

II. Subject in Focus:

a. COVID-19 vaccination update

- Vaccines have emerged as a way to combat the spread of COVID-19.
- Vaccines typically require years of research and testing before reaching the clinic, but in 2020, scientists embarked on a race to produce safe and effective coronavirus vaccines in record time.
- Researchers are currently testing 90 vaccines in clinical trials on humans, and 27 have reached the final stages of testing (see figure 1 below).
- At least 77 preclinical vaccines are under active investigation in animals¹.

¹ <u>https://www.nytimes.com/interactive/2020/science/coronavirus-vaccine-tracker.html</u>

- Currently, many countries are scaling up their vaccination efforts and there are varieties of brands produced by different drug manufacturers. China has the most number of citizens vaccinated globally followed by USA. Morocco leads the charge in Africa followed by Nigeria and Ethiopia. A total of 1,215,934 people have been vaccinated in Ethiopia as of 09 May 2021.
- Among the COVID-19 vaccines approved for emergency use the AstraZeneca and Sinopharm vaccines are in use in Ethiopia.

Phase 1	Pha	ase 2 Phase		se 3 Authorized		Approved		Ab	Abandoned			
49 37		2	27		6	6		8		4		
		anded safety scale				ccines in early limited use		Vaccines approved for full use		ab	Vaccines abandoned after trials	
COUNTRY		TOTAL_VACCINATIO	NS	TOTAL_VACCIN ONS_PER100			DNS_VACCIN 1PLUS_DOSE				#_VACCINES_T S_USED	YPE
China		280349	977	19	9.06							5
United States of America		241639	173	73	3.00		148256048		44	.79		3
India		160418105		1	1.62		1300032 <mark>2</mark> 5		9	.42		3
The United Kingdom		50297	'911	74	4.10		34667904	-	51	.07		3
Brazil		41383	8096	19	9.47		28210496		13	.27		4
Germany		30631	299	30	5.80		23859823		28	.69		4
Turkey		23729	9113	28.10			14132161	1 1		.76		2
France		22473	586	33.40			15873161	23		.58		4
Indonesia		20701	804		7.57		12699568	4		.64		2
Italy		20684	263	34	4.70		14468040		24	.26		4
Russian Federation		20168	3443	13	3.80		12478994		8	.55		2
Spain		17309	914	30	5.60		12196627		25	.77		4
Chile		14622	372	70	5.49		8052578		42	.12		3
Canada		13331	068	3	5.32		12245868		32	.45		3
Poland		12330	040	32	2.50		9151159		24	.11		4
Mexico		12235	5767		9.49		5483485		4	.25		5
COUNTRY		TOTAL_VACCINATIO	NS	TOTAL_VACCIN ONS_PER100			DNS_VACCIN 1PLUS_DOSE				#_VACCINES_T S_USED	YPE
Morocco		9325	597	2	5.27		5107128		13	.84		4
Nigeria		1266			0.62		1266742			.62		1
Ethiopia		1215			1.06		1215934			.06		3
Egypt		1159			1.13		913061		0	.89		4
Kenya			986		1.68		900459			.68		1
Ghana		847	7871		2.73		847871		2	.73		2
Zimbabwe			9777		3.77		452191			.04		3
Angola			8918		1.56		513918	F		.56		1
Senegal 484			1	2.89		418828			.50		2	
Tunisia 424625			C	3.59		320694	Ē.		.71		4	
Rwanda 400096			5	3.09		348926	[.69		3	
Uganda 354736				0.78		354736	[.78		1	
Malawi 307218			1	1.61		307218			.61		1	
Sudan)500		0.66	_	150410			.34		4
Тодо			697		2.62		215684			.61		1
Mauritius		197	646		5.54		197646			.54		3

Fig. 1: Summary of global COVID-19 vaccinations as of May 09, 2021

b. Newly designated Variant Of Concern (VOC)²

2

² <u>https://www.who.int/publications/m/item/weekly-epidemiological-update-on-covid-19---11-may-2021</u>

