



# ETHIOPIA: COVID-19 Humanitarian impact Situation Update No. 8

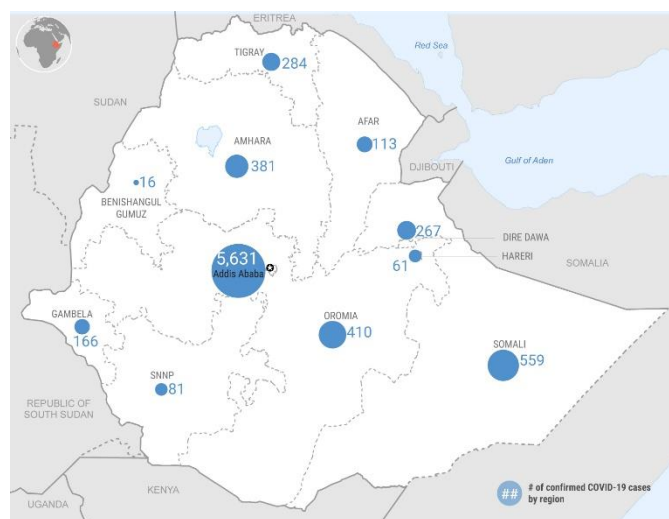
As of 13 July 2020



This report is prepared under the auspices of the National Emergency Coordination Center for COVID-19 response, led by the National Disaster Risk Management Commission (NDRMC), supported by OCHA Ethiopia with participation of Cluster Coordinators. It covers the period from 19 June - 13 July 2020.

## HIGHLIGHTS

- The COVID-19 outbreak is gaining pace in Ethiopia, with cases and fatalities continuing to rise. As of 13 July, the number of confirmed cases in Ethiopia has risen to 7,969 compared to 3,954 on 18 June. (Source: MoH/ Ethiopia Public Health Institute, EPHI).
- From June 15 – 20, the National Emergency Coordination Center (NECC) in cooperation with humanitarian partners conducted a multi-cluster assessment in quarantine centers (QCs) and points of entries (POEs) in seven regions and one city council.
- On 19 June, the Government eased quarantine regulations by announcing that “all travelers arriving at Bole International Airport in Addis Ababa carrying a certificate of negative PCR SARS-CoV-2 test, done up to 72 hours before arrival, will be able to follow the 14-day quarantine at home after giving sample upon arrival. Travelers and returnees with no certificate of negative PCR SARS-CoV-2 test results will be quarantined for 7 days in the designated sites, tested, and then able to self-isolate for additional 7 days at home.”
- The epidemic and subsequent prevention and containment measures have impacted the humanitarian response in the country. National clusters have estimated their activities have decreased by 7 per cent in 81 *woredas*. The Education sector was hit hardest by delayed activities, West-Wellega zone most impacted due to delayed protection activities.
- Government’s movement restrictions related to COVID-19 (State of Emergency- SoE) have been eased allowing inter-regional movements throughout the country. Humanitarian partners can operate without restrictions while respecting the mandatory use of masks and respecting social distancing in their activities. Tigray region, which has its own SoE measures, has exempted humanitarian missions from the 14-days mandatory quarantine measure, in place since April.
- Partners have expressed concern on the risk of relocating IDPs during COVID-19. As of 13 July, nearly 24,000 IDPs who were displaced by inter-communal conflict in 2017/ 2018 were returned by the government from Tuliguled district, Jijiga town, and Qoloji IDP site in Somali region to various areas in Chinaksen district of East Hararge zone, Oromia region, while over 45,000 IDPs were returned to Tuliguled district in Somali region. In Metekel zone, Benishangul Gumuz region, over 28,000 IDPs were returned from Amhara region and internally from within various districts in the zone.
- The Government of Japan donated over US\$4 million to Ethiopia, as part of its emergency assistance for the fight against the COVID-19 pandemic. The funds were channeled through UNICEF.
- The first progress report of the Global Humanitarian Response Plan (GHRP) for COVID-19 was released on 1 July. The plan required \$7.32 billion, out of which \$506 million is for Ethiopia. As of 30 June it has received some \$1.60 billion (24 per cent). For further updates: <https://fts.unocha.org/appeals/952/summary> and for GHRP first addition <https://reliefweb.int/report/world/global-humanitarian-response-plan-covid-19-april-december-2020-progress-report-first>



