



# ETHIOPIA: COVID-19 Humanitarian impact Situation Update No. 6

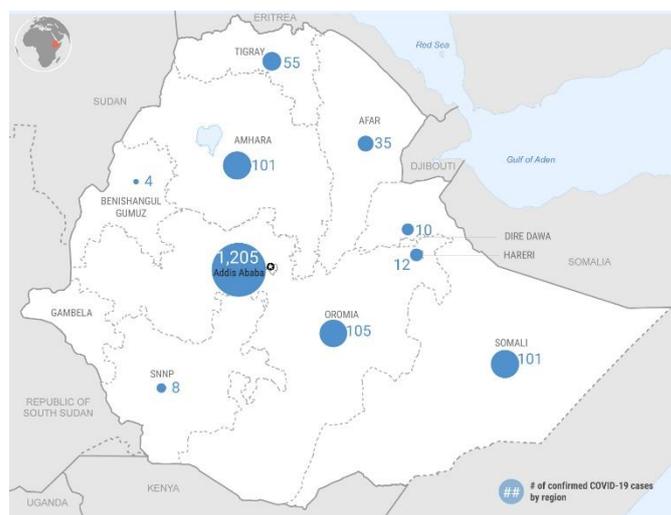
As of 4 June 2020



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 May – 4 June 2020.

## HIGHLIGHTS

- As of 4 June, there are 1,636 confirmed cases and 18 deaths in Ethiopia. The number of cases has increased exponentially the past two weeks (70 percent of total). Cases are increasing in the regions, especially Somali, Oromia, and Amhara, with the exception of Gambela that has no cases confirmed. The vast majority (1,205) have been reported in Addis Ababa (74 per cent). (Source: MoH/ Ethiopia Public Health Institute)
- On 27 May, a new COVID-19 testing laboratory was inaugurated in Gambella, bringing the number of testing laboratories in the country to 31 and the national testing capacity to 7,500 persons/ day. The national target is 52 laboratories and test capacity to 15,500 persons/ day.
- The response to COVID-19 continues to be challenged by the influx of returning Ethiopian migrants from foreign countries through formal/ informal entry points. In the last ten 10 days, around 800 people arrived to Addis Ababa from the Middle East and 5,600 people from neighboring countries in the last three weeks.
- COVID-19 and limited health partners are stretching the health response capacity at a time when Cholera or Measles outbreaks are taking place. UNICEF has announced that the national measles vaccination campaign, which had been postponed by COVID-19, is due to commence shortly.
- Humanitarian partners have noted that they have managed to procure locally/ nationally the necessary facial masks, hand sanitizer and gloves to ensure safe continuity of operations. On the health response side, there continues to be a shortage of Personal Protective Equipment (PPE) for health workers to support the government response. UNICEF and WHO are working with the Ministry of Health to procure the necessary PPEs.
- As of 30 May, there are no confirmed COVID-19 cases in refugee camps and other locations sheltering refugees and asylum seekers. The Agency for Refugees and Returnees Affairs (ARRA), UNHCR and partners continue to intensify efforts to prevent the spread of the virus in refugee camps, hosting over 761,000 refugees.
- OCHA has assessed the impact of COVID-19 on humanitarian operations, involving national counterparts and IASC Clusters. Overall, it is estimated that 11 per cent of regular activities have been impacted across the country.
- The USAID-supported 'Famine Early Warning Systems Network' (FewsNet) has announced that in Ethiopia, "COVID-19 related restrictions, coupled with the broader economic decline, desert locust upsurge, flooding, and the general decrease in incomes has led to atypically high humanitarian needs across much of the country".
- On 27 May, the Government issued a new directive making the use of facemask compulsory in public spaces throughout the country. On 29 May, the House of People's Representatives approved an additional budget of 48 billion Birr (~US\$1.4 billion) which for the most part will go towards buffering the economic impact of COVID-19 in Ethiopia.



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

Humanitarian needs in Ethiopia have increased as a result of COVID-19, the impact of the desert locust infestation, and changes to the displacement landscape due to ongoing insecurity and inter-community violence in various parts of the country. Available data indicates that the number of people in need of humanitarian assistance has increased from 8.4 million (calculated end-2019) to an estimated 10.6 million currently. Government and humanitarian partners are currently reviewing the humanitarian response strategy (Ethiopia 2020 Humanitarian Response Plan) and related financial requirements, which will be released shortly.