- WHO has determined that viruses within the lineage B.1.617 have been characterized as a VOC. B.1.617 contains three sub-lineages, which differ by few but potentially relevant mutations in the spike protein as well as prevalence of detection globally.
- As of 11 May, over 4500 sequences have been uploaded to GISAID and assigned to B.1.617 from 44 countries in all six WHO regions, and WHO has received reports of detections from five additional countries.
- Though there may be important differences among the three sublineages, currently available evidence is too limited for Variant of Interest/Variant of Concern characterization by sublineage.
- Currently, WHO has designated B.1.617 as a VOC based on early evidence of phenotypic impacts compared to other circulating virus variants, namely:
 - B.1.617 sublineages appear to have higher rates of transmission, including observed rapid increases in prevalence in multiple countries (moderate evidence available for B.1.617.1 and B.1.617.2), and
 - Preliminary evidence suggests potential reduced effectiveness of Bamlanivimab, a monoclonal antibody used for COVID-19 treatment, and potentially slightly reduced susceptibility to neutralization antibodies (limited evidence available for B.1.617.1).

III. EPIDEMIOLOGICAL SITUATION

a. Global Situation³

- Globally, new COVID-19 cases and deaths decreased slightly this week, with over 5.5 million cases and over 90,000 deaths after increase for ten consecutive weeks.
- The highest numbers of new cases were reported from India, Brazil, the United States of America, Turkey and Argentina.
- Global:
 - o new cases: 5,517,602
 - o new deaths: 90,242
 - o cumulative cases: 157,362,408
 - o cumulative deaths: 3,277,834
 - Case Fatality Rate: 2.08%

b. National COVID-19 situation:

• As of May 09, 2021, a total of 262,702 confirmed COVID-19 cases and 3,888 deaths were recorded in the country with a case fatality rate of 1.48%. This puts Ethiopia in the fourth position by the number of confirmed cases and in the fifth position by the number of deaths due to COVID-19 in Africa.

³ <u>https://www.who.int/publications/m/item/weekly-epidemiological-update-on-covid-19---11-may-2021</u>

- Four-thousand-three-hundred-eighteen (4,318) newly confirmed COVID-19 cases and 162 COVID-19 related deaths were reported during the Epi-Week-18.
- In this week, there is a 30% decrease in the number of COVID-19 confirmed cases and the number of COVID-19 related deaths have decreased by 7% (for the fourth consecutive week).
- The number of COVID-19 confirmed cases showed a decrease for the fifth consecutive week.
- However there is also a decrease in the number of samples tested in the week which can be the main reason for the decrease in the number of confirmed cases in the week. It may also attribute to the enhanced implementation of directive 30/2020.
- There is also an increase in the Case Fatality Rate which shows that high number of deaths are occurring among the confirmed cases even though there is decrease in the gross number of deaths and confirmed cases.
- Most of the cases are still from Addis Ababa City Administration which may be as result of different reasons. High number of laboratory tests, high transmission of the disease due to the occurrence of super spreading events and decreased adherence to the public health public health and social measures might be some of the reasons for high number of case reports from the city.
- The number of newly confirmed COVID-19 cases are decreasing as a result of more travelers tested for COVID-19. Among people being tested for COVID-19, most of the samples were collected from people seeking COVID-19 negative result for out of country travel purpose. Other reasons for sample testing for COVID-19 includes: being suspected for the disease and being contact of confirmed case/s. It is common to get more positive cases among suspected cases and contacts of confirmed cases. Whenever low number of samples from suspected cases and/or contacts of confirmed cases and high number of samples from travelers are tested, it is expected that there will be low number of COVID-19 positive cases among tested population.
- For detail, see the summary dashboard below.

