



NATIONAL PUBLIC HEALTH EMERGENCY OPERATION CENTER (PHEOC), ETHIOPIA

COVID-19 PANDEMIC PREPAREDNESS AND RESPONSE IN ETHIOPIA

WEEKLY BULLETIN

WHO Epi-Week-39 (September 21-September 27, 2020)

BULLETIN No: 22

Issue Date: September 28, 2020

I. HIGHLIGHTS

- Total of 53,364 laboratory samples were tested in the WHO-Epi-Week-39, which is a 17.66% decrease compared to the WHO-Epi-Week-38.
- The weighted laboratory test positivity rate for the WHO-Epi-Week-39 is 8.14 %.
- A total of 4,512 new confirmed COVID-19 cases and 74 COVID-19 related deaths were reported during the WHO Epi-Week-38 bringing the total cases and death to 73,332 and 1,170 respectively.
- The number of deaths due to COVID-19 in Ethiopia has decreased by 10.84% in the WHO-Epi-Week-39 compared to the reports in Epi-Week-38.
- There were total of 2,049 newly recovered COVID-19 cases during the WHO Epi-Week-39, bringing the total number of recovered cases to 30,363.
- A total of 18,069 COVID-19 confirmed cases have been on Home Based Isolation and Care.
- A total of 6,487 contacts were identified during the WHO Epi-week-39.

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 September 27, 2020, COVID-19 pandemic affected 235 countries/territories causing 32,787,329 cases and 993,176 deaths (CFR=3.03%) globally.
