I. HIGHLIGHTS

- One year has passed since the first COVID-19 case is reported in Ethiopia.

- Ethiopia begins COVID-19 vaccine rollout.

- A total of 49,326 laboratory samples were tested in the WHO-Epi-Week-10.

- A total of 9,329 new confirmed COVID-19 cases and 121 COVID-19 related deaths were reported during the WHO Epi-Week-10 bringing the total cases and death to 175,467 and 2,550 respectively.

- A total of 106,634 COVID-19 confirmed cases have been at Home Based Isolation and Care so far; 5,142 of these are enrolled in the WHO-Epi-Week-10.

- Out of total of 327,129 contacts of COVID-19 confirmed cases, 1,768 contacts were identified during the WHO Epi-week-10.

- Globally, around three million new cases were reported last week, which is 12% increase compared to the previous week.

II. Subject in focus

i. One year elapsed since the 1st COVID-19 case is reported in Ethiopia on March 13, 2020

- Since then:
  o The MOH and EPHI in collaboration with partners have intensified response efforts.
  o The national and the regional PHEOC has been activated
  o Laboratory diagnosis capacity has been expanded to other national institutions, subnational and private laboratories.
  o The MOH and EPHI have been providing information to the public and stakeholders on a regular manner using different means of communication modalities.
ii. Ethiopia begins COVID-19 vaccine rollout

- Ethiopia received its first batch of 2.2 million doses of the AstraZeneca vaccine last week under the COVAX initiative.
- Vaccination against COVID-19 in Ethiopia has started exactly one year after the first COVID-19 case was reported in the country.
- Ethiopia started COVID-19 vaccination on March 13, 2021. The vaccination was launched in several major cities, including the capital Addis Ababa, where top government officials and UN representatives attended a ceremony at the Eka Kotebe General Hospital. Physicians, nurses, and support staff at the hospital were given jab of the AstraZeneca vaccine.
- HE Dr. Dereje Duguma, State Minister, spoke about how Ethiopia has worked hard to combat the COVID-19 pandemic.
- Speaking at the ceremony, Ministry of Education Minister Dr.-Eng. Getahun Mekuria said Ethiopia has been experiencing an alarming increase in infections over recent days.

III. EPIDEMIOLOGICAL SITUATION

i. Global Situation

- Globally, around three million new cases were reported last week, which is 12% increase compared to the previous week.
- Between December 31, 2019 and March 14, 2021, COVID-19 pandemic affected 235 countries/territories causing 116,464,677 cases and 2,593,372 deaths (CFR=2.23%) globally. Of the total cases and deaths reported since the beginning of the outbreak, 2,995,931 cases and 58,131 deaths were reported during the WHO Epi-Week-10.
- The United States of America (USA) reported the highest number of cases (27,305,362) with CFR of 1.91% followed by India (11,189,411) cases) with a CFR of 1.42%.
- In Africa, 57 countries/territories have reported COVID-19 cases.
- As of March 14, 2021, a total of 4,034,379 cases and 106,883 deaths were reported across the continent (CFR=2.65%). Of these 72,662 cases and 2,014 deaths were reported during the WHO-Epi-Week-10.
- In Africa, South Africa reported the highest number of cases (1,520,206) with CFR of 3.33% followed by Morocco (485,974 cases) with a CFR of 1.79%.
- Ethiopia reported the highest number of COVID-19 confirmed cases in East Africa. See the summary dashboard below.
Fig. 3: COVID-19 Global Situation Update as of March 14, 2021 (Source: WHO)
Fig. 4: COVID-19 Situation Update in Africa as of March 14, 2021 (Source: WHO)
ii. National COVID-19 situation:

- Nine-thousand-three-hundred-twenty-nine (9,329) newly confirmed COVID-19 cases (32% increase compared to that of Epi-Week-09) and 121 COVID-19 related deaths (89% decrease compared to that of Epi-Week-09) were reported during the WHO Epi-Week-10.