Table 1: Summary of National COVID-19 situation in the Epi-Week-18 of 2021

Regions	New_Tested	New_Case	New_HF_Admission	New_Deaths	Positivity Rate	# of Recovery
Addis Ababa	26262	2405	362	85	9.1	6888
SNNPR	2240	247	40	12	10.3	218
Oromia	1675	573	160	35	37.6	1264
Amhara	972	272	46	9	29.0	212
Afar	672	54	9	1	8.0	101
Benshangul	516	33	22	0	8.0	102
Somali	481	141	26	9	25.8	178
Tigray	479	221	0	0	46.3	0
Dire Dawa	436	150	6	5	34.9	204
Sidama	341	116	5	1	3 <mark>8.8</mark>	147
Harari	331	71	29	5	19.3	160
Gambella	105	35	0	0	3 <mark>8.5</mark>	48
Total	34510	4318	705	162	*** 24.4	9522

**** Positivity Rate is the Weighted Averages of Regional Distributions of Rates

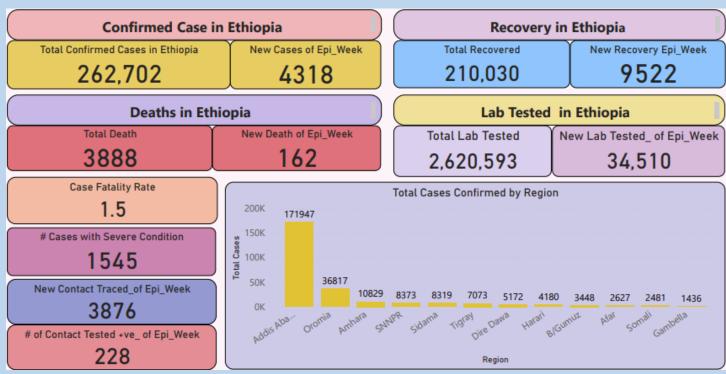


Fig. 2: Weekly summary of the COVID-19 situation in Ethiopia as of May 09, 2021, Ethiopia

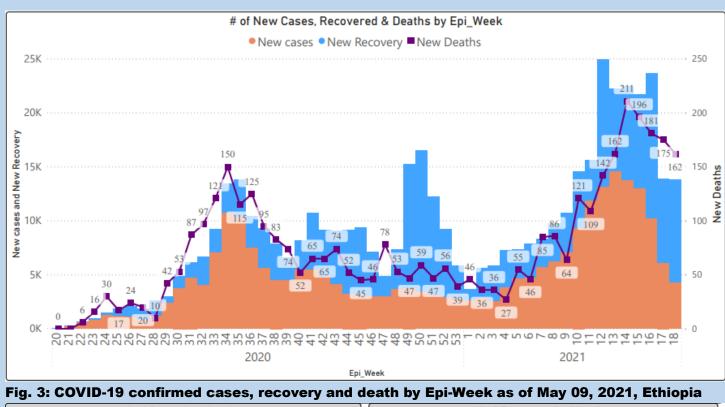




Fig. 4: Summary of monthly trend of COVID-19 situation in Ethiopia as of May 09, 2021.

c. Other Epi-Surveillance 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, surveillance and assessment in school and congregated setting communities.

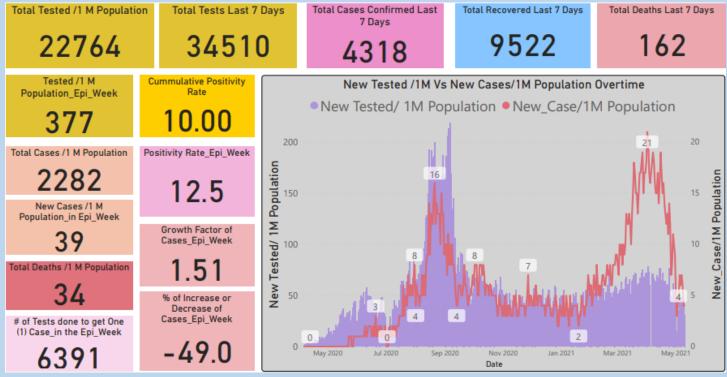


Fig. 5: Summary of COVID-19 confirmed cases in Ethiopia as of May 09, 2021.

i. Contact tracing and follow-up:

- Contact tracing is a key strategy for interrupting chains of transmission of SARS-CoV-2 and reducing COVID-19-associated mortality.
- As of May 09, 2021:
 - A total of 361,807 contacts of confirmed cases have been identified. Of these, 3,876 contacts were identified in the Epi-Week-18.
 - Of total contacts, 315,613 (87.23%) have completed 14 days follow-up, while 5,326 contacts are still on follow-up.
- Overall, 41,285 (11.41%) of the contacts (symptomatic plus asymptomatic) have been tested positive.
- Contacts of the confirmed cases contributed for the 15.72% of the total cases. However, when there is
 transmission of the disease at community level, it is known that an individual acquires the disease from
 unknown contacts.

