



An International Medical Corps staff member supervises supplementary immunization activities.

Ongoing conflict in Tigray, Ethiopia, has led to a surge of dangerous disease outbreaks, including measles and cholera. Measles is one of the most contagious diseases and is the leading cause of death, blindness, deafness and brain damage in children under the age of 5. Tigray faces a persistent threat from vaccine-preventable diseases, particularly in the towns of Adwa, Endabaguna and Shire.

Measles outbreaks were announced in Shire town on March 17, in Asgede on April 10, and in Endabaguna and Seymti Adiyabo on April 27. There were reports of further suspected measles cases from an additional 10 woredas in the region.

International Medical Corps Response

Since January 3, following the report of four suspected index cases from Suhul Hospital in Shire town, International Medical Corps has played a key role in the measles outbreak response by providing financial and technical support for active case searches and facilitating referrals through its surge team and mobile health and nutrition teams (MHNTs). After the outbreak was officially declared on March 17, the Tigray Regional Health Bureau (TRHB) developed a response plan and formally requested our support for the intervention. With the DG ECHO's crisis modifier fund, International Medical Corps, in close collaboration with the District Health Offices and the Regional Health Bureau, immediately began work to combat the outbreak in Asgede.

While response activities are still ongoing in Shire town and Asgede woreda, we have successfully implemented key responses under the following pillars in both locations.

- **Strengthened coordination** by re-establishing the Rapid Response Team (RRT), regularly communicating with Woreda Health Office experts and organizing meetings for partners, including representatives from the TRHB and World Health Organization (WHO). We also have provided support vehicles to facilitate outbreak responses.
- **Conducted training** sessions by providing vaccine-preventable diseases training for 69 healthcare workers (HCWs), measles outbreak and response management training for 25 HCWs, and community and event-based surveillance. We also have strengthened active case-finding training for 20 health extension workers and 14 village health leaders.
- **Strengthened immunization** by reinforcing routine immunization, providing training for 25 HCWs on epidemiology and cold-chain management, and supporting supplementary immunization activities (SIAs) for 21,760 children under 5.
- **Conducted risk communication and community engagement** (RCCE) and awareness-raising activities, including training on RCCE for 170 community mobilisers, religious leaders, community leaders, select schoolteachers and representatives of internally displaced persons (IDPs). We also provided structured

FAST FACTS

- As of May 6, there were 305 measles cases in northwestern Tigray, with four deaths. This puts the case fatality rate at 1.3% for the Northwest Zone and 3.4% in Asgede woreda.

OUR FOOTPRINT

- Since 2003, International Medical Corps has provided integrated health, nutrition, mental and psychosocial support, and water, sanitation and hygiene services in Tigray and northwest Tigray.

OUR RESPONSE

- International Medical Corps has conducted active case searches across 36,617 households, identifying 169 suspected cases.
- We have trained 125 healthcare workers on vaccine-preventable disease surveillance, measles outbreak response, case management and case-based surveillance.
- We have engaged 170 people in awareness-raising and risk-communication activities.

community awareness sessions on measles outbreak prevention and response to these people, because as trusted local figures, they are able to help correct misinformation, encourage timely vaccination and mobilize caregivers. We delivered key messages about measles through a mobile van to host communities and IDPs, and distributed 366 t-shirts featuring information about measles in local languages to IDPs and host communities during various sessions, to reinforce key messages and enhance community visibility.

These efforts have resulted in the re-establishment of the RRT and regular communication between Woreda Health Office experts, partners, the TRHB and the WHO, improving outbreak oversight and response efficiency. The training we have provided to healthcare professionals have increased local expertise in outbreak management, immunization and surveillance, while our outreach activities with community leaders and mobilizers have improved community knowledge, acceptance and participation in vaccination efforts, which is critical for disease prevention.

The measles outbreak is not yet controlled and our response is still ongoing. International Medical Corps plans to:

- conduct epidemiological assessments and surveillance, to determine both the presence of measles cases and whether transmission is ongoing;
- continue with simple measles case management at the MHNTs and health centers, and refer complicated measles cases to secondary healthcare for further management;
- maintain routine immunizations and SIAs;
- maintain active case-finding and community-reporting systems, for the early detection of measles and other outbreaks; and
- continue RCCE activities.