



ETHIOPIA: COVID-19 Humanitarian impact Situation Update No. 9

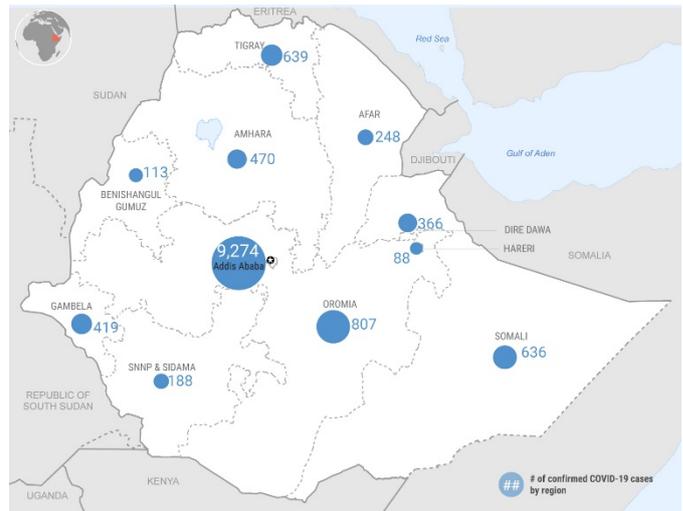
As of 25 July 2020



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. This issue covers the period from 14 - 25 July 2020.

HIGHLIGHTS

- As of 25 July, Ethiopia reported 13,248 confirmed COVID-19 cases compared to 7,969 on 13 July. The cumulative number of recoveries has reached 5,966, while the number of deaths has increased to 209. Cases have increased exponentially in the last two weeks, with Addis Ababa counting a total of 9,274 cases. (Source: MoH/ Ethiopia Public Health Institute, EPHI).
- The recent conflicts in Oromia displaced more than 9,000 people. NDRMC and the Ethiopian Red Cross supported the displaced people with food and NFI. The protests also impacted humanitarian operations consequently affecting food deliveries and critical operations, including COVID-19 activities. Testing for COVID-19 had also decreased dramatically during the unrest, and contact tracing was also disrupted. Two trucks transporting food were looted in Shashamane, while in three other separate incidents, NGOs trapped in violence suffered damages on their vehicles and compounds in southern Oromia. The lack of internet, compounded by COVID-19-related measures, has significantly impacted coordination activities in the country.
- On 20 July, the first confirmed case of COVID-19 was reported in Bule Hora. The local authorities have traced and tested a total of 84 contacts so far.
- Government and partners are scaling-up COVID-19 risk communication and community engagement (RCCE) interventions, including information dissemination on the impact of COVID-19. IOM alone reached over 1.35 million individuals with hygiene awareness promotion through door to door sensitizations, mass mobilization, sensitization during distributions, radio spots and leaflet distributions.
- The Government of Ethiopia, with the support of UNICEF and partners, reached approximately 5.2 million children throughout the country via distance learning programs.
- At the ECC meeting on 22 July, the Government re-called on partners to scale up efforts. Each cluster is to prepare an action plan to address the key recommendations of the multi-sector assessment of quarantine centers and points of entries conducted in seven regions and Dire Dawa city administration from 15-20 June.
- On 22 July, FAO launched a program to safeguard and restore the livelihoods of pastoralist, agro-pastoralist, and farming communities affected by desert locusts in Ethiopia. More than 70,000 households in Afar, Amhara, Somali, SNNP, Tigray and Oromia regions will benefit from agricultural inputs, unconditional cash transfers as well as training and agricultural extension program support. The interventions will assist the targeted households to cope with the impacts of desert locust-induced damage on crops, livestock, as well as the current economic hardships resulting from the COVID-19 pandemic.
- The Government of Ethiopia imposed mandatory mask-wearing as part of its COVID-19 prevention and control measures. However, some negligent behaviors had been observed amongst the citizens over the past few weeks, including social gatherings and people not wearing masks in public spaces. Last week, the police started to enforce mask-wearing on residents in Addis Ababa.
- According to IOM, at least 14,500 Ethiopian migrants are estimated to be stranded in Yemen without access to basic services such as health care and clean water due to border security. Their living conditions are dire and they are at greater risk of exposure to COVID-19. Source: <http://bit.ly/2WiB8Yk>.
- The Board of Directors of the African Development Fund (ADF) approved a grant of US\$165.08 million to support Ethiopia's response to the health and economic impacts of the COVID-19 pandemic, including help to ease fiscal



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.

pressures on the economy. The grant will help bolster Ethiopia's COVID-19 National Emergency Response Plan (NERP).

