

**Document designed to create awereness for people covid 19**

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**Global Scientific JOURNALS**

GSJ: Volume 8, Issue 6, June 2020, Online: ISSN 2320-9186  
www.globalscientificjournal.com

# **Coronavirus 19 is a document designed to create awereness for people**



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**April, 2020  
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Thanks

First of all, I would like to thank my friends for allowing me to do this document more efficiently and for providing different supports. Therefore, I would like to express my gratitude to my close friends, who have seen the document, reviewed it, and made suggestions.

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### Abstract

*A novel respiratory disease, previously known as 2019-nCoV, SARS-CoV-2 Sudden Respiratory Syndrome 2019 (COVID-19) has attracted worldwide attention. May January 30th 2020 The World Health Organization (WHO) officially announces a public health emergency worldwide. Acute respiratory syndrome syndrome (SARS-CoV) has shown a high incidence of disease and epidemic. Therefore, the evidence shows that the growing evidence is that it is transmitted from person to person, consistent with many sent cases worldwide. Clinical manifestations of COVID-19 patients with fever, cough, fatigue, and a small number of patients showed signs of gastrointestinal infection; people with seniors and diseases: Acute respiratory distress syndrome (ARDS) and cytokine storms. Heat absorbs fat, so if you use more than 25 ° C of warm water during washing, washing clothes or other materials at this temperature, it will easily foam and has the potential to melt more of the virus. Discussion of the spread of the virus in COVID-19 and discuss current treatment and scientific advances The epidemic of coronary syndromes 2019 (COVID-19) has spread across China so China has learned that it can be stopped with due care. . Don't forget, without the fat on which the outer body is covered, it will easily break down. This is why soap and soap-based cleaners are considered to be the best protection. This is because the bubbles that form when soap is eliminated by the virus. It is supposed to last for 20 seconds when washing hands, as it allows for more foam. When the virus is inactive, it is determined by the type of material that it is time to disinfect. It has a material that lasts for 3 hours on cloth materials, 4 hours on copper and wood, 24 hours on cardboard, 42 hours on metal objects, and 72 hours on plastic. That is why it is not appropriate to dispose of cloth materials, because less than 3 hours of autoimmune virus will be able to get into the air when the cloth is inhaled. The protein will break down and the protein molecule will break down. More than 800 people have been diagnosed with corona in Ethiopia so far, but about 23 persons have been confirmed to be infected.*

**Keywords: Coronavirus Disease 2019 (COVID-19), origin, SARS-CoV-2, transmission**

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## CHAPTER ONE

### 1.1. Background of the document

May In December 2019, a set of tuberculosis cases, a newly discovered coronavirus-19, occurred in Hanoi, China. WHO has officially named the disease Coronavirus 2019 (COVID-19) and the Inter-Corvava-Virus Study Group (CSG) National Committee to name the new Coronavirus as both SARS-CoV-2, both released on 11 February 2020 Chinese scientists quickly identified SARS-CoV-2 in 2007. January 7, 2020 Short-Term Patient Sequencing of the SARS- CoV-2> genome. From 1st January In March 2020, a total of 79,968 COVID-19 kits were secured in mainland China, including 2873 people. Studies add to the evidence that the underlying epidemic (COVID-19) is growing steadily from person to person.

The World Health Organization (WHO) says that the spread of the Corona epidemic could be more widespread in war-torn Syria and Libya. Ahmed Mondhari, director of the Eastern Mediterranean Office of the Organization, warns that the presence of people infected with coronavirus in war-ravaged and war-torn countries is alarming. So far, five in Syria have been confirmed to have been infected with the virus.

He said that health services in countries where conflict, war and displacement are a threat, such as the Corona, could never be prevented. He added that the Libyan war has not been found and that the country's poor health infrastructure will prevent the country from seeking a solution if the epidemic threatens.

I am very concerned about the shortage of the respiratory system when it comes to the case of CERC # # corona virus. Victims may have difficulty breathing if the immune system is weak. In this case, they are obliged to use a mechanical device called a mechanical ventilator, which completely replaces their breathing system. Here, the mayor of New York, who has been hit by a severe coronavirus attack in the United States, has demanded 30,000 mechanical ventilators for the federal government, but the government is only able to provide 4,000. It is worth noting that

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demand and supply are not equal. This is about 19 million people in New York. In Spain, 50,000,000 people were placed in their homes to prevent the spread of the Coronavirus [COVID-19] in Spain. The bodies of the deceased were buried in the presence of friends and relatives. It is not possible to conduct a religious ceremony at a funeral; only worship is being conducted by one religious father. Hospitals in Madrid are treating victims of the Corona virus beyond their control. Health professionals are having problems with material shortages. There are thousands of health professionals in specialty care. It is unfortunate that Ethiopia, with a population of over ten million people, is said to have no more than 200 mechanical ventilators nationwide, and keep your poor people safe from this test.