- Of the total cases and deaths reported since the beginning of the outbreak, 2,111,654 cases and 37,295 deaths were reported during the WHO Epi-Week-39.
- The United States of America (USA) reported the highest number of cases (6,960,152) with CFR of 2.92% followed by India (5,992,532 cases) with a CFR of 1.58%.
- In Africa, 57 countries/territories have reported COVID-19 cases.
- As of September 27, 2020, a total of 1,460,868 cases and 35,100 deaths were reported across the continent (CFR=2.40%). Of these 54,448 cases and 1,222 deaths were reported during the WHO-Epi-Week-39.
- Ethiopia reported the highest number of COVID-19 confirmed cases in East Africa. See the summary dashboard below.

Total Number of COVID-19 Affected Countries/Territories

235

Total Number of COVID-19 Confirmed Cases Globally

32,787,329

Total Number of Deaths with COVID-19 Globally

993,176

New Confirmed Cases_of Epi_Week Globally

2,054,997

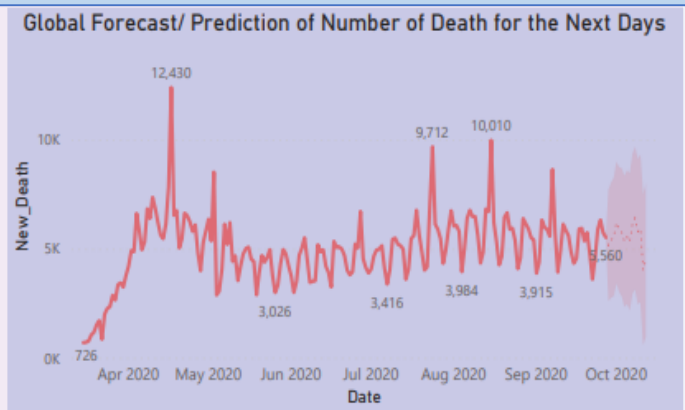
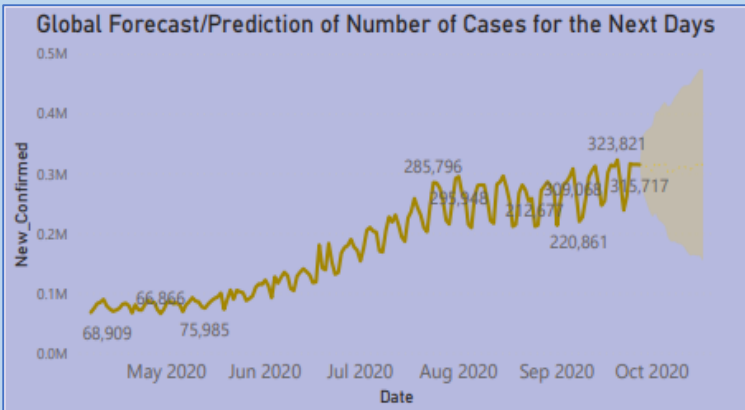
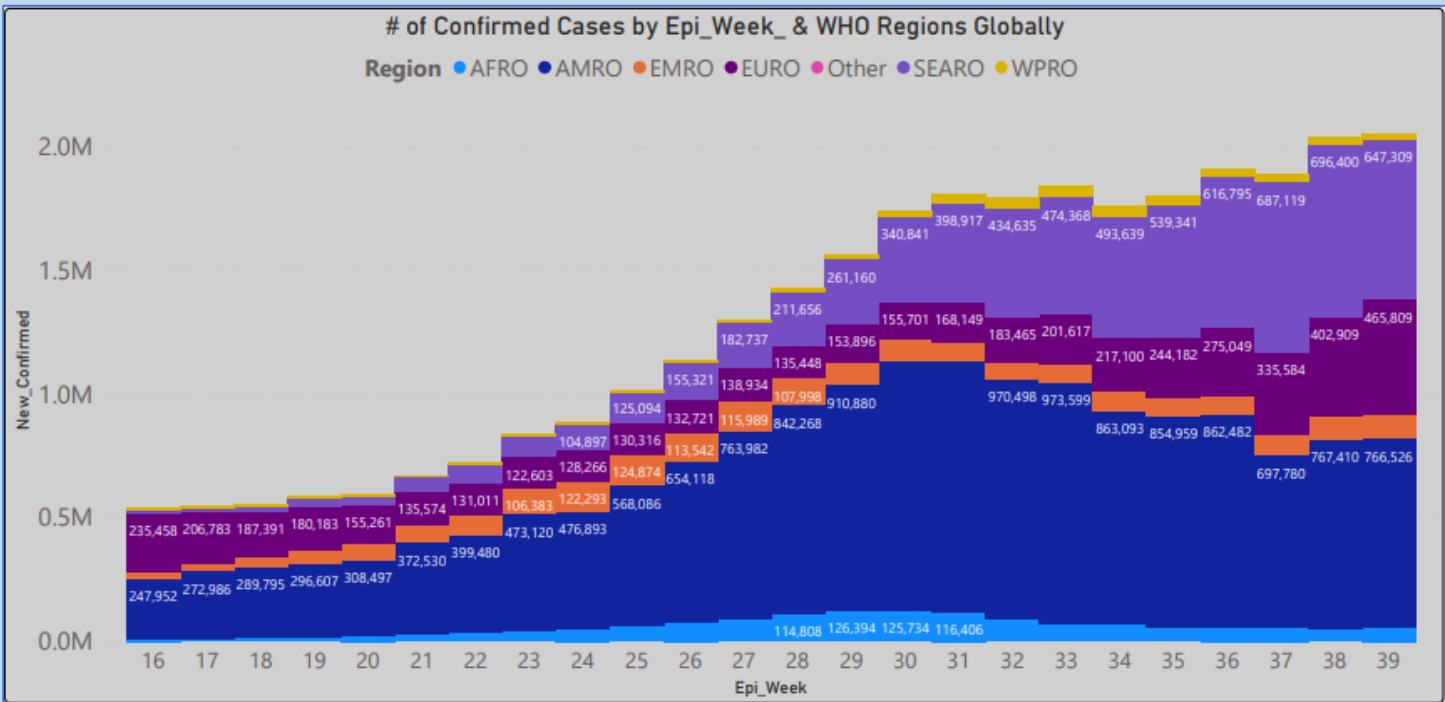
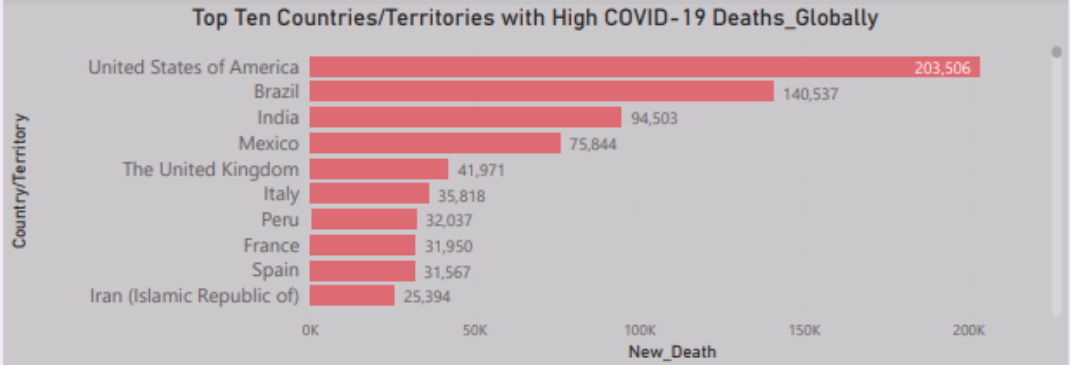
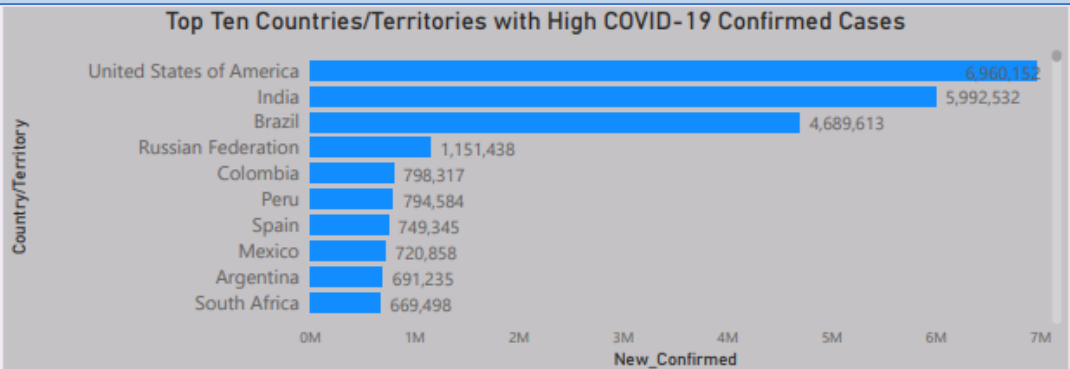