Government and partners note remaining challenges in providing services to deportees/ returning migrants in some Points of Entry (PoE) and Quarantine Centers (QCs). The National Emergency Coordination Center (ECC) continues to support QCs through the country and coordinate transportation support to areas of origin. ECC has established the first Incident Command System at Addis Ababa Science and Technology University quarantine center in Addis Ababa. In collaboration with the Government, IOM has developed standard operating procedures (SoP) for managing returning migrants, provide support to the Ministry of Labor and Social Affairs in data management, and has deployed data collectors in QCs throughout the country.

UN Women has produced a rapid assessment of the impact of COVID-19 on “Violence Against Women and Girls and service provision” (link to report: <https://bit.ly/2BkmIPG>). The study shows the impact in different countries, including Ethiopia, and concludes that the pandemic is having an immense impact on the spread of violence against women and girls (VAWG), especially those who face multiple forms of discrimination. The report documents an increase in VAWG calls/ reports especially to helplines/hotlines and underscores that current reports are most likely an underestimation of the real number of cases given that the great majority of women survivors of violence do not report to police or helplines.

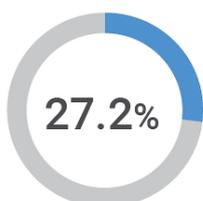
According to FewsNet, COVID-19-related restrictions have impacted income-earning activities amongst the poorest sections of society in both urban and rural areas. The report notes that “Stressed” (IPC Phase 2) and “Crisis” (IPC Phase 3) food security outcomes are present across central and eastern parts of the country as many poor households are reliant on market foods with below-average incomes. With the anticipated below-average *Belg* harvest, upcoming *Jalal* (dry season) in the Somali region, pasture losses associated with desert locust, and the lean season in *Meher*-dependent areas, needs are expected to peak between June to September, affecting in particular eastern parts of the country. The National Meteorology Agency release *kiremt* climate outlook last week, based which NDRMC issued second flood alert.

On 21 May, the United Nations launched an initiative called “Verified” (link: <https://bit.ly/3drAYo5>) to combat the growing scourge of COVID-19 misinformation by increasing the volume and reach of accurate information. The initiative is calling on people around the world to become “information volunteers” to share trusted content to keep their families and communities safe and connected. Described as digital first-responders, the volunteers will receive a daily feed of verified content optimized for social sharing with simple, compelling messaging that either directly counter misinformation or fills an information void. The initiative is a collaboration with Purpose, supported by the IKEA Foundation and Luminare. EPHI has launched a new website to increase awareness about COVID-19 (<https://www.ephi.gov.et/index.php/public-health-emergency/novel-corona-virus-update>). Further, two mobile applications were launched by EPHI to support the provision of COVID-19 provision to health care providers (<https://play.google.com/store/apps/details?id=et.gov.moh.oppia.covid>) as well as to expedite the identification of contacts with COVID-19 cases (<https://debo.ephi.gov.et>).

## 2020 HRP - FUNDING STATUS

Contributions as per the 2020 HRP financial requirements, by sector (as of 1 June 2020)  
**US\$1.001 billion** requested

### LEVEL OF FUNDING



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)

Sector/Cluster	Funding Received	% Covered	Requirements
Food	123.6M	31%	399.5M
Nutrition	50.9M	26%	193.4M
ES/NFI	-	0%	95.8M
Health	1.6M	2%	94.3M
WASH	9.4M	12%	79.7M
Agriculture	5.8M	11%	54.0M
Protection	1.1M	3%	42.4M
Education	-	0%	30.0M
Coordination	2.8M	23%	12.0M
Sector not specified	59.5M	-	-
Multiple sectors (breakdown not specified)	17.4M	-	-

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

### Afar, Amhara and Tigray regions

#### Situation Overview

- In Afar, returning migrants from Djibouti continue to arrive through three major PoEs. Partners report challenges in terms of screening, inadequate NFI supplies, and transportation to Semera University QC.
- In Amhara region, the ECC is working to strengthen the coordination mechanism to deal with a large influx of return migrants from Sudan through the Metema entry point.
- In Amhara, the regional Government in Bahir Dar has announced it has returned some 30,000 IDPs to their villages of origin in Chagni *woreda*, Metekel zone (Benishangul Gumuz region). Besides, some 400 return migrants and daily laborers arrived from Sudan last week.
- In Amhara and according to WHO, 837 suspected cases were tested in laboratories in the region of which 101 cases were confirmed to have been infected with the virus.
- In Tigray, the total number of confirmed COVID-19 cases has reached 55 as of 4 June 2020, with new cases originating from returnees from Sudan.
- The Emergency Operation Center (EOC) in Tigray has decided to close down Quarantine Centers (QC) for Eritrean asylum seekers as Eritrea has not reported COVID-19 cases for almost a month. The Soqota/ Agew QC at the border with the Amhara region will also be closed as no COVID-19 cases have been reported. The QCs in West Tigray, Mekelle as well as South zone are being further strengthened.