- The first progress report of the Global Humanitarian Response Plan (GHRP) for COVID-19 was released on 1 July with a requirement of \$7.32 billion. As of 16 July, the funding requirements for COVID-19 response have risen to \$10.26 billion out of which \$506 million is allotted to Ethiopia. As of 25 July, \$1.87 billion (18 per cent) has been funded. For further updates: <https://fts.unocha.org/appeals/952/summary> and for GHRP July update https://www.unocha.org/sites/unocha/files/GHRP-COVID19_July_update.pdf

SITUATION OVERVIEW

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 WFP Representative and Country Director in Ethiopia warned that a funding shortfall of US\$158 million this year is threatening millions of people in Ethiopia who depend on food and nutrition assistance for their very survival. Reportedly, 700,000 refugees, 1.15 million children (6 -59 months of age) and 750,000 pregnant and nursing women in Ethiopia will be at serious risk, if additional funding does not materialize in coming weeks. This funding crisis comes as Ethiopia is struggling to contain a four-pronged food security crisis linked to the combined impacts of the COVID-19 pandemic, a devastating desert locust invasion, widespread flooding and rising food prices. The shortfall at year's end includes \$46 million needed to deliver life-saving food and nutrition assistance to acutely food insecure families and communities, \$68 million needed to sustain nutrition support for pregnant and nursing women and children and \$40 million needed for refugee food assistance. If additional funds are unavailable by end July, WFP will be forced to implement drastic measures from August onwards, including cutting food ration sizes for refugees and reducing coverage of moderate acute malnutrition treatment for malnourished women and children.

In a statement with the Ethiopian News Agency (ENA), FAO Ethiopia representative Fatuma Djama Seid warned that the fast evolving COVID-19 pandemic is likely to drive food insecurity and increase the number of people in need of humanitarian assistance in the country. Coupled with the desert locust, the pandemic has aggravated the impact on agriculture even at household level. She pointed out that about one million Ethiopians have been affected by the desert locust invasion and require emergency food assistance. Ethiopia's food security has been showing progress but is now being impacted by COVID-19. Moreover, due to border closure, the disruption in market activities and value chains engendered a decrease in production as well as loss in earnings.

The return of Ethiopians abroad continues. According to IOM, Ethiopia received more than 21,300 returnees between 1 April and 24 July: 5,051 from Somalia, 4,968 from Sudan, 4,669 from Djibouti, 3,162 from the Kingdom of Saudi Arabia (KSA), 1,024 from Kuwait, 857 from Kenya, 650 from Lebanon, and some more from other countries. The Emergency Coordination Center (ECC), in cooperation with line ministries and humanitarian partners, continues its support to the returned migrants by providing food, NFI, transport to their area of origin, family tracing and reunification.

Flood is also a concern during the *kiremt* (summer) season in most parts of the country, especially in north western, central and south western Ethiopia. At present, Heavy rainfall is causing flash floods and landslides in SNNP region, while river flooding has affected several parts of Oromia region, including Illu, Sebeta, Awas and Dawa *woredas* (South Western Shewa zone) and Bora, Liben, Chiquala *woredas* (East Shewa zone). The overflow of Awash river and the backflow of lack Tana and Gumera river affected communities in Fogera and Dembia *woredas* in South Gondar zone in Amhara region. Following the release of the Flood Contingency Plan, the national Flood Task Force met to emphasize the need to pre-position essential supplies in key locations across the country. Food, WaSH, Shelter/NFI and Nutrition clusters have done some pre-positioning able to reach affected people within the first 72 hours.

According to the Logistic Cluster, cargo flights are operational with reduced capacity while Ethiopia's land borders are open only for essential goods. The Ethiopia - Eritrea border is completely closed; the Somalia borders with Kenya and Ethiopia (Dolo-Ado crossing point) are closed; Ethiopia-Djibouti corridor is open, and cargo ships are operating at limited capacity due to congestion. Meanwhile, the road and river access to South Sudan is open. Lastly, the Ethiopia-Kenya border trucks are subject to transshipment at the Kenyan border with strict control for truckers at borders with potential quarantine for drivers.

The INGO Mercy corps has released an assessment report on "Economic Impact of COVID-19 in Somali region of Ethiopia," which shows that the impact of the crisis on lives and livelihoods is expected to be severe and will likely be further exacerbated by the desert locust infestation. The report paints a picture of an economy which, while not yet on the verge of collapse, is in sharp decline with many crucial market actors struggling to survive and concerned about the

next few months. Supply chain actors for essential foods are worried about their ability to keep their doors open, enterprises are doubtful they will be able to pay staff salaries for more than a few months, and household expenditure and consumption already appears to have fallen significantly, in part driven by the stagnation of the livestock market system which is the major source of livelihood in the region. Perhaps most revealing about the scale of the challenge is the data from Somali Microfinance Institution (SMFI), which shows that loan repayments by businesses are facing increasing delays, and liquidity is falling.

