COVID-19 is not only attacking our physical health; it is also increasing psychological suffering... grief at the loss of loved ones, shock at the loss of jobs, isolation and restrictions on movement, difficult family dynamics, uncertainty and fear for the future.

Mental health services are an essential part of all government responses to coronavirus and must be expanded and fully funded. I urge governments, civil society, health authorities and others to come together urgently to address the mental health dimension of this pandemic.

António GUTERRES
Secretary-General,
UNITED NATIONS
The #WorldRefugeeDay2020 is an important moment to highlight COVID-19 risks for some of the world’s most vulnerable people. Over 80% of the world’s refugees and internally displaced people are hosted in low & middle-income countries; they are particularly at risk because they often have limited access to adequate shelter, water, nutrition, sanitation & health services.

We have a shared duty to do everything we can to prevent, detect and respond to transmission of COVID-19 among refugee populations.

Dr TEDROS Adhanom  
Director-General, WORLD HEALTH ORGANIZATION

We mark this #WorldRefugeeDay2020 in the midst of a dramatic social change. The COVID-19 pandemic has tested our strength and highlighted systematic inequalities . . . it has also connected us in new ways and renewed our motivation to act for equality.

We have not yet seen major COVID-19 outbreaks where we feared them the most, in large concentration, in refugee camps traditionally. This is also due to the fact that we had time to prepare. This is where our cooperation with WHO has been invaluable.

It was important to remind all that nobody must be left behind as we fight the pandemic together.

Filippo GRANDI  
Commissioner, UNITED NATIONS HIGH COMMISSIONER for REFUGEES

No matter who you are or where you come from, pandemic or not; Everyone of us can make a difference. Every action counts!
... Though ETHIOPIA’s COVID-19 cases have been on the increase, we are glad to witness the steady increase in survivors of COVID-19 discharged from isolation centers.

I still call on all of us to exercise extreme vigilance... continue maintaining our distance from others, keep cleaning your hands, stay home if we feel sick, keep covering our nose and mouth when we cough, and wear a mask when appropriate.

Dr Boureima HAMA SAMBO
WHO Representative, ETHIOPIA

We reviewed the study report from the UK about Dexamethasone use for COVID-19 patients. Following recommendation from our clinical advisory group and health professionals national advisory council, the FMoH recommends the emergency use of low dose Dexamethasone for COVID-19 patients who require oxygen and or mechanical ventilation for treatment.

Details of this treatment protocol will be made available soon.

Dr LIA Tadesse
Minister of Health, Federal Democratic Republic of ETHIOPIA
Provided on spot technical support IPC-WASH and Case management 2 quarantine centers and 4 schools

Supported community training on dead body management and burial in conjunction with Ethiopian Red Cross Society

Conducted joint supportive supervision on Essential health care services in Zewditu Hospital

Support provided on COVID-19 laboratory supplies and reagents stockpile reporting

Provided orientation to AA RHB on new tools for reporting on quarantine facilities
REGIONAL SUPPORT TO COVID-19 RESPONSE

AMHARA REGIONAL STATE

Supported sample collection and case management of identified detention centers in the region

Conducted supportive supervisions in Hidassie health center and offices in Debre Markos town

Conducted joint assessment with partners operating in the region at Metema Yohannes POE and Metema isolation center

Participated in measles TOT for SIAs virtually and completed Readiness assessment for SIA

CONFIRMED CASES

274

RECOVERED CASES

65

TOTAL DEATHS

02
Facilitated IPC WASH training for 52 health care workers

Conducted joint supportive supervision in Yemage Private Hospital on COVID-19 preparedness and response

Participated on virtual TOT on Measles SIA hosted by FMoH

Provided tablets to health extension workers to digitalize data collection

Co-chaired partnership meeting to support RHB in coordinating IDP response efforts
Provided technical support in community awareness creation campaign on Oromia Broadcasting Network (OBN) in 18 zones