#### Humanitarian Impact

- In Amhara, partners have expressed concern regarding the return of IDPs to Metekel zone (BGR), in light of ongoing inter-community tensions and the absence of peace and reconciliation efforts in some locations.
- In Tigray, UN/ INGO vehicles require special permission from the Command post to travel, which is causing some disruptions in partners' movements within the region and impacting relief operations

#### Actions Taken

- In Afar, the regional government in collaboration with NDRMC has constructed food banks (stores) in all five zonal centers, with a total capacity of 3,200 tones. The main purpose of the store is to preposition emergency food assistance for the worst-case scenario of COVID-19 and the regional DPFSPCO already has requested emergency food assistance for 490,334 people who might be affected by COVID-19.
- WHO has allocated US\$25,000 for capacity building activities (surveillance, case management, IPC). WHO is also conducting training for health workers at isolation and treatment centers and has deployed an incident management team to provide technical support for all pillars working with the EOC.
- Overall, 376 returnees from Djibouti have been transported to their areas of origin in Amhara, Oromia, SNNP regions after completing the mandatory quarantine at Semera University. Currently, there remain 35 returnees at the QC.
- In Tigray, on 20 May, Tigray Education Bureau (EB) signed an agreement with the University of Mekelle to provide TV education for grades 9-12. Since March, the Tigray EB is providing education through radio for grades 5-12.
- WHO has deployed two (2) government COVID-19 response. One (1) of the teams was dispatched to Western Tigray.
- WHO has deployed two rapid response teams to Tigray region to support the regional government COVID-19 response. One of the teams was dispatched to Western Tigray.
- Three (3) Eritrean associations in Ethiopia and abroad have contributed ETB2.5 million to support COVID-19 response in four (4) refugee camps in the northwest zone, Tigray, with food, NFIs, sanitizing materials, and PPEs.

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

#### Situation Overview

- In the Somali region, the cases continue to rise, as of 04 June the region counted 101 confirmed cases, the vast majority are returning migrants in QCs. There 12 QCs in the region, six (6) of them are currently holding returnees.
- A large number of formal and informal points of entry (PoE) continues to pose a major challenge. The PoEs need to be strengthened to provide appropriate services for returning migrants.

#### Humanitarian Impact

- The Somali Regional Health Bureau is mobilizing resources to respond to the COVID-19 and has extended a request to partners for training, logistics, and operational support.

- COVID-19 is impacting access to food, due to limited production and supply as a result of movement restrictions impacting agricultural outputs and markets, with the price of imported foods increasing.
- The reluctance of private transporters to move to certain areas in fear of COVID-19 is impacting the transportation of humanitarian supplies.

### Actions Taken

- The EOC's pillars continue to carry out COVID-19 response activities, such as risk communication, surveillance, and infection, prevention and control (IPC).
- COVID-19 measures have been established at major PoEs such as Dewele, Togochole, Moyale, Dolo Ado, Warder, and KebriDehar. The regional government together with Federal Immigration Authority are also improving services at Ferfer and Suftu.

## Southern Oromia, SNNP regions

### Situation Overview

- General insecurity and security operations in Southern Oromia, particularly in Guji zone, are heavily impacting humanitarian activities, including critical health, nutrition, and WASH services to IDPs and vulnerable communities.
- Across Southern Ethiopia (especially in West Guji, Bale, and Guji) partners report how community mobilization is reduced and desired positive behavior like physical distancing, hand washing, etc. are diminishing. This is attributed to a sense of relaxation vis-a-vis the threat of the virus, communities' traditional beliefs, and limited risk awareness.
- Overall, out of the total of 707 people who have passed by QCs (269 tested) in Southern Oromia, eight (8) showed symptoms of COVID-19, and 693 were subsequently released. In the Borena zone, 15 suspected individuals remain in the QCs (four in Miyo; four in Moyale; three in Yabello; two in Dirre; one in Guchi; one in Dhas).