Source: EPHI  
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

## SITUATION OVERVIEW

The multi-agency assessment on quarantine centers and point of entries was conducted from June 15 – 20, 2020 in seven regions and one city council (Afar, Amhara, Benishangul Gumuz, Gambela, Oromia, Somali and Dire Dawa). Critical gaps were identified in food, shelter/NFI, WASH and lack of PPEs. The report has been distributed to line ministries and clusters to review the findings and take appropriate actions and is available at: <https://bit.ly/2OWPaBa>

Humanitarian needs in Ethiopia have increased as a result of COVID-19, the impact of the desert locust infestation, floods, and changes to the displacement landscape. The epidemic and subsequent prevention and containment measures have impacted the humanitarian response in the country. Seven out of eight National Clusters have estimated their activities have decreased by 7 per cent in 81 districts. The Education sector was hit hardest by delayed activities, while West-Wellega zone was most impacted due to delayed protection activities.

According to WHO regional office for Africa weekly bulletin (from 15-21 June 2020), the COVID-19 outbreak continues across the Africa region. The daily caseload remains high, albeit with a continuous decrease in the overall case-fatality ratio. The distribution of transmission in the region has shown little change in the past two weeks; 27 countries are experiencing community transmission, 13 have clusters of cases and seven have sporadic cases of COVID-19. Cholera, yellow fever and measles outbreak are also being reported in Ethiopia. A total of 8,191 cholera cases with 112 associated deaths have been reported from six districts in SNNPR and two districts in Oromia region. The measles outbreak is also ongoing in Oromia, Amhara and Tigray regions. A total of 575 suspected cases and 7 deaths were reported with the majority of suspected cases being reported from the Oromia region.

According to IOM, despite border closures and movement restrictions in the region due to the COVID-19, incoming movements (62 per cent) are significantly higher than outgoing ones (38 per cent). A total of 1,168 people were observed leaving Ethiopia, of which 474 (41 per cent) were going to Somalia, while 1,881 entered Ethiopia, of which 892 (47 per cent) were from Djibouti. The incoming movement from Djibouti is unusual and likely related to unsuccessful attempts to cross to Yemen/ Kingdom of Saudi Arabia (KSA). The majority of the observed population was male (72 per cent), while 28 per cent was female. 4 per cent of those moving were children, out of which close to three quarters were boys.

According to the Logistic Cluster, Addis Ababa Humanitarian Air Hub transported more than 425 metric tons (MT) of medical supplies and equipment to 53 countries in Africa on behalf of humanitarian agencies. Logistic cluster constructed four Mobile Storage Units (MSUs) screening centers and waiting areas for truck drivers at the Djibouti border areas of Deweleand Galafi and installed three flosspans and one mobile storage unit within the Ethiopian Public Health Institute (EPHI) for the storage of medical supplies and equipment.

The INGO CARE has released a Rapid Gender Analysis (RGA) for COVID-19, which shows how women are most likely to be adversely affected than men, as they earn less and are over-represented in the informal sector employment. Likewise, Sexual and Gender-Based Violence (SGBV) has increased related to tensions at household level, due to 'lockdown' at home, while services to survivors have been disrupted or become inaccessible due to COVID-19 restrictions. The RGA also highlighted the loss of household income, higher risk of violence in the household and lack of access to schooling exacerbated the occurrence of child marriage. The Bureau of women, children affairs of Amhara has recently rescued more than 500 girls from child marriage in northern Ethiopia. Overall, nearly 25 million pre-primary, primary, secondary and tertiary level learners are staying at home following the shutdown of schools throughout Ethiopia.

## 2020 HRP - FUNDING STATUS

Contributions as per the updated  
2020 HRP financial requirements, by sector (as of 7 July 2020)  
US\$1.65 billion requested

### In-country 2020 HRP Funding Update



| Sector/Cluster                             | Funding Received (in million US\$) | % Overall Covered | Requirements (in million US\$) |
|--|------------------------------------|-------------------|--------------------------------|
| Food                                       | 207.8                              | 27%               | 773.4                          |
| Nutrition                                  | 62.7                               | 25%               | 252.6                          |
| Health                                     | 10.9                               | 6%                | 195.0                          |
| ESNFI                                      | 0.7                                | 1%                | 105.4                          |
| WASH                                       | 10.0                               | 10%               | 95.5                           |
| Agriculture                                | 5.9                                | 8%                | 73.7                           |
| Logistics                                  | 1.8                                | 3%                | 59.7                           |
| Protection                                 | 1.1                                | 2%                | 47.6                           |
| Education                                  | 2.8                                | 8%                | 35.4                           |
| Coordination                               | 3.1                                | 26%               | 12.0                           |
| Sector not specified                       | 47.4                               | -                 | -                              |
| Multiple sectors (breakdown not specified) | 122.2                              | -                 | -                              |

