



World Health Organization

WHO  
Country  
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# EMERGENCY AND HUMANITARIAN ACTION (EHA)



## WEEKLY UPDATE / ETHIOPIA



World Health Organization (WHO)

Week 4 (From 21 to 27 January 2008)

Emergency and Humanitarian Action (EHA)

### HIGHLIGHTS

- **Acute watery diarrhea epidemic almost under controlled and suspected measles cases in Ethiopia.**
- **Iodine Deficiency Disorder remains Public Health problem in Ethiopia.**
- **Development of National Appeal for 2008 Emergency Response in progress in Ethiopia**
- **Security still remains a real concern in Somali Region**

### Ethiopian Profiles

**Location:** Horn of Africa  
**Population:** Approx. 77,400,000  
**Surface:** 1.1 million sq km  
**Capital city:** Addis Ababa  
**Regions:** 9; **City Administrations:** 2  
**Refugees:** 85,965  
**IDPs:** 300,000 to 400,000



Map of Africa showing Ethiopia

### I. GENERAL SITUATIONS

#### Disease Out-break Situations in Ethiopia

##### Acute Watery Diarrhea Epidemic

- ⇒ Health surveillance data from the FMOH continued to show that AWD cases have significantly decreased nationwide. According to FMOH, Oromiya and Somali regions reported no new cases during the last four weeks, while one case was reported from Chifra woreda in Afar Region in the week 1 (2008).
- ⇒ Suspected cases, however, were reported in Degahamedo woreda, Degahabur Zone, Somali Region. Case investigation is on going with the support from WHO.
- ⇒ The epidemic is controlled in the other previously affected regions in Ethiopia months ago.



A Child with measles in Somali Region

##### Measles outbreak Situation

- ⇒ In 2008 there were 113 suspected measles cases and no deaths nationally in 14 zones as of 27th of January 2008: 2 outbreaks in 2 zones in Somali Region (Gode: 45 cases and Kelafo: 45 cases) and 17 sporadic cases in 4 regions (Oromiya: 9 cases, SNNPR: 5, Hareri: 2 and Afar: 1).

##### Meningitis cases in Jijiga, Somali Region

- ⇒ This week two (2) suspected cases of cerebro-spinal meningitis (CSM) were reported from Karamara hospital in Jijiga.
- ⇒ It concerns two girls of 9 years old from neighboring villages of Jijiga and 13 years old from Jijiga town. Unfortunately the girl of 9 years died and currently the 13 years old patient is in coma.
- ⇒ Laboratory investigation confirmed gram-negative bacteria. Further investigation is on going to isolate the causal agent.



WCO Staff during the retreat in Awassa, SNNPR / December 2007

## I. GENERAL SITUATIONS (2)

### Iodine Deficiency Disorder in Ethiopia

- ⇒ Iodine deficiency disorder (IDD) has been a public health problem in Ethiopia. Two national surveys conducted over the past 25 years have clearly indicated the worsening trend of IDD in the Ethiopian population. The prevalence of goitre rate increased from 26% in 1981 to 40% in 2005.
- ⇒ Ethiopia was among the countries that embarked on universal salt iodization early enough in 1995/96. According to survey results about 80% of the household had access to iodized salt by 1998. Unfortunately the situation did not last long as there was a major disruption in the national program due to the Ethio-Eritrean political conflict in 1998-99.
- ⇒ Consequently availability of iodized salt dramatically dropped to about 4.2% in 2005 (National Micronutrient Survey 2005).
- ⇒ Ethiopia is classified in to Category IV countries (Low access to iodized salt by households <20%).



Goiter Cases among children under five in Amhara Region

### National 2008 Appeal for Emergency Response in Ethiopia

- ⇒ Every year Ethiopia experiences emergency situations. The past two years drought, flood, disease outbreaks (AWD, blood diarrhea, meningitis, measles and polio) were recorded.
- ⇒ In addition malaria, avian influenza and rift valley fever remain health threats for Ethiopia.
- ⇒ In order to get prepared for possible emergencies, every year the government of Ethiopia initiates an appeal development for planning and fund raising.
- ⇒ The appeal development process is lead by the disease prevention and preparedness agency (DPPA) that is the government coordination body for emergency preventions
- ⇒ The appeal covers 4 sectors such as health, water/sanitation, agriculture and food security.
- ⇒ The sectoral line ministers and humanitarian agencies are involved in the appeal development process.

### Humanitarian Situation in Somali Region

- ⇒ The ONLF (rebel group) threatened to attack military escorts for humanitarian assistance in Ogaden.
- ⇒ ONLF also issued a threat to the President of Malaysia on 1st of January calling for the immediate cessation of all oil and other mineral exploration activities, and urge the oil exploration company, Petronas, to evacuate all its staffs from Ogaden.
- ⇒ According to the RHB, drought conditions in neighbouring Somalia have led to the migration of 4,200 households from Somalia to Geladin district, Warder zone.
- ⇒ Desert locust swarms have been observed in 8 districts and has resulted in the depletion of pasture in grazing areas of Mustahil, Kelafo and Ferfer Districts
- ⇒ The food security situation is anticipated to decrease as the dry season intensifies and milk productivity further decreases.