Fig. 1: COVID-19 Global Situation Update as of September 27, 2020 (Source: WHO)

of African Countries/Territories with COVID-19 Confirmed Cases

57

Total Number of Cases Confirmed in Africa

1,460,868

New Confirmed Cases in Africa with COVID-19_of Epi_Week

54,448

Total Number of Deaths in Africa with COVID-19

35,100

New Deaths in Africa with COVID-19_in Epi_Week

1,222

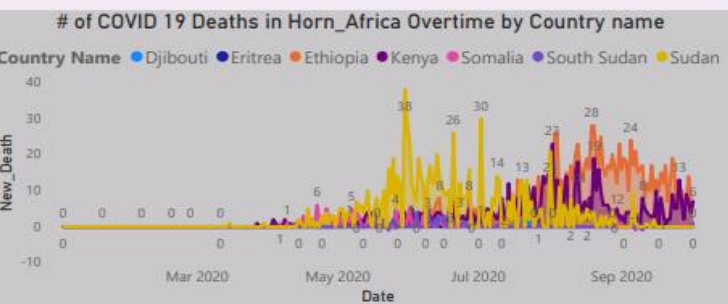
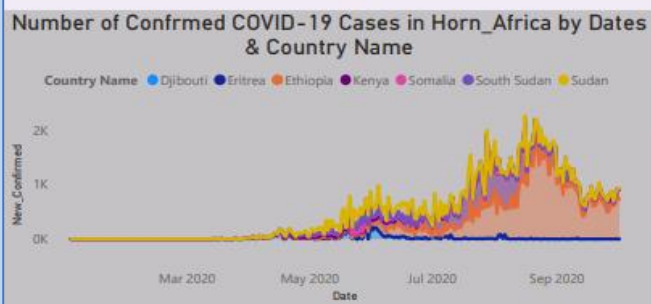
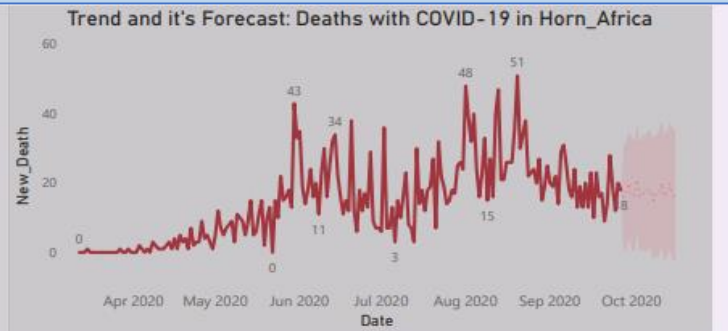
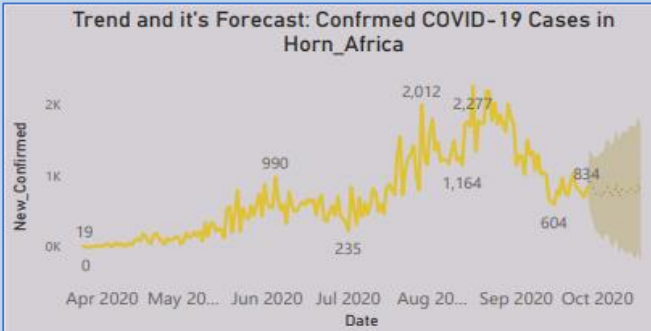
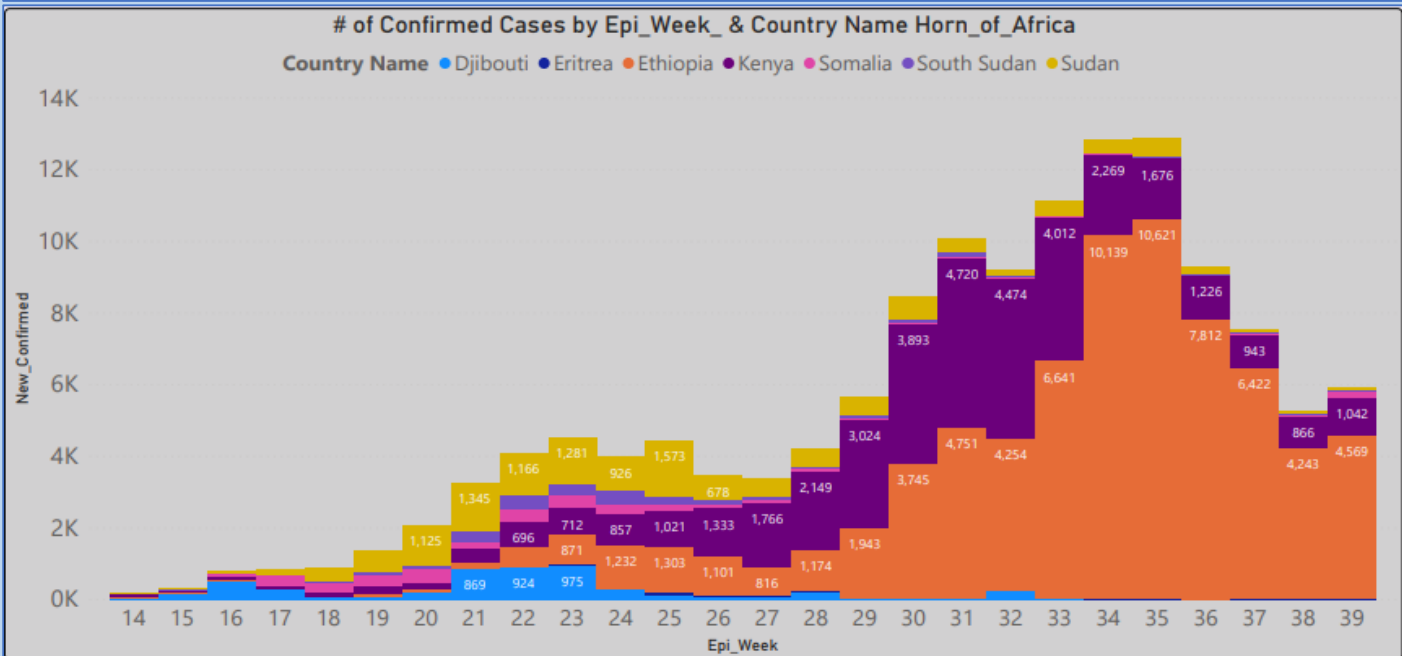
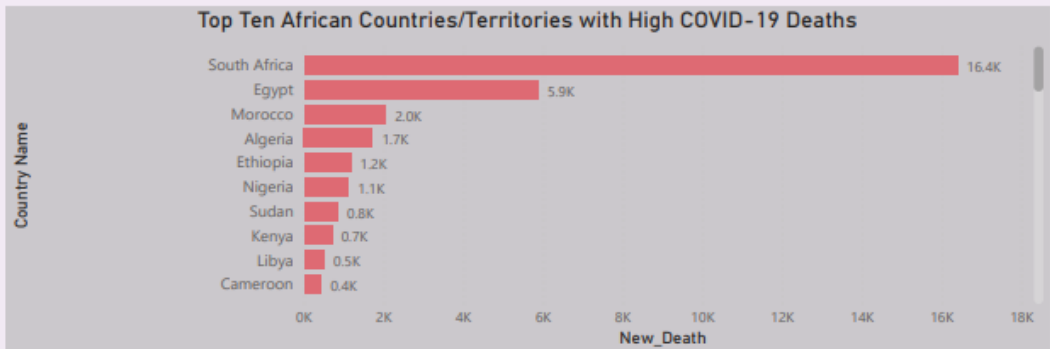
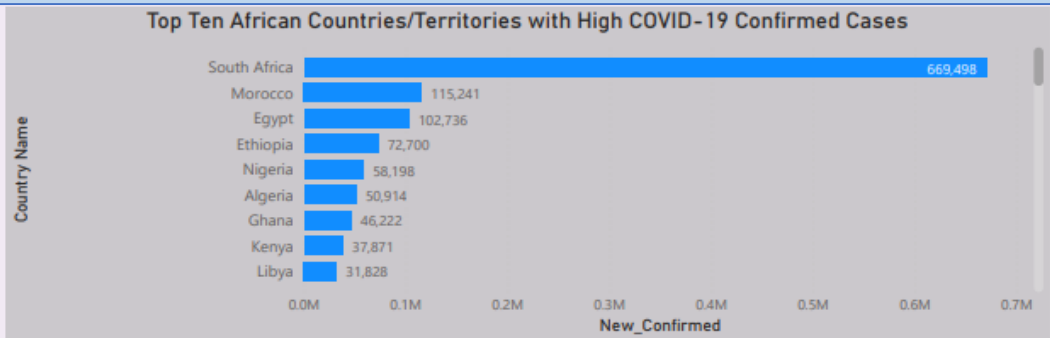


Fig. 2: COVID-19 Situation Update in Africa as of September 27, 2020 (Source: WHO)

National COVID-19 situation

- Four-thousand-five-hundred-twelve (4,512) newly confirmed COVID-19 cases (equivalent to that of Epi-Week-38) and 74 COVID-19 related deaths (10.84% decrease compared to that of Epi-Week-38) were reported during the WHO Epi-Week-39.
- As of September 27, a total of 73,332 confirmed COVID-19 cases and 1,170 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-39

Regions	New_Tested	New_Case	New_Admission	New_Death	New_Recovered	Positivity Rate	Admission_Rate
Addis Ababa	22549	1920	392	46	420	7.3	35.0
Oromia	7700	1223	245	8	331	18.0	25.9
SNNPR	6546	264	198	5	279	4.3	82.1
Amhara	6271	207	145	3	194	3.4	68.0
Tigray	4497	319	275	3	187	7.0	70.3
Sidama	1395	174	99	1	87	11.4	78.1
Diredawa	1256	118	41	2	15	12.1	56.9
Benishangul G	891	206	51	1	167	19.1	31.9
Somali	809	32	11	1	1	4.9	32.0
Harari	769	25	5	0	0	3.7	28.6
Afar	597	19	8	0	48	3.6	47.0
Gambella	84	5	2	0	42	2.0	57.3
Total	53364	4512	1472	70	1771	8.1	51.1