2020 HRP - FUNDING STATUS

Contributions by sector as per the updated
2020 HRP financial requirements (as of 21 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	290.9	38%	773.4
Nutrition	62.8	25%	252.6
Health	12.7	7%	195.0
ESNFI	1.2	1%	105.4
WASH	10.2	11%	95.5
Agriculture	5.9	8%	73.7
Logistics	3.8	6%	59.7
Protection	1.1	2%	47.6
Education	2.8	8%	35.4
Coordination	2.8	23%	12.0
Sector not specified	33.3	-	-
Multiple sectors (breakdown not specified)	48.3	-	-

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

IMPACT OF COVID-19 ON HUMANITARIAN RESPONSE – BY REGION

Afar, Amhara and Tigray regions

Situation Overview

- As of 25 July, the number of confirmed COVID-19 cases in Afar region reached 233, in Amhara 468 and in Tigray 611.
- The Amhara Regional Health Bureau (RHB) has set up two new testing centers in Wollo and Woldia. The region now has a total of eight testing centers.
- The Amhara Regional Government has established 68 quarantine centers, 13 treatment centers and eight testing sites in different zones and *woredas* of the region.
- In Tigray region, the mandatory quarantine period has been shortened to seven days. Wearing of face mask is now mandatory in Mekelle City.
- In Mekelle city, Tigray region, more than 21 health works have reportedly tested positive and are quarantined.
- Due to the imminent risk of community transmission of COVID-19, especially in Mekelle city, house-to-house assessment continues: 102,218 households have been assessed (82 per cent of the target), 1,412 samples tested, and 21 positive results identified and referred to the case treatment centers.
- The Tigray RHB started COVID-19 testing in three sub-cities of Mekelle as cases have been reported from individuals without reported travel history or contact with infected persons.
- The regional task force members held a public press conference on COVID-19 prevention, social communication and reinforced the implementation of the State of Emergency.

Humanitarian Impact

- In Amhara region, there is a shortage of temporary shelter, NFIs and personal protective equipment (PPE) material at the quarantine centers as well as at the points of entry for COVID-19 prevention and response staff.

Actions Taken

- WHO allocated ETB843,000 (~US\$23,915) for the Afar Regional Health Bureau, to be used for health professionals training working in treatment, quarantine and isolation centers in high-risk *woredas*.
- WFP finalized the MoU with NDRMC, for the Cooked Food Support Project for COVID-19 destined to patients in COVID-19 facilities in Amhara region (Metema treatment, quarantine, and isolation centers).
- WFP also allocated ETB40,000,000 (~US\$1,134,757) for the Cooked Food Support Project for the quarantine center in Semeara University.
- IOM provided NFIs and dignity kits for 1,500 people in West Gondar point of Entry and in 13 quarantine centers.
- More than 32,960 people have been reached through community awareness sessions using mobile van in three sub cities of Mekelle city.
- About 4,500 posters on COVID-19 key messages have been produced and distributed to three high-risk zones of Tigray region.
- An estimated 151,960 people have been reached through key COVID-19 messages in three sub cities of the Mekelle city.
- The regional government dispatched 1,000 quintals of flour and 8,500 liters of oil for Bahir Dar and Dessie city administrations as part of their COVID-19 response and prevention measures. A total of 2,000 COVID-19-impacted and poor households will benefit from the support in both city administrations.
- As part of the COVID-19 prevention and response, Catholic Church Aid donated 500 mattresses in Amhara region.

Eastern Oromia, Dire Dawa, Harari, Somali region

Situation Overview

- As of 25 July, the total confirmed COVID-19 cases in Dire Dawa city administration reached 350, in Harari 88, in Somali region 628 and in Oromia 770.
- In East and West Hararge zones (Oromia), the security situation has greatly affected and delayed partners' COVID-19 response operations. About 80 per cent of the COVID-19 technical support team was pulled out from Dollo and Korahey zones.
- In Harari region, WHO continued providing necessary technical support. However, the limited presence of humanitarian partners in the region has affected the overall effort to combat the pandemic.
- Reportedly, testing kits have arrived in East and West Hararge zones. The Emergency Operation Center (EOC) of Harari region is also conducting daily coordination meetings.
- There is a shortage in the COVID-19 operational budget and in logistic transportation for the Rapid Response Team (RRT) and contact teams (especially at zonal levels for sample collection and transportations, as well as rumor verifications). The Oromia Regional Health Bureau confirmed to distribute 10 ambulances for the RRT teams in the zones.
- Gaps in risk communication and social awareness have been reported. People are ignoring the preventive measures, like usage of facemask and practicing social distancing.