Population and animals Movements due to drought in Somali

### Coordination

- ⇒ The Health Partners' Forum holds and chairs by WHO will be held on 30th of January 2008 at WCO. The participants are from UN agencies and health NGOs.
- ⇒ This week WHO participated in the working lunch organized by UNOCHA to plan the HRF retreat that will be held in Debrezeit on 30th and 31st of January 2008.

## II. HEALTH CONSEQUENCES

### Acute Watery Diarrhea Situation in Ethiopia

- ⇒ The AWD epidemic occurrence in Ethiopia has significantly slowed down the provision of other health services in various health facilities. The health facility records show that there is dramatic dropping of vaccination coverage in AWD affected areas.

### Iodine Deficiency Disorder in Ethiopia

- ⇒ The Ethiopian population, especially children under five years old and pregnant and lactating women are exposed to IDD. The entire country is concerned and the highly affected regions are: Amhara, Oromiya, Tigray, SNNPR and B. Gumuz.

## III. ACTIONS

### WHO's Actions

#### Acute Watery Diarrhea Situation

- ⇒ Monitoring of AWD situation and surveillance activities are on going in all regions to ensure early detection of new AWD affected areas.

WHO Consultant discussing the way forward with the zonal health authorities in Gedee zone / Oromiya Region



#### Measles Outbreak Situation in Ethiopia

- ⇒ Measles case investigation is in progress to confirm the suspected cases from Afar, Oromiya, Hareri and SNNPR.
- ⇒ Joint RHB, UNICEF and WHO preparation for mass vaccination campaign for the entire Somali Region is on going.
- ⇒ Measles and polio vaccination, vitamin A administration and de-worming are planned to be conducted.
- ⇒ The mass vaccination for the entire Somali region is justified by the poor vaccination coverage in the region (less than 10% for all antigens). This is due to the poor health service coverage and security problem in the region.

#### Suspected cases of CSM cases in Jijiga, Somali Region

- ⇒ Laboratory investigation for case confirmation supported by WHO is in progress to determine the serotype.

#### Iodine Deficiency Disorder in Ethiopia

- ⇒ More than 90% of salt consumed is from local production. Factories are located along salted Afder lake in Afar Region
- ⇒ In order to address the problem of ODD in Ethiopia, a committee comprised of FMOH, EHNRI, UNICEF, Micronutrient Initiative (MI) and WHO was set up.
- ⇒ The objective of the committee is to identify priority interventions and develop action plan in order to address the iodine deficiency disorder (IDD) in Ethiopia.
- ⇒ The priority interventions identified are:
  - \* Review of Ethiopia legislation on USI;
  - \* Quality control of salt exploited and/or entering in the country;
  - \* Iodine supplementation to vulnerable population and
  - \* Supply of iodization machine to Salt makers in Afar Region
- ⇒ Necessary information and contacts are on going to revise the existing national salt legislation in Ethiopia.
- ⇒ Currently the EHNRI is developing national protocols and guidelines for salt quality control in Ethiopia. Two laboratories in Afar region and the national referral laboratory (EHNRI) in Addis Ababa have been identified for salt quality control. The procurement of laboratory equipment, reagents and rapid test kits is in process. There is plan to train staff from the three identified laboratories on salt quality control.

- ⇒ UNICEF has secured fund for iodized oil capsule procurement. A total of 1.9 million capsules were procured and already arrived in the country. The iodine supplementation exercise is scheduled to be conducted during the next expanded outreach strategy (EOS) round in May-June 2008. Only high risk areas will be targeted.
- ⇒ Twelve (12) iodization machines were procured and allocated in the salt production areas in Afar Region. The recruitment of experts to operate the machines is in process.
- ⇒ Also committees were setting up in Afar regional capital and in Afder zone, salt exploitation areas in Afar Region.

#### National 2008 Appeal for Emergencies in Ethiopia

- ⇒ Following the regular crises that Ethiopia experiences every year, the government of Ethiopia through DPPA, sectoral ministries and humanitarian agencies initiates annual appeal for fund raising.
- ⇒ The 2008 appeal for emergency response is under development. The FMOH with the support from UNICEF and WHO is leading the development of health and nutrition part of the appeal. Prior to this in November 2007, the FMOH, UNICEF and WHO conducted field assessments to identify health and nutrition needs.
- ⇒ Currently the development of the health and nutrition part of the appeal is in progress.
- ⇒ DPPA will be in charge of compilation and issue a national appeal for 2008 that will include all sector needs.

