



Ethiopia launches HPV and COVID-19 vaccination integrated campaign: 17.9 million population targeted

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Ethiopia conducted a nationwide HPV and COVID-19 vaccination integrated campaign, from May 2–12, 2023. The campaign targeted >17 million people. The campaign integrated the identification and registration of obstetric fistula mothers, clubfoot cases, zero-dose children for immunization, and malnourished children.

According to the MOH report released, national coverage of COVID-19 was 14.32 million (79.7%). A total of 43 CGPP staff (5 secretariat and 39 field staff) participated, and 28 vehicles were deployed for vaccine and logistical transportation for the campaign in the CGPP implementation areas.

>>> EDITORIAL

Increasing internal displacement in Ethiopia and concern about health implications

BY FILIMONA BISLAT (MD, MPH),

CGPP SECRETARIAT DIRECTOR AND SENIOR REGIONAL TECHNICAL ADVISOR

Displacement is a complex issue that significantly impacts populations worldwide. In Ethiopia, internal displacement is influenced by multiple factors, including prevailing specific needs in rural people, severe droughts, and conflicts. The ongoing conflict in the country is expected to increase the number of internally displaced people (IDPs) and create numerous IDP settlements. Consequently, there is a growing concern for the health and well-being of millions of IDPs, particularly children under five who are susceptible to disease outbreaks due to overcrowding, poor sanitation, lack of safe water, and low immunization levels.

IMPACTS OF DISPLACEMENT ON CHILDREN UNDER 5

The living conditions of internally displaced populations in Ethiopia pose significant health risks, especially for children under five.

Data on internally displaced populations and the causes of displacement were collected from the United Nations High Commissioner for Refugees (UNHCR) and the International Organization for Migration (IOM), and the study period covered the site assessment round 32, conducted between November 2022 and January 2023, which included 2,472 accessible sites in Ethiopia, excluding the Tigray region.

The data from the IOM site assessment revealed that during the specified period, approximately 3.14 million IDPs (579,672 households) were displaced across Ethiopia. The UNHCR's data indicated that 68% of IDPs were displaced due to inter-communal conflicts, 19% to drought, and 6% to seasonal floods. However, the ongoing internal conflicts currently many organizations are believed to be high and estimated to be more than double the previous study.

Immediate action should be taken to avoid any outbreak, like supply of water and shelter and provision of vaccination for vaccine-preventable diseases, particularly polio, measles, cholera, COVID-19, and others. Addressing the root causes of internal displacement, particularly man-made conflicts, and strengthening the resilience of individuals, communities, and local governments are crucial steps in avoiding displacement and finding durable solutions for affected populations. Community-based interventions should focus on quick-impact projects, such as rehabilitating community infrastructure and providing permanent shelter for return areas, to promote stability and well-being among IDPs in Ethiopia.

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Engaging religious leaders to Boost COVID-19 Vaccination



by Sr. Alemnesh Teka, Program Officer,
CGPP Ethiopia

*“My injection fear
is not greater than
the communities’
benefit”*

PRIEST ESHETU

Father Eshetu is a religious leader serving as a priest for an Ethiopian Orthodox Tewahido Church in Moyale Town of Oromia Region. He lives in one of the CGPP Ethiopia implementation areas in the Oromia region of Moyalle Woreda at Tuka Kebele and becomes exemplary to the communities by taking the initiative with getting the COVID-19 vaccination. According to him, there is no vaccine hesitancy related to religious contemplation, instead, there are people and religious leaders who are struggling for change for the wellbeing of the community. Priest Eshetu is keen on advising the community and promoting the advantages of immunization and encouraging them to get vaccinated.



He said, “I was always scared to get an injection, however, in order to enhance the communities’ interest, I took the initiative to get the COVID-19 vaccination”

He said that after we got the information about vaccinations from health workers and volunteers, we disseminate the information to our community members. We recognize that the communities have no negative attitude toward the COVID-19 vaccine, it is just that there was no adequate information about it.