Humanitarian Impact

- The absence of humanitarian partners in Harari region is affecting the overall efforts to combat the pandemic.
- A critical gap of PPE has been reported in Somali region, East/West Hararge and Harari region.
- In East and West Hararge, COVID-19 response efforts have been slowed down due to security situation.

Actions Taken

- WFP dispatched food for people in quarantine centers in the Somali region.
- IOM is providing meals and transportation for migrant returnees at the points of entry.
- The INGO SCI is implementing a project in Dire Dawa with components of cash, WaSH and health and nutrition in order to response to the COVID-19 situation.
- WHO supports the Oromia PHEM/RHB in responding to the COVID-19 outbreak in Haromaya Town (East Hararge) and Chiro Town (West Hararge). Projects of other clusters are redesigned to fulfil and mainstream the COVID-19 health protocol.

Southern Oromia, and Southern Nations, Nationalities, and Peoples' region (SNNPR)

Situation Overview

- As of 25 July, the total number of confirmed COVID-19 cases in SNNPR reached 165 (67 cases are in Sidama zone)
- In West Guji, Bule Hora, a first unverified COVID-19 case was reported. The verification of the information is pending.
- In Borena, 10 new COVID-19 cases have been confirmed in Moyale quarantine center, raising the total confirmed cases to 21; 17 of the cases are in treatment centers and four have been discharged. Currently, 81 people are quarantined, while total 1,026 (of the total 1,107 quarantined) have been discharged since the start of the pandemic.

Humanitarian impact

- In SNNPR, gaps have been identified in terms of logistics, capacity building, the standard of quarantine and isolation centers, expansion of laboratories and improved strategies on Risk Communication and Community Engagement and support at point of entry to address COVID-19 pandemic in the region.

Actions Taken

- In Borena, Action against Hunger conducted water trucking to three quarantine centers and provided corn soya blends in Moyale. SWAN also supported 72 individuals with transportation and accommodation expenses upon completion of the quarantine at the center.
- In Guji, MC received six-month-funding for their COVID-19 response in Liban, Gumi Eldelo and Negelle.
- Two international organizations, HEKS and CISP, have launched a six-month COVID-19 project worth over ETB4,000,000 (~US\$110,000).

Western Oromia, Benishangul Gumuz (BGR) and Gambella regions

Situation Overview

- In Gambella region, as of 25 July, the number of confirmed COVID-19 cases reached 392 (25 cases at Pagak entry point) with two deaths.
- In Benishangul- Gumuz region (BGR), as of 25 July, 90 confirmed cases have been reported. All of the cases were detected among returnees and individuals incoming from Addis Ababa. The region is conducting intensive testing at the airport and entry points.
- Assosa regional laboratory in BGR is conducting lab tests with a total capacity of 300 tests per day.
- Most of the infected people at Pagak entry point refused to visit the treatment center. The regional Government plans to deploy security forces to admit the patients in the treatment center.
- UNICEF is providing technical support to the BGR Regional Health Bureau for its COVID-19 prevention and preparedness plan and provided ETB3.4 million (~\$ 96,455) worth of WaSH emergency supplies to BGR health bureau and the BGR water development, energy and irrigation bureau for COVID-19 response plans.

Humanitarian impact

- COVID-19 is limiting the activities of humanitarian partners in Gambella region due to increasing cases in the region. Most of the confirmed cases are hiding in the community, refusing or resisting to go to the treatment center.
- Absence of law enforcement and free movement of people without any restriction in Gambella are causing the spread of the virus in the region.
- Shortage of PPE for health staff, lack of essential drugs and equipment in isolation and treatment center such as biohazard bags, mechanical ventilators and oxygen in BGR, have been reported.

Actions Taken

- In BGR, the Regional Health Bureau is engaged in community mobilization activities and educating people for proper usage of face mask and maintaining physical distancing.
- World Vision, in collaboration with the Gambella regional health bureau, has carried public awareness activities on COVID-19 prevention in Gambella town.
- UNHCR in collaboration with EECMY conducted sensitization on the prevention of COVID-19 at community level and also distributed posters and banners in Belojeganfoyo woreda, Kamashi zone.
- UNICEF provided 365 packs of PPE for regional BOWCYA to provide the supplies for frontline social workers and volunteers as well as 1,600 dignity kits for women and girls in vulnerable conditions.

- Plan International has distributed through ARRA, different COVID-19 preventive material items to refugees who are temporarily staying in isolation centers in Sherkole and Kurmuk *woredas*.

GENERAL COORDINATION

COVID-19 – National / regional response coordination

- At Federal level, the COVID-19 response is coordinated by the ECC and is 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>