All humanitarian partners, including donors and recipient agencies, are encouraged to inform OCHA's Financial Tracking Service (FTS - <http://fts.unocha.org>) of cash and in-kind contributions by e-mailing: [fts@un.org](mailto:fts@un.org)

## IMPACT OF COVID-19 ON HUMANITARIAN RESPONSE – BY REGION

### Afar, Amhara and Tigray regions

#### Situation Overview

- As of 13 July, confirmed cases in Afar reached 113, Amhara 381 and Tigray 284. Most of the cases in Amhara region have a travel history with four cases from the quarantine center. In Tigray region, most of the cases are reported among the daily laborers, cross border truck drivers, health workers, refugees and returnees from neighboring countries.
- In Tigray region, house to house surveillance continues in Maycadra while in Mytsebri woreda, the lockdown was imposed after five confirmed cases were reported in the Adi-Harush refugee camp. Community transmission is also increasing particularly in the Western and Eastern zones.
- Quarantine Centers (QCs) in Korem and Alamata are sub-standard with the shortage of rooms, latrine and insufficient PPE and food. Also, North West, Western and Central zones reported absence of PPE for the front line medical staff.

#### Humanitarian Impact

- COVID-19 prevention measures among the refugee population are reportedly slowing down the WFP distribution in the four refugee camps in Shire town in Tigray region.
- There is a shortage of PPE for front line medical staff in North West, Western and Central zones.

#### Actions Taken

- The Amhara regional government has established the Emergency Coordination Center (ECC) in Bahir Dar to facilitate multi-sectoral COVID-19 prevention and response activities, and an Incident Command System (ICS) in Metema town, West Gonder zone. It has allocated ETB 6.75 million (equiv. USD193,438) for COVID-19 response.
- The National ECC in collaboration with partners conducted COVID-19 multi-sectoral assessment in Afar and Amhara regions to observe and identify the current standard of services at PoE and QCs.
- A new COVID -19 testing laboratory has been set up in the Western zone and a treatment center has also been opened in Maicadra in Tigray region.
- Amhara Development Association (ADA) received 11,500 face masks donation from Ethiopian citizens in America and handed them over to the regional authorities
- Tigray regional health bureau dispatched a team to Adi-Harush/ Mytsebri camp following first confirmed COVID-19 case.
- The ES/NFI Cluster distributed jerry cans, blankets, plastic sheets, mats, mosquito nets, laundry soaps in quarantine facilities in Shire and Axum centers but huge gaps remain in these facilities.
- The Community Volunteers in Tigray region continue to mobilize resources to provide food and sanitizing materials to the neediest people in various *kebeles* in the region.
- The regional ECC transported 2 water tankers (capacity of 10,000 liters) for COVID-19 response in Metema QCs.

### Eastern Oromia, Dire Dawa, Harari, Somali region

#### Situation Overview

- As of 13 July, the total number of confirmed cases in Somali region reached 559, Harari region 61 cases and Dire Dawa 267. Similarly, four confirmed cases have been reported from East and West Hararge zones or Oromia region.
- In Shabelle and Korehey zones, Somali region, partners report limited coordination, and the lack of technical staff as well as food assistance to returnees.
- According to the Fafan zonal administration (Somali region), over 23,000 IDPs from Somali region have been returned to Chinaksen woreda, Oromia region and over 45,000 IDPs have been returned from Qoloji site, Chinaksen and Jijiga to Tuliguled in Somali region. Inter-agency 'go-and-see' missions to bother Tuliguled and Chinaksen districts identified huge gaps in provision of services including food, shelter, non-food items, healthcare and livelihoods to the returnees.

#### Humanitarian Impact

- Lack of essentials items reported in QCs of Shebelle, Korehey and Dollo.
- The collapse of the Malkaguba Bridge in the Negele - Hudet road continues to prolong road travels to Moyale and Dawa zone. Reportedly, it takes partners two and a half days to reach beneficiaries in those areas.
- Absence of humanitarian partners in Harari region is affecting COVID-19 response.

#### Actions Taken

- The Somali regional government has established the Emergency Coordination Center (ECC) in Jijiga to facilitate multi-sectoral COVID-19 prevention and response activities, and an Incident Command System (ICS) at Jijiga University.