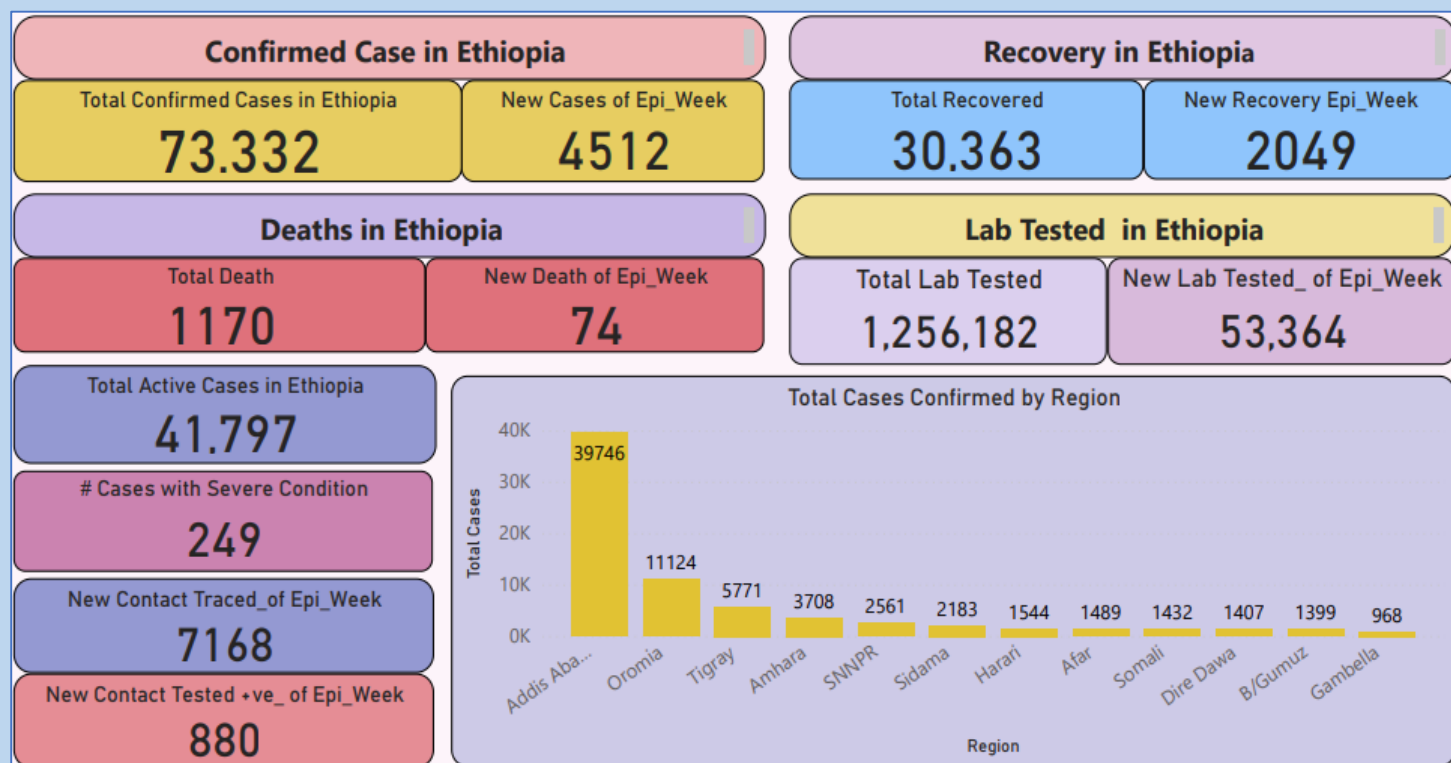


Fig. 3: Weekly summary of the COVID-19 situation in Ethiopia as of September 27, 2020, Ethiopia

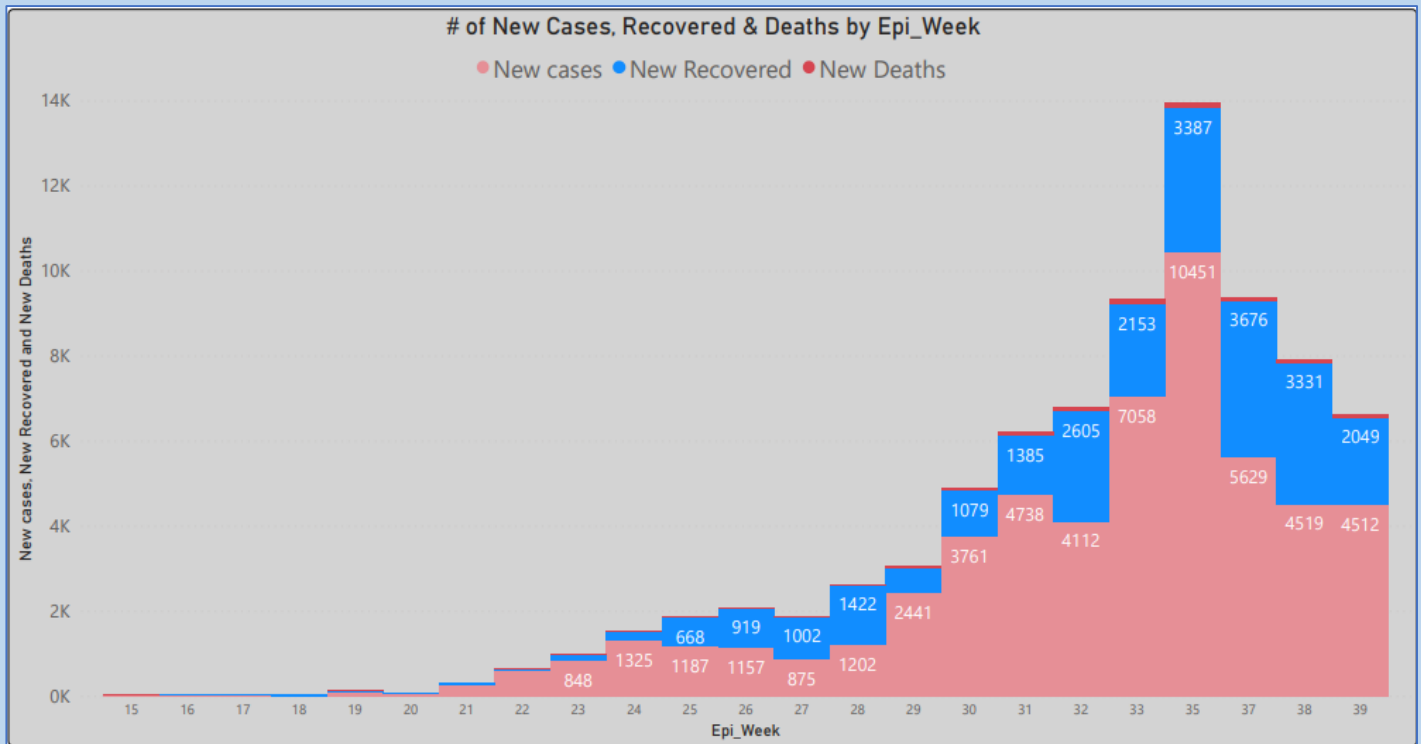


Fig. 4: COVID-19 confirmed cases, recovery and death by WHO Epi-Week as of September 27, 2020, Ethiopia

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.