- Most of the cases are from Addis Ababa City Administration which may be as result of different reasons. High number of laboratory tests, high transmission of the disease due to the occurrence of super spreading events, decreased adherence to the public health and social measures and high risk of variant of concern importation.

- As of March 14, 2021, a total of 175,467 confirmed COVID-19 cases and 2,550 deaths were recorded in the country. This puts Ethiopia in the fifth position by the number of confirmed cases and in the sixth position by the number of deaths due to COVID-19 in Africa.

- For detail, see the summary dashboard below.

Table 1: Summary of National COVID-19 situation in the WHO-Epi-Week-10 of 2021

<table>
<thead>
<tr>
<th>Regions</th>
<th>New_Tested</th>
<th>New_Case</th>
<th>New_HF_Admission</th>
<th>New_Deaths</th>
<th>Positivity Rate</th>
<th># of Recovery</th>
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<td>0</td>
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<td><strong>9329</strong></td>
<td><strong>828</strong></td>
<td><strong>121</strong></td>
<td><strong>18.0</strong></td>
<td><strong>5210</strong></td>
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</table>

**** Positivity Rate is the Weighted Averages of Regional Distributions of Rates

- The number of COVID-19 confirmed cases in the regional states of Ethiopia is comparable with the number of laboratory tests done for COVID-19 in the region.

- There is no COVID-19 related update from Tigray regional state since October 04, 2020. The update depicted below (figure 5) is as of October 03, 2020 for the case of Tigray regional state.
The trend of number of COVID-19 confirmed cases in the country shows that another wave of the pandemic is happening in Ethiopia. It was in the month of August, 2020 (Epi-week-33 to 36) when the highest number of COVID-19 cases were recorded in the country (figure 6 and 7 below). This can be explained by the COMBAT campaign when there was increasing community-based laboratory testing for COVID-19.

The current increment in the number of COVID-19 cases may be attributed to the spread of the disease in the community due to relaxation of public health and social measures (PHSM) and fatigue around adhering to PSHM measures compounded by high risk of imported VOC.
iii. Other Epi-Surveillance Related Activities

There is ongoing travelers’ health screening at point of entries (POEs), follow-up of international travelers, 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, contacts of confirmed cases, SARI/pneumonia cases and community members, surveillance and assessment in school and congregated setting communities.

Fig. 7: Summary of monthly trend of COVID-19 situation in Ethiopia as of March 14, 2021.

Fig. 8: Summary of COVID-19 confirmed cases in Ethiopia as of March 14, 2021.
a. Contact tracing and follow-up:

- Contact tracing is a key strategy for interrupting chains of transmission of SARS-CoV-2 and reducing COVID-19-associated mortality.

- As of March 14, 2021:
  
  o A total of 327,129 contacts of confirmed cases have been identified. Of these, 1,768 contacts were identified in the WHO-Epi-Week-10.

  o Of total contacts, 295,368 (90.29%) have completed 14 days follow-up, while 701 contacts are still on follow-up.

  o 716 (0.22%) contacts have developed COVID-19 suggestive symptoms. Of these symptomatic contacts, 566 (79.05%) have tested positive.

- Overall, 31,491 (9.62%) of the contacts (symptomatic plus asymptomatic) have been tested positive.

- Contacts of the confirmed cases contributed for the 17.95% of the total cases. However, when there is transmission of the disease at community level, it is known that an individual acquires the disease from unknown contacts.
b. Rumors collection and verification from all sources

- COVID-19 related rumors are received from different sources: Call centers, Health facilities, Contact follow up, Self-report, Travelers follow up, Point of Entry (PoE), Community surveillance and Special Setting.

- As of March 14, 2021:
  - 364,853 rumors/alerts have been received and investigated. Of these, 2,791 rumors were reported in the WHO-Epi-Week-10.
  - 269,741 (73.93%) of the rumors/alerts have fulfilled the suspected case definition.
Fig. 10: Summary of COVID-19 rumor/alert investigation as of March 14, 2021, Ethiopia.

c. Point of entry and Quarantine related activities

- Since the start of the outbreak, 1,823,188 passengers have been screened at the Point of Entries of Ethiopia and 643,110 (35.27%) of them were screened at Bole International Airport.