### 1.2. Origin and transmission of SARS - CoV-2

Currently, coronavirus is the first in the Chinese city of China, but it has been described as a well-proven individual in the laboratory and is known as a cochlear-spronavirus. They can attack mammals, and as such, they were the first known in China, but also attacked by birds in the development of effective protection. Previously, six CoVs have been identified as a potentially viral infection, with low pathogenicity, mild respiratory symptoms similar to common flu. The other two were identified as serious and potentially fatal respiratory infections It is now known as a laboratory-confirmed individual that the genome recognizes that it is a sequence similar to 96.2%, but shares 79.5% of the identity for what is now known as coronavirus. According to the results of the virus genome anesthesia, virus source host and COVID-19 can be passed on from non-immune responders to unknown COPID-19 can occur in severe acute respiratory syndrome-2 mutations. Epidemiology: An unknown acute respiratory epidemic has begun in China since December 12, 2019, possibly related to the seafood market. Many studios suggested that bats could be a reservoir SARS-CoV-2. There is no such evidence.

Different covariates, COVID-19 occurs in acute respiratory syndrome - eg, MERS - CoV refers to respiratory tract infection (MERS - CoV refers to respiratory syndrome - MERS) - this is a single Corona-virus (due to CoV) - This is a virus that is similar to CoV, including because of a coronavirus. In the virus genome sequence-specificity, it was analyzed across COVID-19, showing a total of 96.2% Genomic sequence identity and human SARS-CoV-2 can share the

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same gene, protein sequence and physiological analysis revealed similar products in many species Observed in order to get more opportunity for alternate intermediate hosts, such as tulips, pangolins and snacks.

Human exposure to COVID-19 occurs with acute respiratory syndrome Syndrome-2 reported in 31.3% of patients with family or close contact with patients or friends in the toilet. Percentage traveled to Wuhan (city of China) and 72.3% of patients with non-Wuhan (Chinese city) transfers between health care workers 3.8% of COVID-19 patients were treated by the National Health Commission in China A February 14, 2020. In contrast, COVID-19 is reported to be the most frequently reported acute respiratory syndrome and MERS-CoV infections in healthcare workers in 33 - 42% of cases with acute respiratory syndrome (62-. 79%) was the most common infection pathway in MERS-CoV cases. Spreading host animals or wildlife directly over the internet Although the SARS-CoV-2 transmitter was suspected to be the main pathway, the source (s) and its distribution (COVID-19) were still in acute respiratory syndrome.

Genome structure and key virulence factors from COVID-19 pneumonia patient, worker in the Hanhan seafood market, whole genome acute respiratory syndrome virus (SARS-CoV-2), according to the previously known genotype-gene genome organization. The first SARS-CoV-2 sample means that each infection is expected to cause 1.4 to 3.9 new infections in the absence of any community members, while the Coronavirus map-out epidemic is underway, with the government reporting more than 410,600 people. Authorities have stated. Some of the earlier estimates in Wuhan (Wahu, China City), which has a population of 11 million people in central China, make some of the worst estimates (Wuhan-Hu-1 coronavirus (WHCV), COVID-19), a chronic respiratory syndrome with severe respiratory syndrome. MERS - CoV: Two-thirds of severe acute respiratory syndrome syndrome (SARS-CoV-2), according to the previously known gene-gene-genome organization, means that every infection is absent from any community members. The virus is expected to cause 1.4 to 3.9 new infections Specified two polymorphic probes are transcribed, the rest of the viral genome contains four essential proteins, the gene (s) glycoprotein, the small envelope protein, and the nanocomposite protein, as well as several complementary proteins as well as natural disease response. (Wu et al. 2020) Recent deep meta-



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transcriptomic sequences show specific genomic and physiological similarities COVID-19 occurs in acute respiratory syndrome.

### 1.3. What Do Ethiopian Learn From Italy?

In Italy (during the first arrests of 1 and 2 people), there was a lack of awareness about the virus. Surprisingly, many people have also ignored it. The problem that you are thinking of is that the problem of a distant country, that ends there, is that I have to deal with it. In many cities, shops were open, public markets didn't stop, the airport was not open at the time, the care was poor, everyone came in, went out, the youth relaxed, people gathered, and everything went on. The government had shown a serious lack of protection before the virus went into effect. No action will be taken against the community, no one will be told to leave your home even though the virus has taken effect after the virus has occurred. The mayors were walking around begging the man to stay. In Italy today hospitals are full of sick people. Young, old, no more. Even when a person dies, the cemetery is destroyed, and hundreds of people die like a leaf every day.

### 1.4. Things we still don't know about CoV-19 in Ethiopia

Although coronavirus was already present, the world has been well-known since December. Despite the great efforts of scientists around the world to find out more about the virus, there is still much we still do not know. Now we are all part of the lab to answer the controversial questions of this controversial virus around the world. Because the virus spreads around the earth, there is a chance that we are all vulnerable. The following important questions arise when a coronavirus is raised.