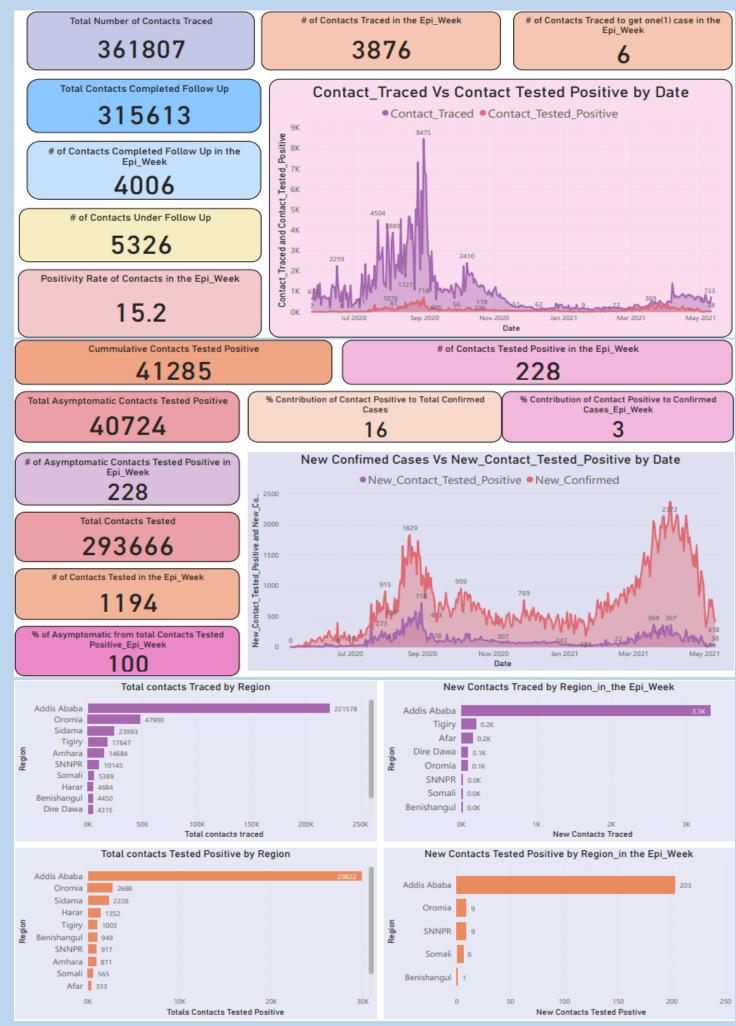


Fig. 6: Summary of COVID-19 contact tracing as of May 09, 2021, Ethiopia.

ii. Rumors collection and verification from all sources

- COVID-19 related rumors are received from different sources: Call centers, Health facilities, Contact follow up, Self-report, Travelers follow up, Point of Entry (PoE), Community surveillance and Special Settings.
- As of May 09, 2021:
 - 389,866 rumors/alerts have been received and investigated. Of these, 248 rumors were reported in the Epi-Week-18.
 - o 278,356 (71.39%) of the rumors/alerts have fulfilled the suspected case definition.
- 23,554 COVID-19 related calls are received through call centers in this Epi-week.

