



International Medical Corps provided mpox sensitization for health workers as part of community-based surveillance training in Asgede and Endabaguna woredas, Tigray.

An outbreak of mpox has been confirmed in Moyale Woreda, Borena Zone, Oromia Region, Ethiopia. As of June 10, 18 confirmed cases had been reported. One fatality has been recorded, resulting in a case fatality rate of 5.6%.

In response to the mpox outbreak, the Ethiopian Public Health Institute (EPHI)—in collaboration with the World Health Organization—activated the national Public Health Emergency Operations Center (PHEOC) to coordinate the national response. Health officials have finalized an incident action plan to guide interventions, and have deployed technical officers to support local task forces at the woreda level. Officials have stepped up risk communication and community engagement (RCCE) efforts, with ongoing dissemination of press releases, health advisories and community alerts aimed at raising public awareness. Additionally, laboratory testing capacity for mpox has expanded, with EPHI and three facilities in Adama and Hawassa now fully equipped and actively conducting diagnostic testing.

International Medical Corps Response

Following the confirmation of mpox cases by the EPHI and the Ministry of Health, International Medical Corps has been actively collaborating with the PHEOC and national and regional health clusters to monitor the situation and support response efforts. International Medical Corps has taken part in coordination meetings at various levels to ensure that all actions align with the national response strategy and contribute to a cohesive, multisectoral approach.

International Medical Corps has successfully strengthened preparedness and provided the following activities.

Preparedness and coordination activities

- We have prepared a detailed mpox epidemic preparedness and response plan, outlining priority interventions and associated budget requirements to strengthen mpox detection, prevention and response at project sites.
- We have disseminated national mpox response guidelines, reference materials, RCCE, and social- and behavior-change communications to field teams for printing and distribution.

Logistics and supply chain

- We have conducted a comprehensive inventory review of existing personal protection equipment (PPE) and infection prevention and control (IPC) supplies across all warehouses to identify gaps and ensure readiness.
- We have established a daily monitoring system for tracking and internal coordination.

FAST FACTS

- As of June 10, 18 mpox cases had been confirmed across seven regions of Ethiopia, with one death (for a case fatality rate at 5.6%).

OUR FOOTPRINT

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

OUR RESPONSE

- International Medical Corps is actively supporting the national response in collaboration with the Ethiopian Public Health Institute and national and regional health clusters.
- We have developed and are implementing a comprehensive mpox epidemic preparedness and response plan.
- We have distributed mpox educational information to 13 health facilities and two sites for internally displaced persons.
- We have provided mpox-specific training for 47 health professionals in northwest and west Tigray.

Risk communication and community engagement

- We have distributed key mpox awareness messages and case definitions in local languages and English at 13 health facilities, to enhance public health communication.
- We have established a temporary isolation area at sites for internally displaced persons in Shiraro and Sema'etat, and are displaying awareness materials to support outbreak response efforts. We are working with local authorities to establish a permanent isolation area in government facilities.

Capacity building and field support

- We have delivered onsite training and coaching to 17 health workers at Rawuyan Health Center in Kafta Humera woreda, focusing on mpox clinical presentation and case management.
- We have integrated mpox sensitization into community and event-based surveillance training in Asgede and Endabaguna, targeting 30 health workers responding to the concurrent measles outbreak.

These efforts have resulted in strengthening the capacity of health workers on case definitions and adherence to prevention protocols, and increasing general awareness of mpox. Our focus on preparedness, in alignment with national response strategies, has strengthened coordination, monitoring and readiness.

There are currently no mpox cases in our operational area, but our preparatory action and response activities are ongoing. International Medical Corps has identified four priority areas for further immediate action.

1. *Health workforce capacity building:* Enhance early detection and case management skills among frontline health workers.
2. *Supply-chain strengthening:* Procure and preposition essential IPC and PPE supplies across operational areas.
3. *Surveillance enhancement:* Strengthen community-level surveillance and reporting systems for timely detection and response.
4. *Risk communication:* Scale up printing and dissemination of RCCE materials and launch public awareness campaigns focused on mpox prevention and control.