### Humanitarian Impact

- In Wadera *woreda*, Borena, COVID-19-induced economic hardship has particularly hit women, children, and other vulnerable persons. At least 67 children live on the street, while 561 households (210 female-headed, 351 male-headed) out of an estimated 3,000 people are in dire need of shelter, food, NFIs, and WASH support to COVID-19.

### Actions Taken

- In SNNPR, community-based surveillance (CBS) is ongoing in all zones and special *woredas*, with some 7,881,000 individuals (39 per cent) already surveyed. Besides, over two (2) million people have been screened at Points of Entry.
- UNICEF has provided US\$118,000 worth of PPEs to the SNNP Regional Health Bureau (RHB). The distribution of PPE for 28 health facilities/isolation centers has been completed. The Motor & Engineering Company of Ethiopia Limited S.C. (MOENCO) has donated ETB 300,000 worth of sanitizing materials.
- A COVID-19 test lab equipment is currently being installed in Yabello Hospital, Borena zone.
- In West Guji, near 104,000 people have been reached through social mobilization and awareness-raising sessions on COVID-19. IOM distributed 250 leaflets and 2 banners in Kercha *woreda*. WHO continued technical support and sharing interim guidelines on COVID-19 with RRT and partners.

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

### Situation Overview

- Gambela is the only region in Ethiopia with no confirmed cases. This notwithstanding, there are concerns regarding the Ethiopia - South Sudan border, where refugees from South Sudan are enter the country using different PoEs.
- In Western Oromia's Kelem and West Wellega, insecurity and ongoing clashes with Unidentified Armed Groups (UAGs) continue to impact partners' movements and COVID-19 response activities.

### Humanitarian impact

- The government-led return of thousands of IDP returnees from the Awi zone (Amhara), pose a challenge to response capacity in Metekel zone (BGR), an area traditionally underserved in terms of partners' presence and capacity.
- Some 300,000 refugees and vulnerable host communities in Gambela are exposed to COVID-19 as a result of living conditions in refugee camps, and difficulties in ensuring social distancing and other COVID-19 prevention measures.

### Actions Taken

- BG regional Government and Federal Immigration are setting up appropriate services at Gurmuk PoE. Additional two PoEs (Gizen, Almahal) were also proposed to be strengthened by the regional government.
- In the Gambella region, efforts are ongoing from EPHI to increase testing and strengthening the PoE at Pagak.

- On 27 May, a COVID-19 testing laboratory was established in Gambella, with a capacity to test 180 samples per day.
- UNHCR has provided COVID-19 preventive items and other essential non-food items (laundry soap, jerry cans, blankets, sleeping mats, buckets, kitchen sets, bed nets) for Itang Special *woreda*, reaching some 600 households.
- IOM has provided an assortment of supplies to Gambella Regional Health Bureau for COVID-19 response. These include WASH hygiene items soap, blankets, packets, spring beds, towels, plates, and cups), and NFIs, reaching near 5,000 IDPs in five *kebeles* in Itang *woreda*.
- IOM has provided four water tanks of 5,000 liters' capacity for the Gambella university treatment Centre, in addition to wheelchairs for isolation centers at Gambela College, ten lifesaving jackets/ vests and five camping tents to enable health workers to reach out to remote areas like Akobo where it can only be reached by boat. IOM plans to support the Regional Health Bureau in two QS at Gambella Town Teachers and Health Science college in Lare Kuergeng town
- In BGR, UNICEF allocated US\$93,000 for COVID-19 response support to the Regional Health Bureau and also to Metekel and Kamashi zones through UNICEF health emergency and communication for development (C4D). UNICEF also provided 1,600 dignity kits to BOWCA, PPEs for the COVID-19 isolation and treatment centers in the region, and WASH supplies (water container, water tank, hand sanitizers, bucket plastics, water treatment, soaps, and sprayers).
- Plan International, through ARRA, distributed different COVID-19 material to Sherkole and Kurmuk *woredas*, where many refugees are sheltered in isolation centers (water containers, hand soap, blankets, hand washing, solar lights).
- In West Wollega, World Vision COVID-19 awareness-raising with community volunteers reached some 3,600 people. UNHCR in collaboration with EECMY has trained 30 community mobilizers in East and West Wollega (Western Oromia) and Kamashi zones (BGR).

## GENERAL COORDINATION

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

- At the Federal level, the COVID-19 response is coordinated by the ECC led by NDRMC Commissioner.
- At the regional level, coordination centers/ taskforces have been established, i.e. regional Emergency Operations Centers (EOC) mirroring federal coordination mechanisms.
- 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>