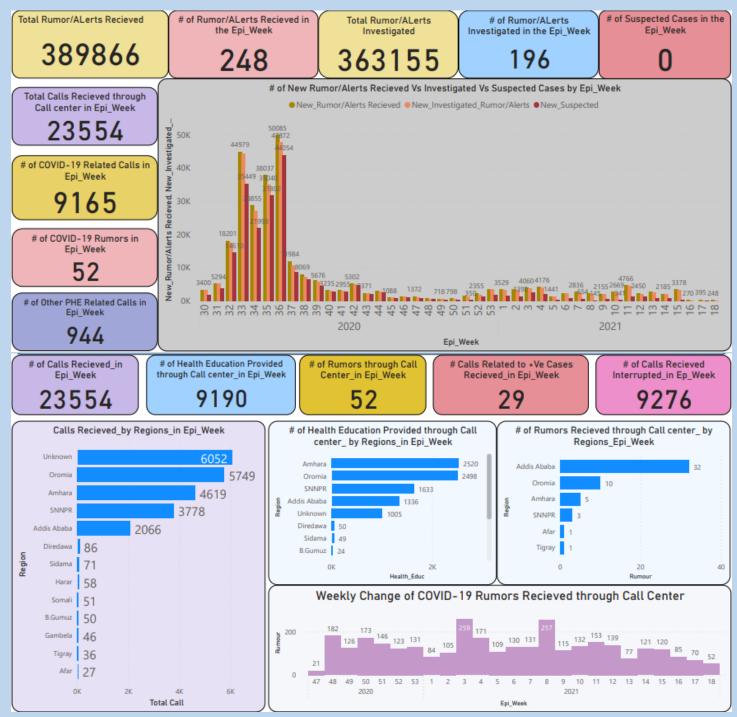


Fig. 7: Summary of COVID-19 rumor/alert investigation as of May 09, 2021, Ethiopia.

iii. Point of entry and Quarantine related activities

- Since the start of the outbreak, 2,113,395 passengers have been screened at the Point of Entries of Ethiopia and 678,747 (32.11%) of them were screened at Bole International Airport.
- Of the total passengers screened, 35,261 were screened for COVID-19 in the Epi-Week-18.
- As of May 09, 2021, among the passengers coming with COVID-19 PCR test result certificates, 305,871 passengers (9,483 in Epi-week-18) had PCR negative certificates while 45 passengers with PCR positive certificates were identified during health screening. A total of 86 SARS-COV-2 positive cases have been detected after arrival laboratory test.

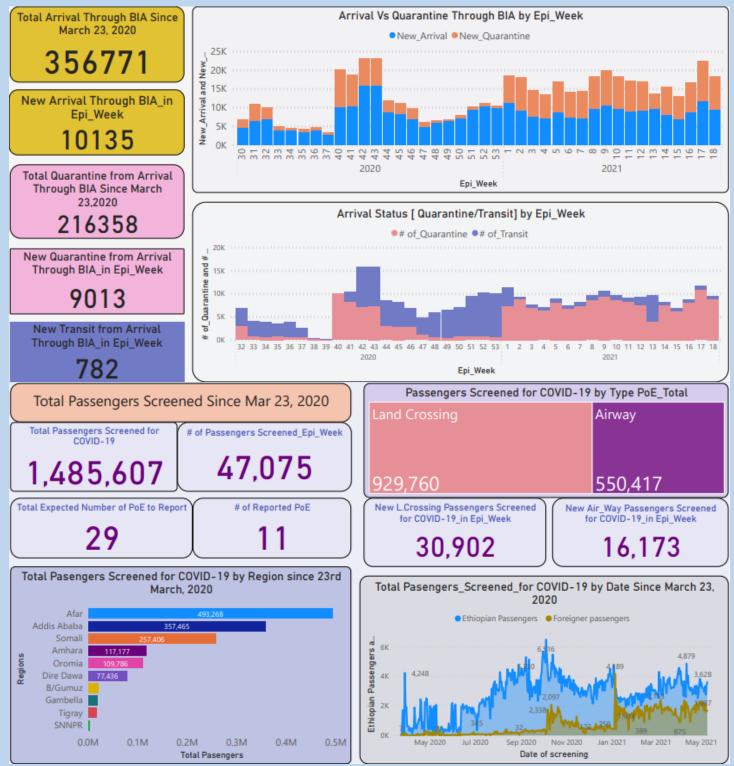


Fig. 8: Summary of Passengers screening for COVID-19 as of May 09, 2021, Ethiopia.