POLIO CORNER

THE LATEST ON THE BATTLE TO ERADICATE POLIO

Summary of AFP Surveillance indicators by Region , Ethiopia Jan 01 – Jun 30, 2023												
Regions	Expected Cases (2023)	Reported (this period 2023)	Reported (same period 2022)	Reported this Week	NP-AFP Rate (annualized) 2023	NP-AFP Rate (annualized) 2022	Stool Adequacy (%)	Stool Cond. (%)	NPENT (%)	Compatibles	VDPV Cases	WPV Cases
A ABABA	21	16	17	0	3.0	3.4	94	100	12.5	0	0	0
AFAR	21	6	6	0	1.1	1.1	83	100	16.7	0	0	0
AMHARA	211	129	178	2	2.4	3.5	94	100	5.5	0	0	0
B/GUMUZ	11	9	18	0	3.3	6.5	100	100	0.0	0	0	0
D/DAWA	4	4	3	0	4.0	3	75	100	0.0	0	0	0
GAMBELLA	8	5	5	0	2.5	2.9	60	100	0.0	0	0	0
HARERI	2	0	3	0	0.0	6	0	0	0	0	0	0
OROMIA	436	285	320	15	2.6	3.1	94	99	2.8	0	0	0
Sidama	60	39	44	3	2.6	3.1	94	100	2.5	0	0	0
SNNPR	147	103	153	4	2.8	4.3	97	100	2.9	0	0	0
SOMALI	69	51	53	4	3.0	3.1	98	100	11.8	0	0	0
South West	36	35	54	1	3.9	6	100	100	2.9	0	0	0
TIGRAY	53	31	0	0	2.3	0	97	100	10.0	0	0	0
NATIONAL	1079	713	854	29	2.6	3.3	95	99	4.5	0	0	0

Week 26,2023



ETHIOPIA COMMEMORATES THE 2003 AFRICAN VACCINATION WEEK

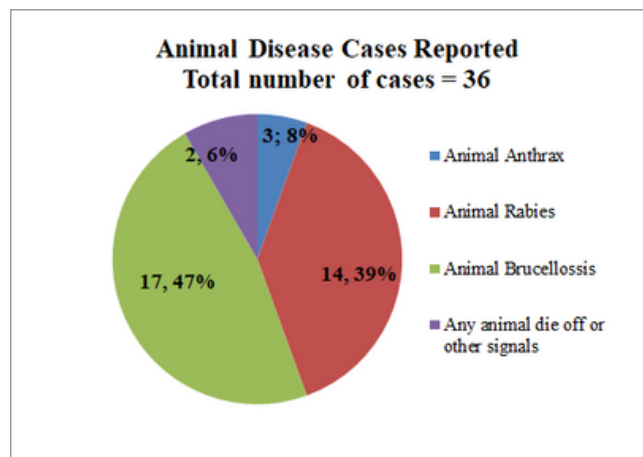
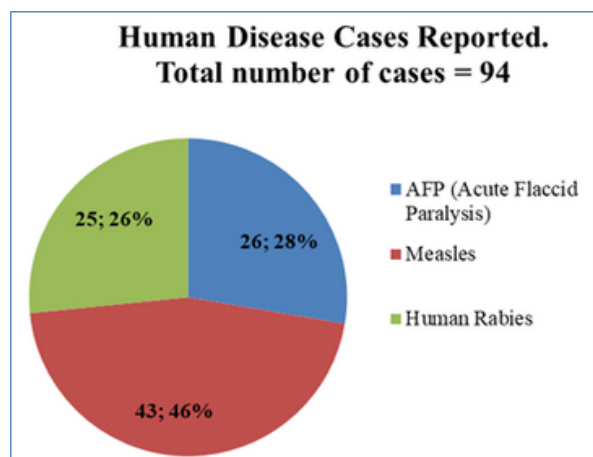
Ethiopia commemorated the 2023 African Vaccination Week (AVW) with the theme “The Big Catch up” to reach zero-dose children prioritizing those in conflict-affected communities and internally displaced people. The AVW is led by the Ministry of Health and the World Health Organization and implemented by countries in the African region to promote the use of vaccines and highlight the collective action needed to protect people against vaccine-preventable diseases.