- Of the total passengers screened, 36,124 were screened for COVID-19 in the Epi-Week-10.

- As of March 14, 2021, among the passengers coming with COVID-19 PCR test result certificates, 235,824 passengers (9,695 in Epi-week-10) had PCR negative certificates while 40 (1 in Epi-week-10) passengers with PCR positive certificates were identified during health screening. A total of 81 (3 in Epi-week-10) SARS-CoV-2 positive cases have been detected after arrival laboratory test.
IV. Laboratory related activities

- As of 14 March 2021, a total of 2,227,729 samples have been tested for COVID-19 by laboratories across the country.

- 49,326 laboratory tests were processed during the WHO Epi-Week-10.

- The positivity rate for the laboratory test is increasing from time to time which indicates that there are high number of positive cases among those tested for COVID-19.

- The laboratory test positivity rate for the WHO-Epi-Week-10 is 18.91%, which is higher compared to that of the preceding week (16.13%).
**Fig. 12: Summary of COVID-19 laboratory testing as of March 14, 2021, Ethiopia.**

<table>
<thead>
<tr>
<th>Region/City Admin</th>
<th>New_Tested</th>
<th>New_Tested_Positive</th>
<th>New_Facility_Deaths</th>
<th>Positivity_Rate(Weighted avg)</th>
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</thead>
<tbody>
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<td>39,279</td>
<td>7,647</td>
<td>81</td>
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<tr>
<td>Oromia</td>
<td>3,183</td>
<td>802</td>
<td>9</td>
<td>26.5</td>
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<tr>
<td>Sidama</td>
<td>1,096</td>
<td>391</td>
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<tr>
<td>SNNPRS</td>
<td>1,618</td>
<td>174</td>
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<td>Amhara</td>
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<td>Tigray</td>
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</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>49,326</strong></td>
<td><strong>9,329</strong></td>
<td><strong>118</strong></td>
<td><strong>17.9</strong></td>
</tr>
</tbody>
</table>

*Positivity Rate is weighted average of Regional Distn of Rates*
V. Case Management and Facility Readiness

- There were total of 5,210 newly recovered COVID-19 cases during the WHO Epi-Week-10, bringing the total number of recovered cases to 143,710.

- Among the currently existing COVID-19 cases, there are 467 patients in severe clinical condition which is higher than the number of patients in severe condition a week back (436).

- The number of COVID-19 severe cases with severity condition are increasing from time to time while the number of cases with no symptom in treatment centers are decreasing (Figure 13 below). This indicates that there is an increased occurrence of COVID-19 cases with severity signs and admission priority is being given for those with critical and severe conditions symptoms.

- Home Based Isolation and Care may be playing the major role in the management of COVID-19 cases with no/mild symptoms.

![Graphs showing trend of COVID-19 cases in treatment centers](image)

**Fig. 13: Trend of COVID-19 cases in Treatment Centers (TC) based on the level of severity, as of March 14, 2021.**

**Home Based Isolation and Care (HBIC):**

- So far, 106,634 COVID-19 confirmed cases have been on HBIC. Of them 97,429 (91.37%), have recovered and 17 (0.016%) died.

- Of these, 5,142 cases have been enrolled to HBIC and 4,664 cases have recovered and two cases died in the WHO-Epi-Week-10.

- As of March 14, 2021, there are 10,306 cases on HBIC.

- So far, 1,580 (56 of them in the Epi-Week-10) of the cases have been transferred from treatment centers to HBIC after improvement.

- So far, 502 (28 of them in the Epi-week-10) of the cases have been transferred from HBIC to treatment centers for better care.
VI. Risk Communication and Community Engagement (RCCE)

- Daily press statement is being given on COVID-19 situation on daily basis through Mass Media.
- COVID-19 related key messages and updates shared on social media.
VII. 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 Minister, is being conducted to oversee and guide the response efforts.