IV. Laboratory related activities

- As of 09 May 2021, a total of 2,620,593 samples have been tested for COVID-19 by laboratories across the country.
- 34,510 laboratory tests were processed during the Epi-Week-18 which is a 3% decrease compared to number of tests performed in the previous week.
- The laboratory test positivity rate for the Epi-Week-18 is 12.51%, which is lower than that of the preceding week (17.11%).
- Tigray, Sidama, Gambella, Oromia, Dire Dawa, Amhara, and Somali regional states have reported positivity rates higher than the national weighted average while the positivity rate in Addis Ababa has showed a decrease (figure 11 below). This shows that the COVID-19 epidemic has got high spread to regions.

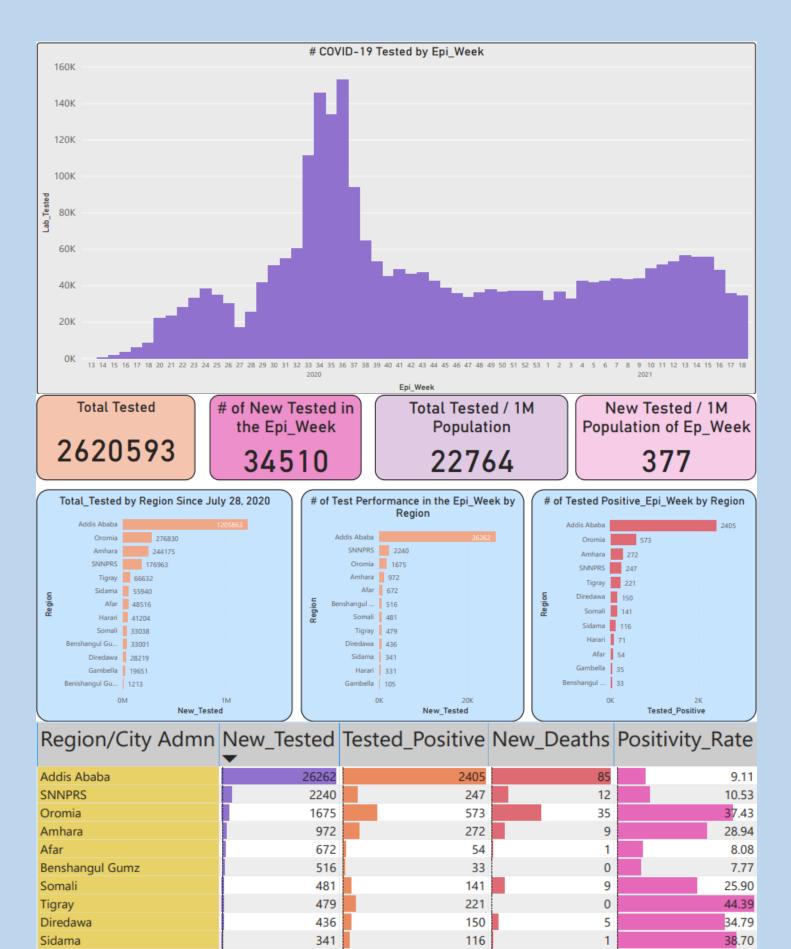


Fig. 9: Summary of COVID-19 laboratory testing as of March May 09, 2021, Ethiopia.

71

35

****** Positivity Rate is weighted average of Regional Distn of Rates

4318

5

0

162

19.26

38.35

24.51

331

105

34510

Harari

Total

Gambella

V. Case Management and Facility Readiness

a. COVID-19 treatment center

- There were total of 9,522 newly recovered COVID-19 cases during the Epi-Week-18, bringing the total number of recovered cases to 210,030 (both from COVID-19 treatment center and from HBIC).
- The number recovered cases has decreased by 9% compared to the previous week.
- The highest number of daily cases in severe condition reported in this week is 883.