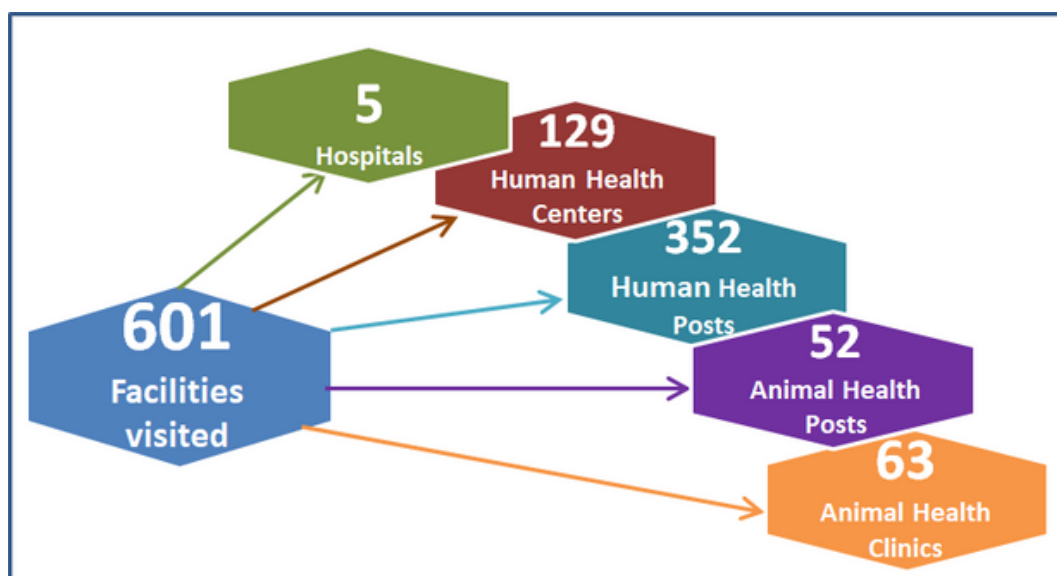
African Vaccination Week is an annual event celebrated during the last week of April. This year, in Ethiopia, it was synchronized with the national-level advocacy workshop on Measles SIA surveillance performance and epidemic response HPV and Covid-19 and held in Jigjiga Town of Somali Region on March 25 – 26, 2023. Present at the event were representatives of the Ministry of Health, the regional health bureau, EPHI, and religious groups. The CGPP Secretariat staff and partners field office staff members were also among the attendees.

SURVEILLANCE AND SUPERVISION UPDATES

Human and Animal Disease Cases Reported through ODK from CGPP implementation Areas (April 1 to June 30, 2023)



Facility-level supportive supervision conducted by CGPP Secretariat & implementing partners (April 1 to June 30, 2023)



COVID-19 UPDATES

Total number of reported cases

Updated on July 2, 2023

Laboratory test	➔	5,559,380
Total cases	➔	500,943
Total deaths	➔	7,574
Total recovery	➔	488,155
Total Vaccinated	➔	54,206,986

COVID-19 Vaccination Progress

Overall Target population and achievement for COVID-19 vaccination coverage

Total Population
66.8 million

Total doses administered
(54,290,187)

People completed vaccination series
(37,796,736)

People received at least one dose
(44,285,561)

Total dose administered by Gender

	14,892,271 (38.5%)		23,818,768 (61.5%)
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IMMUNIZATION DATA QUALITY SELF-ASSESSMENT IN AFAR AND SOMALI REGIONS, ETHIOPIA (FIRST ROUND)

Melaku Tsehay (MPH, PHD), Gavi Program Advisor, CGPP Ethiopia

BACKGROUND:

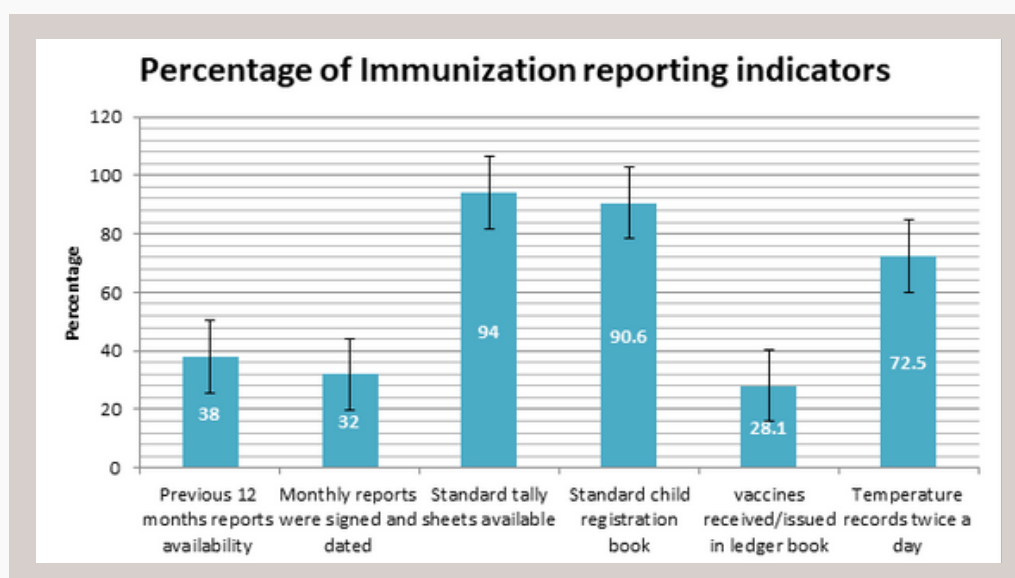
The trend of data quality and immunization coverage is becoming an increasingly significant aspect of an expanded immunization program (EPI). Administrative coverage estimates are required to monitor performance in a continuous and timely manner, although their accuracy is frequently questioned. The utilization of routine information for decision-making at all administrative levels in Ethiopia is restricted, which has been attributed to the low data quality of regular health information. As a result, of this data quality self-assessment, the overall data quality monitoring systems were examined, and healing remedial measures were implemented in the Gavi project implementing areas of Afar and Somali region.

METHODOLOGY

Methodology: a cross-sectional study was employed in the evaluation of routine immunization data quality self-assessment in selected health facilities and woreda health offices/ lower districts in Afar and Somali regions. Data were collected by using two WHO data quality assessment tools (Verification Factor and quality index) at the Woreda health office and health facilities levels through a desk review of immunization data reported in the past 6 months following core indicators of Measles and Penta 3. Data were analyzed using SPSS version 25.0 and the WHO accuracy ratio and quality index analysis dashboard.

RESULT

Overall, 38% of the health facilities/Woreda health offices had previous 12-month summary reports available, and 87% of the reports included a recent 6-month report. The findings revealed that at the time of the evaluation, 94% and 90.6% of health facilities had standard tally sheets and child registration books available and in use. Overall timeliness and completeness for the previous six months' report were 50.5% and 55.5%, respectively. More than half (67.4%) of the monthly reports had no date and were not authored and signed by the responsible person.