Provided support in the development and dissemination of local poem to encourage frontline health care workers

WHO continues to facilitate the transport corridor project implementation in the region

Supported the development of proposal for expansion of IDP sites in the region

Supported the adaptation of Contact Tracing Standard Operation Procedure (SOP) for the region

RRT members in Batu Town ready for dispatch
Participated multisectoral interagency assessment at Assossa University, Mankush quarantine sites and kurmuk and Almahal points of entry in Benishangul Gumuz

Monitored screening activities at the POEs, Treatment centers, and Quarantine facilities at Dawanle and Jigjiga city, Somali region

WHO supported a joint multiagency assessment of West Gondar zone POE and quarantine centers

Supported joint supportive supervision visit (State Minister of Health, EPHI, MOH, WHO) to quarantine center and health facilities in Harerri region
Provided orientation for 11 HCWs and RRT members on COVID 19 preparedness, RRT protocols, TOR and updated case definition in Hareri region

Provided technical guidance to Addis Ababa RHB on Contact tracing at woreda 1 of Bole sub-city

Provided technical support on electronic laboratory data management for Tibebe Ghion COVID-19 laboratory, Amhara region

Supported orientation for lab technicians on sampling procedures and precautionary measures, Somali (30) and Hareri (15) regions
Commenced training on IPC/WaSH for transport corridor project in Addis Ababa and Afar for 15 support staff

Provided IPC-WASH training for 250 Red Cross home-based care volunteers from all sub-cities in Addis Ababa

Provided IPC-WASH training for 52 staff from zones, quarantine and isolation centers in Somali (20), Benishangul Gumuz (6) and Dire Dawa (26)

Facilitated training on safety measures and rational use of PPE to staff and drivers from SNNP WHO IMT

Conducted need assessment with zonal IPC/WASH focal in Pawe female boarding school isolation center

Provided training on environmental surface cleaning & disinfection, linen processing & laundry service for HWs from selected non-COVID HCFs in Addis Ababa
Conducted supportive supervision to assess preparedness and readiness in Addis Ababa (8), SNNP (3) and Somali (1) regions.

Technical support provided on Community and home-based care, and flow chart for the management of HCW infection at home.

Prepared a toolkit for HCWs to determine the risk categorization of each HCW after exposure to COVID-19 in isolation and treatment centers, Gambella region.

Conducted orientation on COVID-19 psychological first aid and self-care for frontline supportive staff in Jigjiga University Quarantine center, Somali region.
Supported RHB on managing Maternal Pediatric Disease Surveillance and Response (MPDSR) data in SNNP region

Supported coordination malaria resurgence response plan in Somali region

Supported RHBs to conduct readiness assessment and command post meetings for the scheduled Measles SIA in the regions

Orientation provided to heads of health centers on the national guideline for maintaining essential health services during COVID-19

Supported the set-up of operation theatre/delivery room at Asossa t HC for referral of pregnant mothers from Asossa University quarantine site, Benishangul Gumuz
Provided technical support to develop message on Mental Health for treatment centers

Facilitated the printing of poster messages prepared on mental health message for treatment centers

Developed checklist to assess risk communication and community engagement activities in IDPs and refugee camps

Facilitated printing of job aids to protect frontline health care workers

Supported development of audio messages for vulnerable populations including people with chronic health conditions
... WHO is working with UNHCR and other partners through the Ethiopian refugee agency - ARRA, to work on the refugee health by strengthening the overall health system in refugee camps; working with partner agencies to tackle the COVID-19 response. WHO and partners supported the RHB in the setup of isolation center for COVID-19 cases.