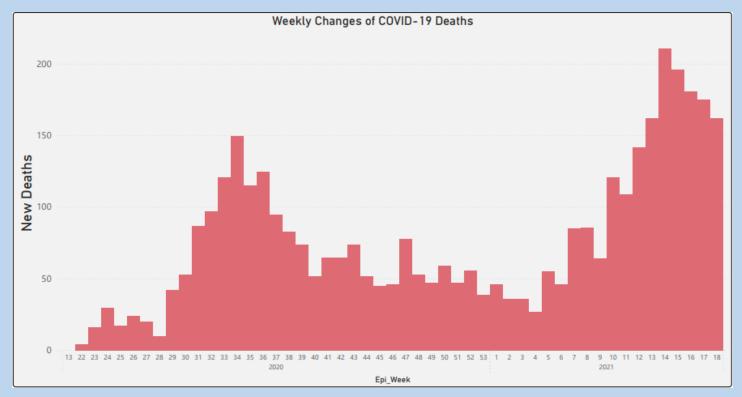


Fig. 10: Weekly trend of COVID-19 related death in Ethiopia, as of May 09, 2021.

 Most of the confirmed cases admitted to treatment centers are in the age group of 15 to 54 while most of the COVID-19 related deaths occurred in age greater 64. This indicates that as the patient becomes elder there comes high probability of death due to COVID-19 (see figure 13 below).

Age_Group	# of Confirme admitted to T		/ID-19 patients ed from Facilty	# of Facility	Deaths
65 - 74		4099	2804	1	934
55 - 64		5374	4230)	777
75 - 84		1893	1202	2	523
45 - 54		6428	5664	1	471
35 - 44		9022	8383	3	381
85 +		700	34	7	321
25 - 34		16200	1570	7	257
15 - 24		12249	11990	5	121
5 - 14		1269	1200)	36
0 - 4		831	753	3	35
Total		58065	5228	5	3856

Fig. 11: Summary of COVID-19 patients' update based on age group as of May 09, 2021, Ethiopia.

b. Home Based Isolation and Care (HBIC):

- So far, 173,461 COVID-19 confirmed cases have been on HBIC. Of them 157,841 (91.00%) have recovered and 32 (0.018%) died.
- Of these, 6,108 cases have been enrolled to HBIC and 8,808 cases have recovered in the Epi-Week-18.
- As of May 09, 2021, there are 16,831 cases on HBIC.
- So far, 2,065 (10 of them in the Epi-Week-18) of the cases have been transferred from treatment centers to HBIC after improvement.
- So far, 822 (49 of them in the Epi-week-18) of the cases have been transferred from HBIC to treatment centers for better care.

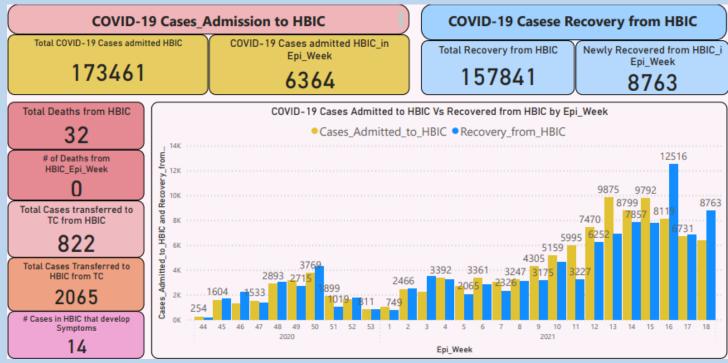


Fig. 12: Summary of COVID-19 Home Based Isolation and Care in Ethiopia, as of May 09, 2021.

VI. 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.
- Weekly leadership and strategic virtual meeting, chaired by the H.E MOH Minster, is being conducted to oversee and guide the response efforts.
- Weekly joint meeting is started (every Monday) among the national and regional Public Health Emergency Operations Centers to evaluate weekly situations and challenges faced.
- COVID-19 preparedness and response plan revision is ongoing at national level. Accordingly the National PHEOC & Regional PHEOCs IMS joint meeting is conducted on COVID-19 response revitalization. The meeting agenda were overall COVID-19 response plan status, testing preparation & capacity (RDT, functionality status of RT PCR labs), Challenges (ongoing & predicted) and support area required (identifying resources on hand & gaps). In some regions shortage of extraction and detection kit for PCR machines, PCR machine failure and shortage of vehicles for sample transportation were mentioned among the challenges regarding laboratory testing preparation and capacity. Training on Ag-RDT (Antigen Rapid Diagnostic Test) kit is also needed for regional laboratory professionals working in COVID-19 laboratories.