#### Somali Emergency operations

- ⇒ WHO has secured USD 696,570.00 from CERF to respond Somali health emergencies.
- ⇒ Transfer of fund from UNOCHA HQ account to WHO HQ account is done. WHO Country Office was provided with the allotment number late this week.
- ⇒ The contracts of WHO staff assigned in Somali region ended December 2007 will be renewed soon. It includes 2 national consultants (Jijiga and Gode zones), 3 surveillance officers (Gode, Kebedehar and Degahabur).
- ⇒ The recruitment of international consultant is in progress. The international consultant will be assigned in Somali Region to coordinate WHO Somali emergency response and provide technical support to the regional, zonal and district health authorities.
- ⇒ In addition WHO will recruit and deploy 2 more surveillance officers in Warder and Fik zones, that are the 2 military operation zones not covered by WHO yet.
- ⇒ Currently only one WHO staff (the surveillance officer) is in Somali Region providing technical support to Somali Region

### III. ACTIONS (2)

#### Other Ongoing Joint Activities

##### JICA health project in Amhara Region

- ⇒ This week WHO met with 3 staff from Japan International Cooperation Agency (JICA) to discuss JICA IDSR Support project in Amhara Region. The project is designed to support 20 districts in 3 Zones (N. Gondar, S. Gondar and West Gojam) in Amhara Region. The project is planned for 5 years.
- ⇒ The objective of the project is to strengthen the system of infectious disease prevention, control and response in 20 districts in Amhara.
- ⇒ The priority planned activities are staff training, adaptation of national guidelines, improvement of communication and information network, establishment of community working group, review committee at zonal, district and community level; and maintenance of laboratory equipment.
- ⇒ Two international staff will be based in the capital city of Amhara, Bahir dar to support project implementation.



WHO Team Meeting with JICA Team at WCO

##### Preparedness for possible Meningitis Epidemic in Ethiopia

- ⇒ Ethiopia being one of the countries lying in the “African Meningitis Belt, AMB” has been witnessing both endemic and epidemic episodes since 1902.
- ⇒ Also experts forecasted possible meningitis epidemic in the AMB in 2008.
- ⇒ For this purpose Ethiopian Government has taken steps in preparing for possible meningitis epidemic in the country this year.
- ⇒ In December 2007, Preparedness and Response plan for meningitis epidemic was developed and targets 55.5% of the total population (Total pop: 79.2 millions).
- ⇒ Planned activities are:
  - \* Social mobilization/Sensitization, IEC materials development;
  - \* Staff training and production of protocols and guidelines;
  - \* Surveillance strengthening;
  - \* Procurement of vaccines, drugs and laboratory supplies;
- ⇒ The total estimated budget to cover the above activities is USD 27,999,511.00.
- ⇒ Discussion and work sessions are on going with WCO to finalize the draft plan initiated by the FMOH.
- ⇒ Even before the finalization of the plan, humanitarian agencies including WHO have been sensitized by FMOH to support the proposal.

#### Other Partner Actions & Ongoing Programmes

##### HRF lessons learnt Planning Retreat in Debrezeit

- ⇒ In order to document lessons learnt on humanitarian response fund (HRF) funded projects, UNOCHA organizes two-day retreat in Debrezeit in Oromiya Region on 30th—31st of January 2009.
- ⇒ Participants are from UN agencies including WHO and NGOs that benefited from HRF the past two years.

##### Somali Emergency Response

- ⇒ To date, approximately 20,320 MT of relief food commodities have been dispatched to the military operation zones.
- ⇒ WFP is currently considering initiating school feeding

in 200 schools in the conflict areas

- ⇒ The Regional Health Bureau is planning to conduct Integrated Management of Neonatal and Childhood Illnesses (IMNCI), Nutrition and WASH training in response to the health and health related emergencies in the region.
- ⇒ UNFPA has deployed a coordinator to Jijiga to work on reproductive health aspects of emergency response. UNFPA has provided reproductive health kits to MDM mobile health teams
- ⇒ UNICEF has deployed nine (9) mobile health teams to the five military operation zones. The teams provide basic health services including vaccination to the accessible population in the five military zones in Somali Region.

### IV. COMMENTS

##### Acute Watery Diarrhea Situation in Ethiopia

- ⇒ The significant decline in the number of AWD reported cases need a continuous close follow to ensure the full control of the epidemic in Ethiopia.
- ⇒ Assessments and review meetings are needed to document lessons learned on the epidemic and its response.

##### Iodine Deficiency Disorder in Ethiopia

- ⇒ Only the revision and application of a new national salt legislation coupled with the application of a national universal salt iodization program will protect the innocent population of Ethiopia, specially children under five years old and pregnant and lactating women more vulnerable.

## V. ANNEXES

### Measles Outbreak Situation

#### Suspected Measles Cases and Deaths, Ethiopia, 2008, As of 27 January 2008

Region	Zones	Cases	Deaths
Somali	Gode	45	0
	Kelafo	45	0
Oromiya	W. Showa	1	0
	N. Showa	3	0
	Bale	1	0
	Ilubabur	2	0
	E. Wellega	5	0
	W. harerghe	1	0
SNNPR	Sheka	1	0
	Sidama	1	0
	Hadiya	3	0
	Guraghe	1	0
Afar	Zone 2	1	0
Hareri		2	0
<b>Grand Total</b>		<b>113</b>	<b>0</b>

Source: WHO EPI Team