VIII. Challenges and Way Forward

a. Challenges

- There is shortage of appropriate facilities to manage severely ill and critical patients as the number of patients in need of the Intensive Care Unit (ICU) has risen sharply.
- Happenings of super spreading events-Mass gatherings with poor physical distancing and facemask use which exacerbates the spread of COVID-19.
- Poor public adherence to the public health and social preventive measures.
- Poor adherence to public health and social measures by public figures and leaders
- Weak public health and social measures enforcement by the concerned bodies.
- Increasing number of cases being detected in the community and congregated settings.
- Poor attention provided to COVID-19 at all levels by all responsible bodies in particular at subnational level.
- Low stock status of personal protective equipment.

b. Way Forward

- Enhancing law enforcement to enhance public health and social measures by all responsible bodies
- Training selected health professionals on COVID-19 vaccines and distribution of the available vaccines nationally.
- Intensify risk communication and community engagement activities.
- Strengthened collaboration and coordination with key stakeholders and partners.
- Advocate and strengthen Home Based Isolation and Care (HBIC).
- Conduct intensive testing of high-risk population group and contacts of confirmed cases for COVID-19.
- Enhance technical support, coordination and timely and accurate information sharing at all levels.
- 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.

• Strengthen and sustain other essential health services besides COVID-19.

IX. COVID-19 Related News:

• The World Health Organization (WHO) has urged countries not to pause COVID-19 vaccinations, as several major EU member states halted their rollouts of the Oxford-AstraZeneca jab. It said there was no evidence of a link between the vaccine and blood clots.: [https://www.bbc.co.uk/news/world-europe-56404542](https://www.bbc.co.uk/news/world-europe-56404542)

• The European Union’s top drug regulator said it is still firmly convinced that the benefits of AstraZeneca PLC’s Covid-19 vaccine outweigh the risks, after a string of nations in the bloc temporarily halted the use of the shot over blood-clot concerns.: [https://www.wsj.com/articles/astazeneca-covid-19-vaccines-benefits-outweigh-risks-says-eu-11615902459](https://www.wsj.com/articles/astazeneca-covid-19-vaccines-benefits-outweigh-risks-says-eu-11615902459)


• Spain, Germany, France and Italy have become the latest European countries to temporarily halt the rollout of the Oxford-AstraZeneca COVID-19 vaccine over a small number of blood clot concerns, going against the advice of international medical agencies as a third wave of infections looms over the continent.: [https://abc7news.com/amp/astrazeneca-vaccine-covid/10420779/](https://abc7news.com/amp/astrazeneca-vaccine-covid/10420779/)


• Portugal will be removed from the "red list" of countries from where travel to England is banned after 04:00 GMT on Friday, the Department for Transport has announced. But Ethiopia, Oman, Somalia and Qatar will be added to the travel ban list.: [https://www.bbc.com/news/uk-56408556](https://www.bbc.com/news/uk-56408556)


X. Public Health Policy Recommendation

Advice for the Public:

• The World Health Organization (WHO), the European Medicines Agency (EMA) and other medical agencies have reaffirmed that there is no link between the Oxford-Astrazeneca COVID-19 vaccine and blood clotting in patients. The Federal Ministry of Health, Ethiopian Food and Drug Administration and Ethiopian Public Health Institute will continue safety monitoring of the vaccines to ensure public safety.

• For any individual confirmed to have COVID-19 and who is candidate for Home Based Isolation and Care:
  o 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

<table>
<thead>
<tr>
<th>MOH/EPHI/Region</th>
<th>Facebook page</th>
<th>Toll-free hotline</th>
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## COVID-19 updates and sources of evidence:

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<th>Source</th>
<th>Link</th>
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<tr>
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</table>
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.ephi.gov.et

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Telegram: https://t.me/EthPHI
Call: 8335/952 (TOLL FREE LINE) or 011 276 5340
Email: ephieoc@gmail.com or phemdatacenter@gmail.com