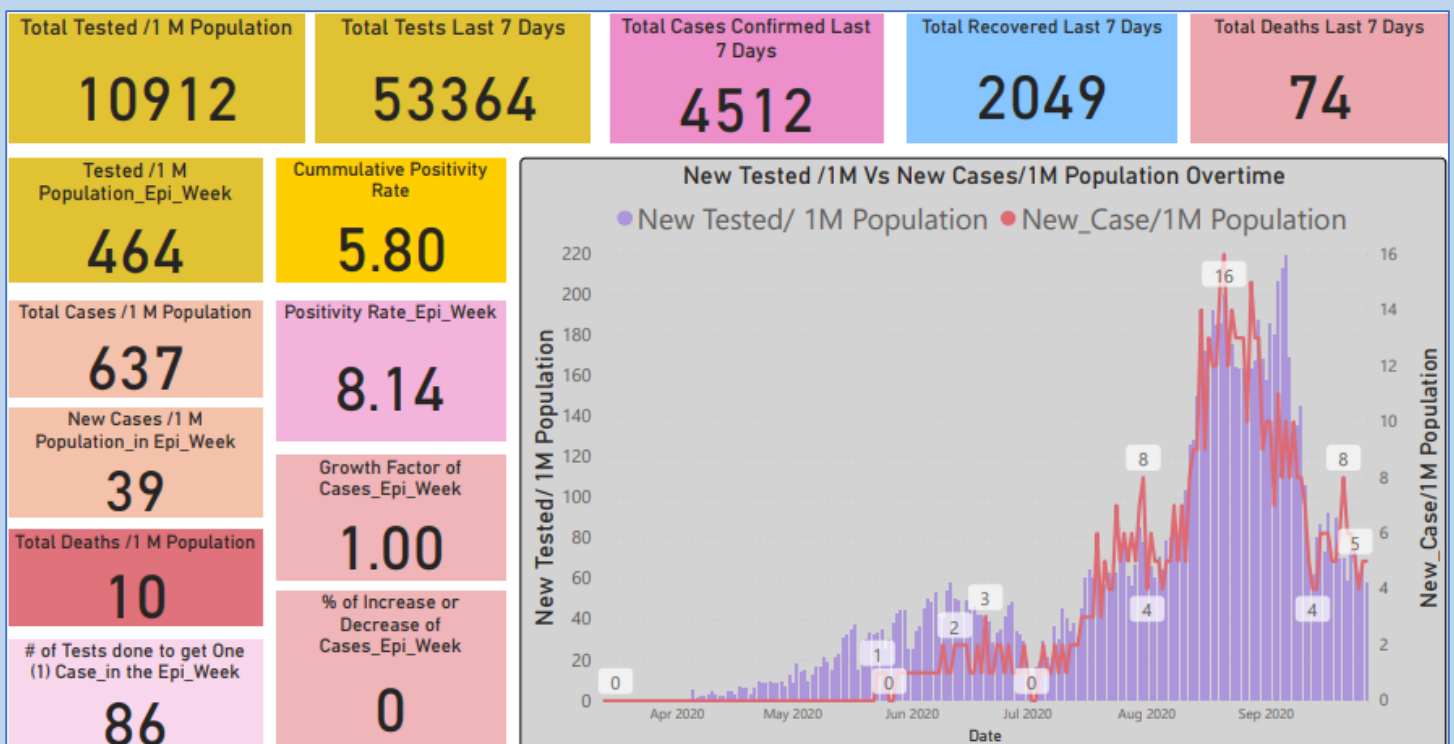


Fig. 5: Summary of COVID-19 confirmed cases in Ethiopia as of September 27, 2020.

Contact tracing and follow-up:

- As of September 27, 2020:
 - A total of 248,922 contacts of confirmed cases have been identified. Of these 6,487 contacts were identified in the WHO-Epi-Week-39.
 - Of total contacts, 215,543 (86.59%) have completed 14 days follow-up, while 14,089 contacts are still on follow-up.
 - 394 (0.16%) contacts have developed COVID-19 suggestive symptoms. Of these symptomatic contacts, 358 (90.86%) have tested positive.
- Overall, 17,822 (7.16%) of the contacts (symptomatic plus asymptomatic) have tested positive.
- Contacts contributed for the 24.30% of the total cases.

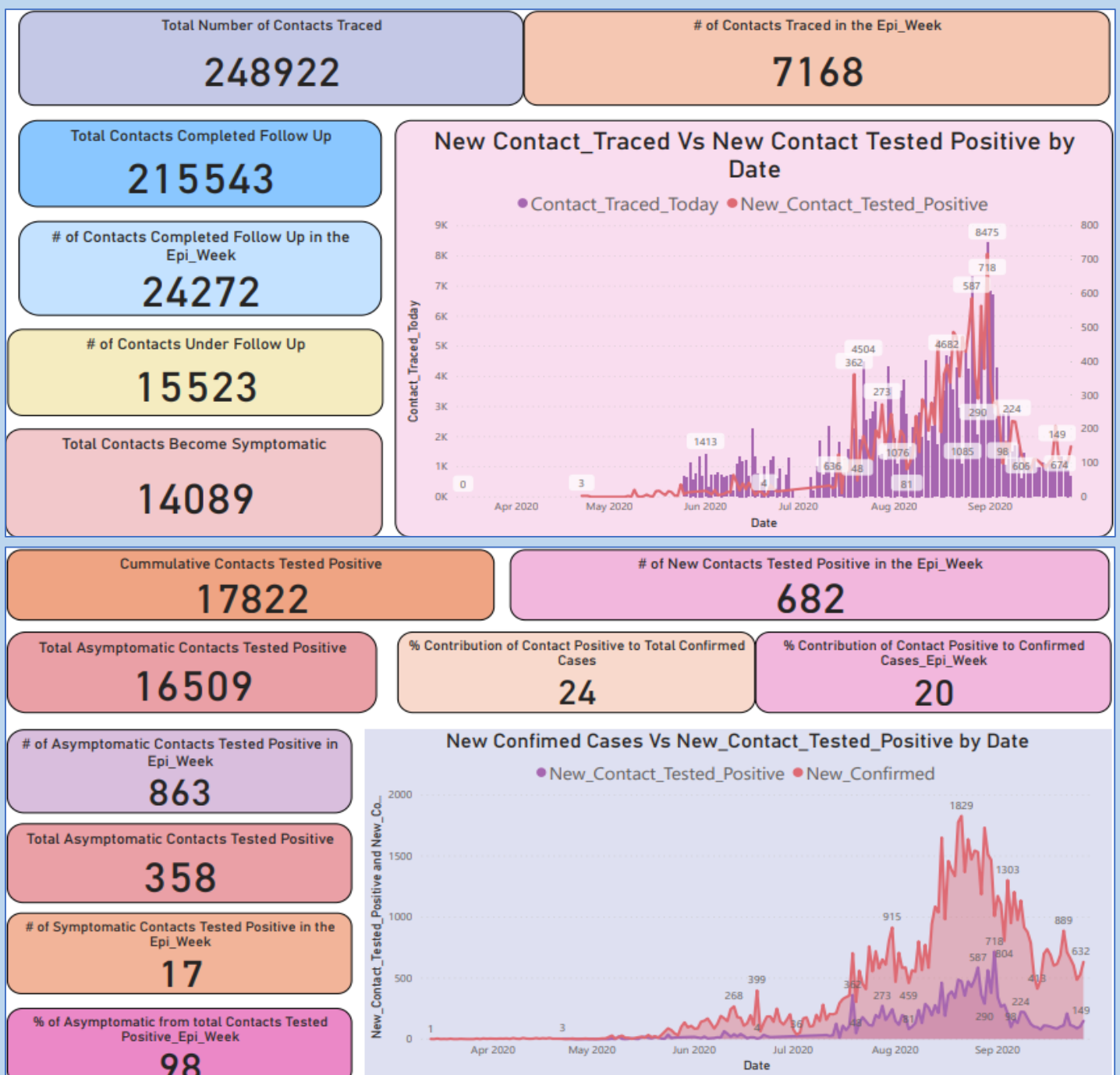


Fig. 6: Summary of COVID-19 contact tracing as of September 27, 2020, Ethiopia.