CHUOL Puok Jock  
Regional Technical Support Team Coordinator for Gambella,  
WHO Country Office for ETHIOPIA

WHO supported partners coordination meeting where joint partner resource mapping and COVID-19 incident action plan was completed in Gambella

WHO presented the current efforts to support IGAD in the COVID-19 Response strategy to the 8 countries to WRS’ from Africa region and the Regional Director’s Office

WHO supported OCHA in developing a concept note for IDP support in WASH, Livelihoods and health services for the global CERF submission

Supported the joint revision of EPRP with partners to include vulnerable population
THANKS TO OUR PARTNERS:
Bill and Melinda Gates Foundation, European Humanitarian Aid and Civil Protection (ECHO), United nation’s Central Emergency Response Fund (CERF), Swiss Agency for Development and Cooperation SDC, Irish Aid, Department for International Development (DFID), USAID, Korea International Cooperation Agency (KOICA), and King Baudouin Foundation
WHO welcomes the initial clinical trial results about dexamethasone, a corticosteroid, can be lifesaving in treating patients who are critically ill with COVID-19

16 June 2020

According to preliminary findings shared with WHO,

- For patients on ventilators, the treatment was shown to reduce mortality by about one third
- For patients requiring only oxygen, mortality was cut by about one fifth, and
- The benefit was only seen in patients seriously ill with COVID-19, and was not observed in patients with milder disease

Dexamethasone is a steroid that has been used since the 1960s to reduce inflammation in a range of conditions, including inflammatory disorders and certain cancers

It has been listed on the WHO Model List of Essential Medicines since 1977 in multiple formulations, and is currently off-patent and affordably

WHO will coordinate a meta-analysis to increase our overall understanding of this intervention; and clinical guidance will be updated to reflect how and when the drug should be used in COVID-19

WHO will continue to work together with all partners to further develop lifesaving therapeutics and vaccines to tackle COVID-19 including under the umbrella of the Access to COVID-19 Tools Accelerator

... This is the first treatment to be shown to reduce mortality in patients with COVID-19 requiring oxygen or ventilator support. I congratulate the Government of the UK, the University of Oxford, and the hospitals and patients in the UK who have contributed to this lifesaving scientific breakthrough

Dr TEDROS Adhanom
Director-General
WORLD HEALTH ORGANIZATION
Preparing GISRS for the upcoming influenza seasons during the COVID-19 pandemic – practical considerations
Interim guidance

Controlling the spread of COVID-19 at ground crossings
Interim guidance
https://apps.who.int/iris/rest/bitstreams/1278436/retrieve

Criteria for releasing COVID-19 patients from isolation
Scientific brief
https://apps.who.int/iris/rest/bitstreams/1282284/retrieve

COVID-19 Strategic Preparedness and Response (SPRP)
Monitoring and Evaluation Framework Draft
https://www.who.int/docs/default-source/coronaviruse/who-ncov-me-framework-web.pdf?sfvrsn=656e430f_1&download=true
ETHIOPIA COVID-19 UPDATE
UPDATE AS OF 21 JUNE 2020

TOTAL TESTED CASES 216,328
TOTAL CONFIRMED CASES 4,532
TOTAL RECOVERED 1,213

CASES IN TREATMENT CENTERS 3,243
CASES IN INTENSIVE CARE UNIT 32
TOTAL TESTED CASES 74

3,105 C | 58 D
ADDIS ABABA
CITY ADMINISTRATION

406 C | 04 D
SOMALI
REGIONAL STATE

274 C | 02 D
AMHARA
REGIONAL STATE

240 C | 08 D
OROMIYA
REGIONAL STATE

RISK ASSESSMENT
VERY HIGH

Case by international travel history and Sex

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<th></th>
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<td>1,238</td>
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<tr>
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<td>180</td>
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Cases by Subcity, Addis Ababa region

- Addis Ketema: 602 cases
- Bole: 416 cases
- Gulele: 354 cases
- Lideta: 293 cases
- Kolfe Keranio: 272 cases
- Kirkos: 216 cases
- Arada: 190 cases
- Yeka: 162 cases
- Nifas Silk Luffa: 144 cases
- Akaki Kaliti: 132 cases

Number of cases