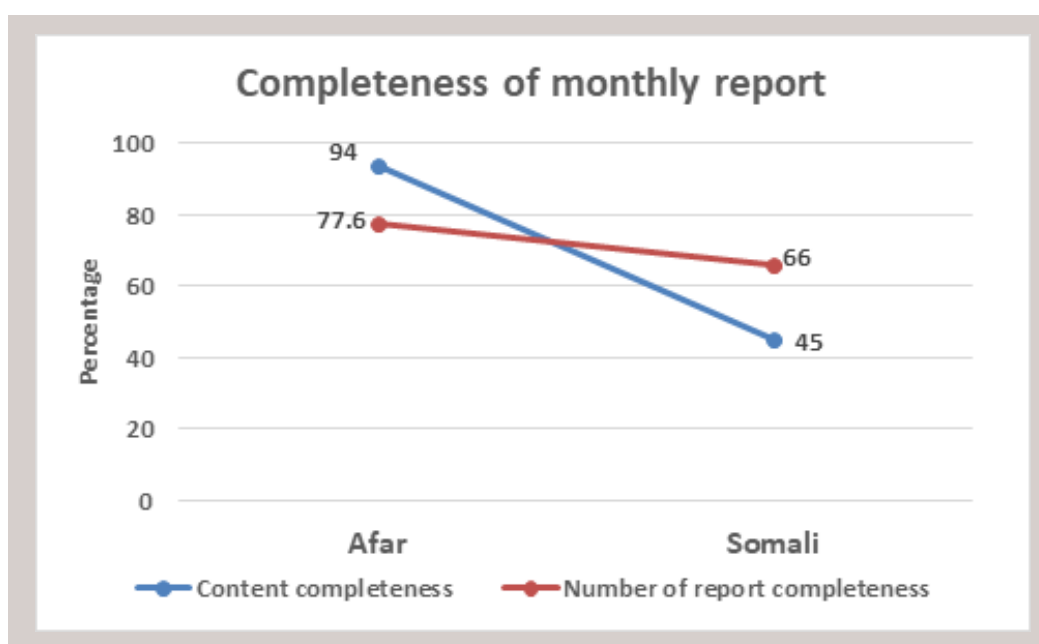


FIRST-ROUND IMMUNIZATION DATA QUALITY SELF-ASSESSMENT IN AFAR AND SOMALI REGIONS, ETHIOPIA

Melaku Tsehay (MPH, PHD), Gavi Program Advisor, CGPP Ethiopia

RESULT

The total internal verification factor for Penta 3 and measles at the Woreda health office and health center levels was under-reporting, whereas the health post levels were over-reporting. Both the health centers and health post levels monthly report findings for the external verification component revealed over-reporting for Penta 3 and measles indicators. According to the observed data quality monitoring system, the overall quality index score at Afar and Somali region woreda health offices, HCs, and HPs was 54.2%, 66.1%, and 56.1%, respectively. The WHO established an 80% minimum standard for QI scores at all levels. This is visible under the criterion.



CONCLUSION

Both the health centers and health post levels monthly report findings for the external verification component revealed over-reporting for Penta 3 and measles indicators. According to the observed data quality monitoring system, the overall quality index score at Afar and Somali region woreda health offices, HCs, and HPs was 54.2%, 66.1%, and 56.1%, respectively. The WHO established an 80% minimum standard for QI scores at all levels. This is visible under the criterion.

Thank you for your contribution

Your contribution to this newsletter is highly appreciated. Without your valuable contribution, it is hard to reach our audiences with messages that are worth reading. We need to collaborate and exert more efforts together.

CGPP Ethiopia receives guests from CGPP headquarters and Uganda Secretariat

Mrs. Gena Ruocco Thomas, the CGPP HQ Knowledge Management and Communications Advisor, made a field visit to CGPP Ethiopia on June 26-30, 2023. She had a meeting with the secretariat staff and provided orientation on Microsoft O365 and delivered a half-day orientation to the CGPP secretariat and partners staff on storytelling. Accompanied by Mrs. Bethlehem Asegdew, she traveled to the Sitti Zone for a field trip and visited the Ayesha Woreda Dewale transit point vaccination site.



Visited mothers in Aysha Woreda

Gena also discussed with program implementing partners' representatives (CRS and Harrarge Catholic Secretariat), CGPP community volunteers, health extension workers, woreda health office representatives, mothers, and religious leaders, and visited two health facilities.

Visit at the Dawale transit vaccination point

Dr. Herbert Muhumuze, the CGPP Uganda Country Program Manager made an experience sharing visits to CGPP Ethiopia from May 22-27, 2023. During his visit, he met with CGPP secretariat staff and discussed on program implementation of CGPP. He made a 2-day field trip to South Omo Zone accompanied by Dr. Filimona and Amref Health Africa staff.

On his field visit, Dr. Herbert observed the CGPP Ethiopia community-based surveillance activities, linkages between the CGPP community volunteers and health extension workers, the documentation at health facilities, the One Health Task Force function, the collaboration of CGPP with the government health system at all level and overall the project activities.



Visiting a health facility in South Omo