Rumors collection and verification from all sources

- As of September 27, 2020:
 - 276,528 rumors/alerts have been received and investigated. Of these, 9,350 rumors were reported in the WHO-Epi-Week-39.
 - 214,064 (77.41%) of the rumors/alerts have fulfilled the suspected case definition

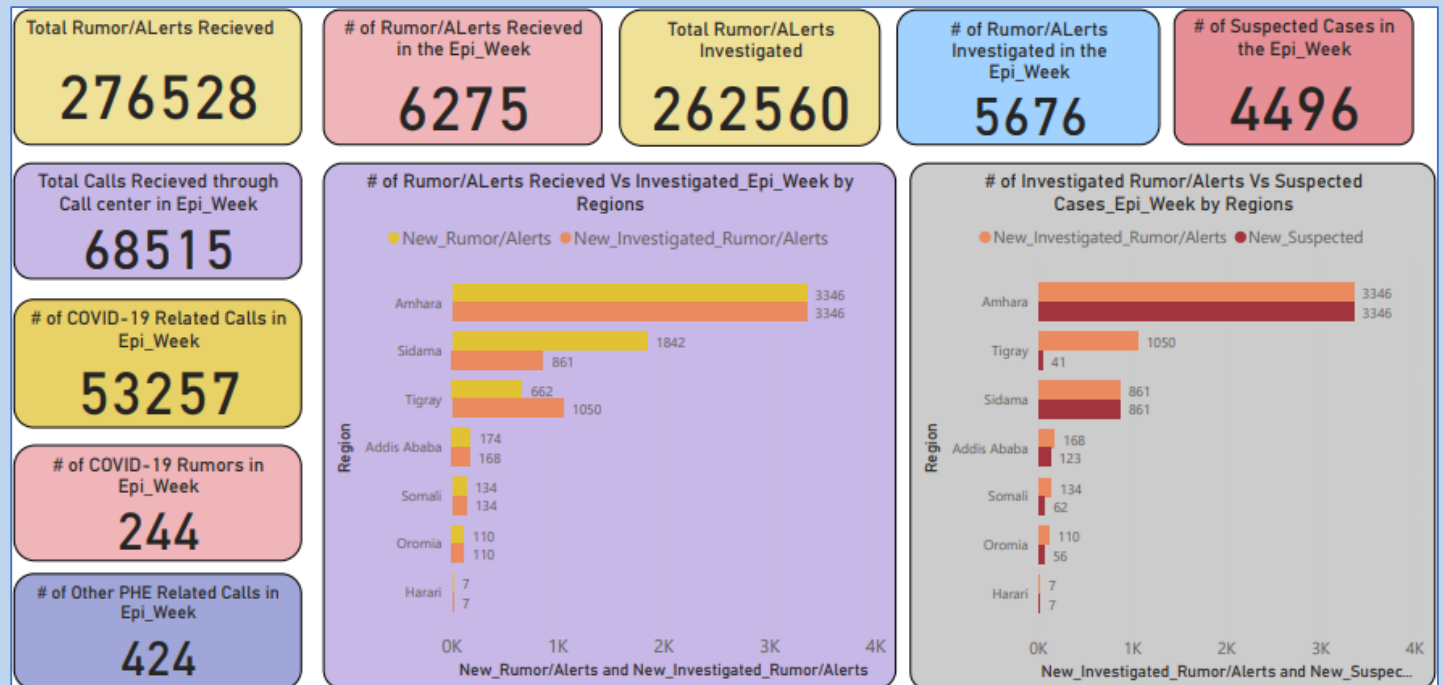


Fig. 7: Summary of COVID-19 rumor/alert investigation as of September 27, 2020, Ethiopia.

Point of entry and Quarantine related activities

- Since the start of the outbreak, 1,097,172 passengers have been screened at the Point of Entries of Ethiopia and 426,754 (38.90%) of them were screened at Bole International Airport.
- Of the total passengers screened, 25,085 are screened for COVID-19 in the Epi-Week-39.
- Nationally, 68,301 passengers have been quarantined since March 23, 2020 (when mandatory quarantine started). Of these, 33,993 (50.48%) passengers have been quarantined in Addis Ababa.
- Currently 562 passengers are in quarantine centers across the country.

Laboratory related activities

- As of September 27, 2020, a total of 1,256,182 samples have been tested for COVID-19 by laboratories across the country.
- 53,364 laboratory tests were processed during the WHO Epi-Week-39, which is a 17.66% decrease compared to that of Epi-Week-38.
- The weighted average laboratory test positivity rate for the WHO-Epi-Week-39 is 8.14%.
- The overall positivity rate for the laboratory test since the occurrence of the disease in the country is 5.84%.

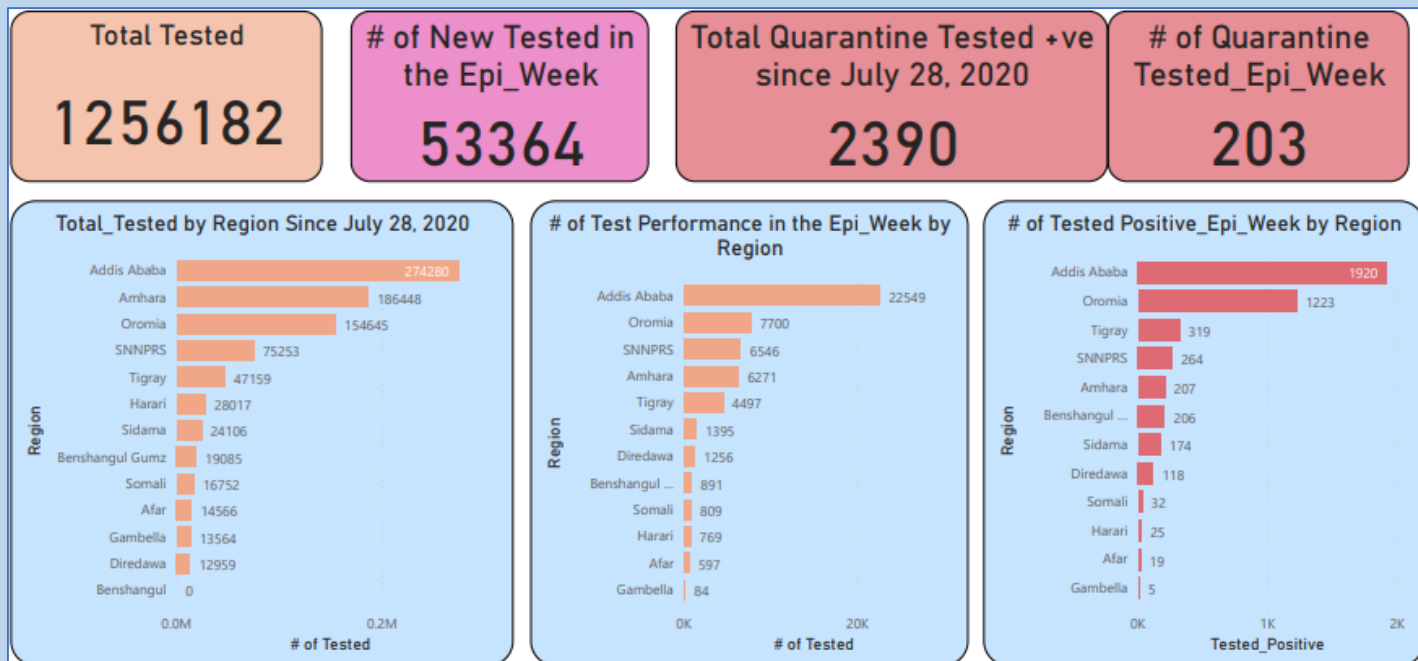


Fig. 8: Summary of COVID-19 laboratory testing as of September 27, 2020, Ethiopia.