VII. Challenges and Way Forward

a. Challenges

- There is shortage of appropriate facilities to manage severely ill and critical patients.
- Happenings of super spreading events-Mass gatherings with poor physical distancing and facemask use which exacerbates the spread of COVID-19.
- Poor public adherence to the public health and social preventive measures despite some improvements in some areas.
- Poor adherence to the public health and social measures by public figures and leaders despite some improvements recently.
- Poor attention given to COVID-19 at all levels by all responsible bodies in particular at subnational level.
- Low stock status of personal protective equipment, supplies and logistics in particular laboratory supplies.

b. Way Forward

- Enhancing law enforcement to enhance public health and social measures by all responsible bodies.
- Continuing the COVID-19 vaccination.
- Genomic surveillance establishment, networking and strengthening.
- COVID-19 preparedness and response plan revision at subnational level.

- 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.
- Strengthen and sustain other essential health services besides COVID-19.
- Follow up and performance report on Antigen Rapid Diagnostic Test Kits from regional COVID-19 testing sites.



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ንዳዩ፡- ኮቪድ-19 Antigen RDT ትግበራ አስራሳጊው ክትትልና ድጋፍ እንዲደረግ ስለመጠየቅ

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ስለሆንም ኮሽድ-19 ወረርሽኝ ስርጭት ለመግታትና ስመቆጣጠር የAntigen-BDT አተገባበር መመሪያ ክደብዳቤ ,2ር አባሪ አድርግን የሳክንና ስትግበራ አንዲመች ስተመረጡት ተቋማት ስልጠናና የመመርመሪያ ግብዓት አንዲወስዱ መደረጉ ይታወቃል። ይሁንና በክልሱ ስልጥነው እና ግብዓት የወሰዱት ተቋማት የትግቢራ አፈዓፀም አጥጋቢ ሆኖ ስላልተግኝ በናንተ በኩል አስራሳጌው ከፍተኝ Phile-19 Antigen-RDT ሪፖርት ስትግበራ-ክትትልና ድጋፍ አንድታደርንሳቸውና የተጠናከረ በታዘጋጀ ሲስታም ለኢትዮጵያ የሕብረታሰብ ጤና ኢንስቲትዩት አንድትልኩና ወረርሽችን ስመንታትና ስመቆጣጠር በሚደረገው ርብርብ የተለመደውን ትብብር እንድታደርጉ እንጠይቃስን።

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VIII. COVID-19 Related News:

- A batch of new studies published Wednesday show how well coronavirus vaccines work against worrying new variants -- and one indicates booster doses can help them work even better. At least one of the studies also demonstrated that being fully vaccinated matters. The first nationwide study of coronavirus vaccination, done in Israel, showed Pfizer/BioNtech's vaccine works far better after two doses. Two shots of the vaccine 95% protection provided greater than from infection. severe illness and death. https://edition.cnn.com/2021/05/05/health/vaccines-efficacy-coronavirus-variants-reports/index.html.
- The United States could see a drop in Covid-19 cases and deaths by July if vaccinations remain high and people adhere to certain prevention measures, a new modeling study suggests. : https://edition.cnn.com/2021/05/05/health/cdc-model-covid-19-cases-study/index.html
- Mucormycosis: The 'black fungus' maiming Covid patients in India: <u>https://www.bbc.com/news/world-asia-india-57027829</u>
- Bar owner charged with selling fake coronavirus vaccine cards in one of the first cases of its kind: <u>https://www.washingtonpost.com/health/2021/05/06/fake-covid-vaccine-cards/</u>

IX. 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
 - 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.
 - o 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.

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	https://www.facebook.com/Dire-Dawa-Administration-	6407
Health Bureau	Health-Bureau-1371606266279524/	0.400
Addis Ababa City Administration Health Bureau	https://www.facebook.com/aahb.gov.et/	6406

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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