- The joint ECC-led assessment team completed assessment to all selected QCs and PoE. Shortages of PPEs and food, drinking water and transportation were identified as major challenges.
- The health and nutrition cluster has been activated in Dollo zone. These clusters will also be activated in Korehey zone.
- Jijiga University allocated 35 blocks for returnees' accommodation. The Regional Health Bureau (RHB) cleaned 11 blocks and disinfected 18 blocks out of the 35.
- Save the Children (SCI) organized three days of surveillance training for Kebrideher health workers, community volunteers and the *kebele* administration in Kebrideher city to help in improving active case search and reporting mechanisms of COVID-19 in Kebrideher city.
- NRC distributed PPE, hygiene and sanitation items to 1500 HHs (300HH in Softy kebele, 250HH in Dollo Ado, 300HH in Dollo Bay, 250HH in Bokolmayo, 200HH in Helaweyn and 200HH in Bur amino).
- In Shebelle zone, Gode city health department is continuously sensitizing the Gode town community with key COVID-19 prevention messages.

## Southern Oromia, and Southern Nations, Nationalities, and Peoples' Region (SNNPR)

### Situation Overview

- In SNNPR, as of 13 July, COVID-19 confirmed cases reached 81. The highest number of confirmed cases are from Sidama zone and few are Hawassa city administration. The number of -19 recoveries in SNPR increased to 12 (from Sidama Silte and Wolayita, Guraghe, Kembata Tembaro, Hadya and Halaba zones).
- In SNNPR, close to 61 per cent of the population has been screened for COVID-19 through Community Based Surveillance (CBS). Gaps have been identified in terms of logistics, capacity building, the standard of quarantine and isolation centers, expansion of laboratories and absence of improved strategies on Risk Communication and Community Engagement (RCCE) and support on Point of Entries (PoEs) to address COVID-19 pandemic in the region.
- In Southern Oromia's Borena zone, four new COVID-19 cases were confirmed, in the reporting period, while livestock prices have increased by 20 per cent and crop prices by 5 – 10 per cent. In West Guji, moderate Genna, seasonal rainfall continued after a four-day dry period.

### Humanitarian impact

- In SNNPR, the performance of the *Belg* rainfall is consistently good but caused some floods. Around 259 people were displaced and 15 houses damaged in Decha *woreda*, Keffa zone.
- In Southern Oromia, there remain limited access to remote kebeles in Borena zone. Police advised humanitarian actors to restrict missions to towns of Dhas, Guchi, Arero and Wachile *woredas*.

### Actions Taken

- Regional Health Bureau, WHO and Hawassa College of Health Science and Medicine trained 50 health professionals on COVID-19 and dead body management at Mizan Teferi town. Similarly, 22 health professionals were trained on mental health and psychosocial support at Hawassa town.
- In SNNPR, the INGO WVI is distributing food to some 192,500 beneficiaries in 12 *woredas* in the region. In Abaya and Birbirs Kojowa *woreda*, West. Guji zone, the first and second round food distribution completed.
- Food distribution started in Bule Hora, Gelana and Hambela Wamena *woredas*. Government is also dispatching food to Kercha *woreda*.

## Western Oromia, Benishangul Gumuz (BGR) and Gambella regions

### Situation Overview

- As of 13 July, the total number of confirmed COVID-19 cases in Benishangul Gumuz Region reached 126 and Gambella 166. In Gambella, most of the cases are from Gambella town.
- Over 36,000 Households in Gambella have been screened for COVID-19 through Community Based Surveillance.
- Oromia regional health EPRP secured only 11% of the budget of the total requirements of the region.

### Humanitarian impact

- COVID-19 is limiting the activities of humanitarian partners in Gambella region due to increasing cases in the region.

### Actions Taken

- The National ECC in collaboration with partners conducted COVID-19 multi-sectoral assessment in Benishangul Gumuz and Gambella regions to observe and identify the current standard of services at PoE and QCs.
- Gambella Regional Health Bureau distributed mattress, bed sheets, soap and sanitizes to Jikow, Ngingyang and Matar quarantine centers.

## GENERAL COORDINATION

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### COVID-19 – National / regional response coordination

- At Federal level, the COVID-19 response is coordinated by the ECC led by NDRMC Commissioner. After establishing the regional ECCs in Amhara and Somali regions, the national ECC is planning to expand this coordination mechanism to other regions.
- A detailed **list of contacts** of key Government counterparts and OCHA focal points, can be found in the following link : <https://www.humanitarianresponse.info/en/operations/ethiopia/document/ethiopia-covid-19-humanitarian-response-coordination-5-may-2020-en>