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.
- Weekly leadership and strategic virtual meeting, chaired by the H.E MOH Minster, is being conducted to oversee and guide the response efforts.
- The COVID-19-response Incident Manager has stated during Meskel Holiday celebration that “we need to renew our commitment to fight COVID-19 and other public health emergencies to minimize the health, social and economic impact.

V. COVID-19 Vulnerable Population Protection:

- The main activities performed during the Epi-Week-39 are:
 - Technical Assistant assigned for six regions, namely Amhara, Benishangul Gumuz, Tigray, Afar, Addis Ababa and Dire Dawa to optimize technical support.
 - Joint interventions were conducted in response to COVID-19 confirmed case management at Gefersa Mental health rehabilitation center and center of rehabilitation and people with disability.

VI. Case Management and IPC

- Of the active cases, 249 (0.60%) patients are in severe clinical condition.

Home Based Isolation and Care (HBIC):

- So far, total of 18,069 COVID-19 confirmed cases have been on HBIC. Of them, 12,005 (66.44%) have recovered and five died.
- Of these, 1619 cases are enrolled to HBIC, 2053 cases have recovered and one case died on the WHO-Epi-Week-39.
- Currently 6,084 cases are on HBIC.
- So far, 168 of the cases have been transferred from treatment centers to HBIC after improvement.
- So far, 146 of the cases have been transferred from HBIC to treatment centers for better care.

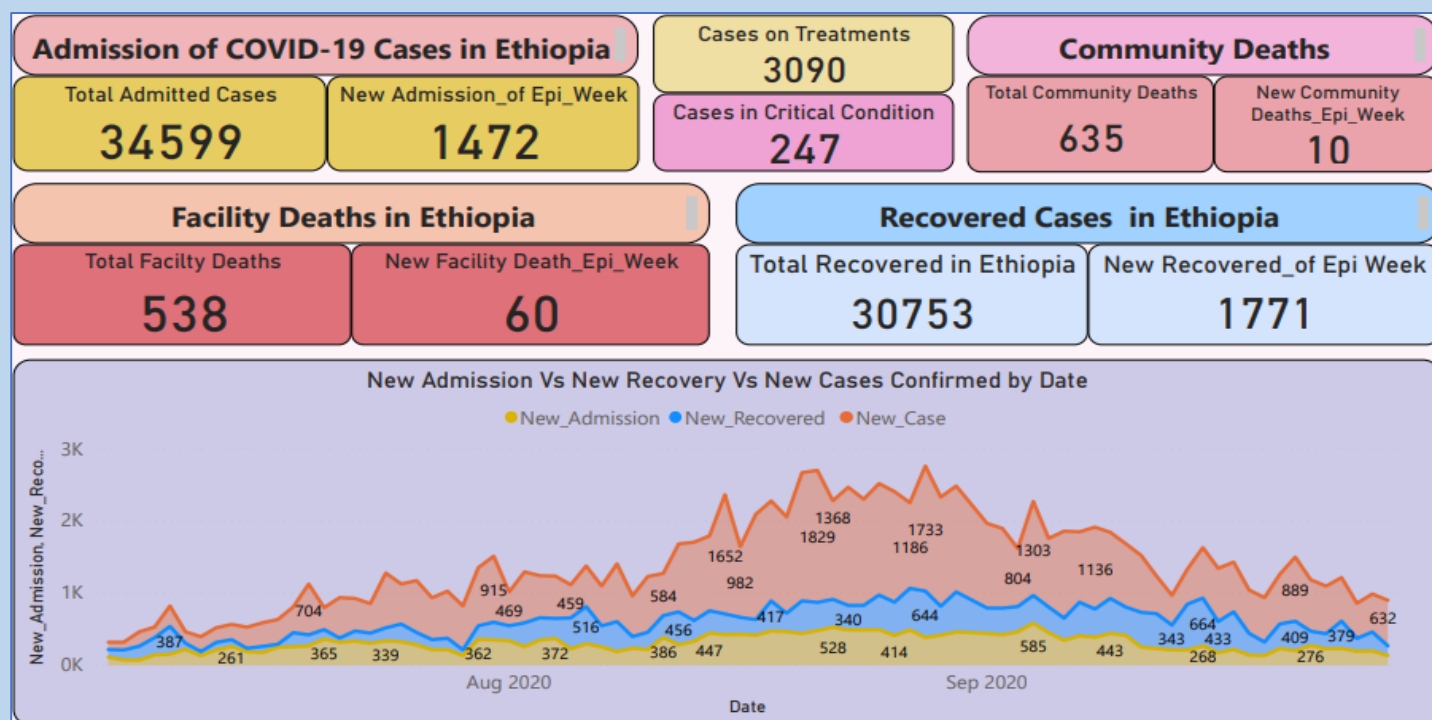


Fig. 9: Summary of case management update as of September 27, 2020.

VII. Risk Communication and Community Engagement (RCCE)

- Daily press statement is being given on COVID-19 situation on daily basis through Mass Media.
- During the Epi-week-39:
 - Dire Dawa City Administration Regional Health Bureau with *Save Dire COVID-19 volunteers* conducted different activities on COVID-19 prevention measures during Meskel celebration at "MIDIR BABUR square". Hand washing materials and hand sanitizer availed and More than 35 volunteers were mobilized.
 - Volunteers engaged by facilitating hand washing for meskel celebration in Benishangul Gumuz region.



Fig. 10: Meskel holiday celebration in Benishangul Gumuz and Dire Dawa wearing facemask and hand washing.

- Live panel discussion conducted at Ethiopian Broadcasting Corporation (tenawo bebtewo): <https://www.facebook.com/EBCzena/videos/980882129058797>
- Sensitization workshop to plan for RCCE during school reopening was conducted.



Fig. 11: Sensitization workshop to plan for RCCE during school reopening, September 25, 2020

- Review meeting and discussion was held with Health Extension Workers' coordinators from Oromia region to boost performance of training.
- Focused group discussion on mobile health extension workers training conducted with selected urban and rural Health extension workers on good participate and challenges of training



Fig. 12: Focused Group Discussion on mobile-based training (on the left-hand side) and Performance review meeting with HEWs from Oromia region (right hand side), September 23, 2020

- Media houses (EBC, Nahoo TV, Ethio FM, Ethiopian press agency) visit conducted at Debrebirhan COVID-19 treatment centers.
- Two clients who recovered from the COVID -19 critical care center provided their testimonial messages on COVID -19.



Fig. 13: Sample of community members interviewed and testimonies after recovery, September 2020

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

እንኳን ለብርሃን መስቀሉ በሰላም አደረሳችሁ!
በዓሉን ስናከብር ራሳችንንም ሆነ የምንወዳቸውን ወገናችንንን ከኮቪድ-19 እየተከላከልን ይሁን!

አሁንም አጠቃቀሙ!
የአፍና አፍንጫ መሸፈኛዬን የማይርገው ራሴንና ቤተሰቤን ከኮቪድ ቫይረስ ለመከላከል ነው!

ሁሉም የሚያምረው ጤና ሲኖር ነው!
በየትኛውም ቦታ የሚያደረጉት መሰባሰብ ለኮቪድ ቫይረስ ያጋልጣል!

የኮቪድ ቫይረስ መከላከያ መንገዶች
በየትኛውም ቦታ በ2 የአዋቂ እርምጃ ርቀትን ይጠብቁ

Isinan jaaladha! Isiinitti hin dhiyaadhu!
Baga Geessan!

- Fageenya Keessan Eggadhaa
- Afaani fi Furiyaan Haguuggadhaa
- Harka Keessan Sirnaa Dhiqqadhaa
- Ofii fi maatii keessan Koronaa Irraa Eggadhaa

ማንንም ማጣት አልፈገም!
በኮቪድ ቫይረስ ምክንያት እንድም የቤተሰቤ አባል እና ወዳጄን እንዳላጣ ጥንቃቄዬን አጠናክራ እቀጥላለሁ!

VIII. Logistic and Supplies

- There are ongoing distribution of pharmaceuticals and medical supplies to quarantine, isolation and treatment centers.
- Number of governmental and Non-Governmental organizations, private institutions, individuals and partners have been donating different medical supplies and infrastructures for COVID-19 response.

IX. Training and Orientation Activities

- There is ongoing training and orientation for the public and health professionals on COVID-19.
- During the Epi-week-39:
 - Religious leaders and elder sensitization workshop on COVID-19 prevention and control conducted at Wolayita Sodo for participants from Gamo and Gofa zones and Konta special woredas.
 - Four days (September 24-27, 2020) Home-Based Isolation and Care (HBIC) TOT for health professionals provided in Bahir Dar town for 20 health professionals from Amhara region.
 - Two days (September 24-26, 2020) training on HBIC provided for 19 health professionals to be assigned on HBIC toll free hotline to provide Mental Health and Psychosocial Support (MHPSS) for home isolated cases in Addis Ababa.

X. Challenges and Way Forward

Challenges

- Weak adherence to physical distancing and other preventions advised by the public.
- Increasing number of cases being detected in the community and by dead body surveillance and testing.
- Low stock status of personal protective equipment is still a problem.

Way Forward

- Advocate and strengthen Home Based Isolation and Care (HBIC).
- Conduct intensive testing of high-risk areas 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.
- Identify and establish additional case treatment centers and quarantine sites, especially in regions.
- Strengthen and sustain essential health services other than COVID-19.

XI. 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>Biomarkers and outcomes of COVID-19 hospitalizations: systematic review and meta-analysis http://dx.doi.org/10.1136/bmjebm-2020-111536</p>	<ul style="list-style-type: none"> The study found a significant association between lymphopenia, thrombocytopenia and elevated levels of CRP, PCT, LDH, D-dimer and COVID-19 severity. The results have the potential to be used as an early biomarker to improve the management of COVID-19 patients, by identification of high-risk patients and appropriate allocation of healthcare resources in the pandemic.
<p>Short- and Potential Long-term Adverse Health Outcomes of COVID-19: A Rapid Review https://doi.org/10.1080/22221751.2020.1825914</p>	<ul style="list-style-type: none"> Major adverse outcomes were found to affect different body systems: immune system (including but not limited to Guillain-Barré syndrome and paediatric inflammatory multisystem syndrome), respiratory system (lung fibrosis and pulmonary thromboembolism), cardiovascular system (cardiomyopathy and coagulopathy), neurological system (sensory dysfunction and stroke), as well as cutaneous manifestations, impaired hepatic and renal function. Mental health in patients with COVID-19 was also found to be adversely affected. The burden of caring for COVID-19 survivors is likely to be huge. Therefore, it is important for policy makers to develop comprehensive strategies in providing resources and capacity in the healthcare system.
<p>Association Between Administration of Systemic Corticosteroids and Mortality Among Critically Ill Patients With COVID-19 A Meta-analysis doi:10.1001/jama.2020.17023</p>	<ul style="list-style-type: none"> Findings: In this prospective meta-analysis of 7 randomized trials that included 1703 patients of whom 647 died, 28-day all-cause mortality was lower among patients who received corticosteroids compared with those who received usual care or placebo (summary odds ratio, 0.66). Meaning: Administration of systemic corticosteroids, compared with usual care or placebo, was associated with lower 28-day all-cause mortality in critically ill patients with COVID-19.
<p>The trend of cutaneous lesions during COVID-19 pandemic: lessons from a meta-analysis and systematic review https://doi.org/10.1111/ijd.15154</p>	<ul style="list-style-type: none"> The estimated prevalence of cutaneous manifestations in COVID-19 was 5.69%. Other manifestations were urticaria, chilblain-like lesions, livedo reticularis, and finger/toe gangrene. Although it is premature to conclude the prevalence of the cutaneous manifestations during this ongoing pandemic, our report may be a stimulating factor for the

	physicians to perform further vigilant streamlined reporting of cutaneous manifestations in COVID-19 patients to estimate the final prevalence.
Antiviral mouthwashes: possible benefit for COVID-19 with evidence-based approach https://dx.doi.org/10.1080%2F20002297.2020.1794363	<ul style="list-style-type: none"> • The antiviral mouthwashes play a certainly important role in reducing the viral load of the salivary virus. • In the present study, this importance could be proved in two different aspects, that is, the use of mouthwash before dental procedures to reduce the risk of transmission of the virus to the dental team and the use of this mouthwash in COVID-19 patients to help improve systemic problems associated with oral microbial flora.
Smoking and Risk of Negative Outcomes Among COVID-19 Patients: A Systematic Review and Meta-Analysis https://ssrn.com/abstract=3634871	<ul style="list-style-type: none"> • Findings: Both current smoking and former smoking can significantly increase the risk of disease severity without appearance of heterogeneity. • There was no evidence of publication bias which was detected by the funnel plot, Begg's test and Egger's test. • For death as an outcome, current smoking does not significantly increase the risk • Interpretations: the meta-analysis demonstrated that smoking significantly increases the risk of disease severity and tend to increase the risk of death.
Vascular Thrombosis in Severe COVID-19: A Multicenter Study https://ssrn.com/abstract=3634854	<ul style="list-style-type: none"> • COVID-19 is associated with a significantly higher prevalence of vascular thrombosis compared with non-COVID-19 viral pneumonias. • Despite this, vascular thrombosis was not linked to poorer short-term prognosis in those 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.eph.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.eph.gov.et

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