This is not only a very basic question but also an important question. In fact, there are hundreds of thousands of patients who have been diagnosed and diagnosed. However, this is a very small proportion of the number of people infected with the virus. Sometimes the number itself is incorrect. Because people are infected and do not feel any symptoms. It will be easier for researchers if a tool is used to quickly prove that people are infected. It is only then that the virus can spread quickly and be stopped.

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Generally speaking, it is difficult to establish the severity of the virus until the number of viral infections is known. In the present case, only about 1 percent of those who are diagnosed with the virus have died. But if there are too many people with the disease, the symptoms are less likely to be fatal. Therefore, in order to set the correct figure or rate, the exact number of patients must be known. The main symptoms of coronavirus are fever and dry cough. You need to pay attention to these. It causes headaches following respiratory failure and diarrhea in some patients. On the other hand, there are those who say that it is a full-blown smell for some patients. The important question is, for some patients, there are signs of nasal discharge and cough that look like flu symptoms. The main symptoms of coronavirus are fever and dry cough. Studies show that people can become infected without knowing that they are sick.

### 1.5. The role of infants in spreading the disease

Babies get really sick. However, when compared with other age groups, the symptoms of children are much less likely to die. In this sense, children are the most important communicators of the disease. The first is that they rarely show symptoms; In fact, there is no definitive study of how widespread this distribution is in children. The virus is said to be from an area near the animal market in the Chinese city of Wuhan in late 2019. The coronavirus, called Sars-Cov-2, is similar to the virus that attacks the bat. Thus, it is highly likely that the virus transmitted from bird to other animal and then to man. In this process, however, the difficult and urgent question is: Who is the animal that transmits the virus between humans and bats? If this question is not answered, it is unlikely that the virus will ever re-emerge through this anonymous animal, even if the virus has been controlled worldwide. Flu and influenza occur more often in the winter than in summer, but there is no evidence that coronavirus can inhibit the spread of hot weather. UK government advisors have warned that there is no confirmation that the spread of the virus has decreased or increased. In general, however, in the summer, the spread of the disease can be even more severe in the winter. In addition to overcrowding, the symptoms of common colds in the winter can help.

- Why do some people show severe symptoms? CoV-19 is a mild illness for most people. But about 20 percent get the disease. why? Human immunodeficiency is one factor that is

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related to the type of disease and genetic factors can be taken into account. Understanding these factors can help people to take care of them.

- How long can the disease last? Can we take it again? There are many things, though, and there is limited evidence to support how often the virus can attack us. In order to win the virus, patients must develop sufficient immunity. However, since the disease is only a few months old, it is often too short to provide extensive information and analysis. It is said that it is difficult to make sure that a second victim gets infected and that they are usually free. Knowing how often the disease can be harmed is important for future treatments and precautions, but no definitive information is available.
- Can the virus change its shape? Viruses always change their shape, but in the case of their genetic identity, it makes no difference. There is a general knowledge that the longer they last as a virus, the more likely they will be, but that is not a guarantee for coronavirus. The biggest concern now is that if the virus changes its shape, it will be challenging to develop one and the same immunity. Just as the experience with influenza is not likely to be caused by the flu, it may not be.

### 1.6. Strategic Objectives

The World Health Organization's purposes for this response are:

- ❖ Decrease in close relationships and reduce secondary infections
- ❖ Health care workers to promote dissemination events
- ❖ Identifying and caring for patients, including tailored care for infected patients;
- ❖ Describe important unknown identities regarding clinical weight, transmission and infection, and speed up the development of diagnostics, treatments and vaccines;
- ❖ Informing the general public of the disaster and its preparation information and prevent misinformation;
- ❖ Reduce socioeconomic impact through multi-stakeholder partnerships.

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This can be achieved through a combination of public health measures such as rapid identification, diagnostics and the management of infections, identification and monitoring of infections, health care settings in the prevention, implementation of companion health measures, public awareness and risk communication.

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## CHAPTER TWO

### 2. The organization of the presentation of the document

#### 2.1. The type of document

The study uses visual information from others and a descriptive study method. This document is run by annotation diagram. The rationale for choice of symbolic design is related to the narrative of facts and the purpose of it is to describe and interpret the trends of the events in which the characteristics and descriptions of the population are used (Creswell, 2003). In addition, annotation documents are focused on the purpose of describing the cause and effect of the variables between the variables provided (Saunders et al. (2003), and so far, the data are analyzed from a variety of sources. Document methodology is a method that helps to identify the general characteristics of an object or situation by exploring the general nature of a problem and its current state and establishing a future understanding based on the actual outcome.

#### 2.2. Presentation of the document

The orientation of the application will be applied to other literature and test the relationship between the present situation and its hypothesis. The emphasis is on creating awareness for the community, not to reach a general conclusion. Sometimes they develop a theory to try, and they include literary empirical assessments to identify questions to create awareness for the community, not to reach the conclusions they need to see. There are some historical examples to view a concept as a scientific prediction or description. In this interpretation, the theory or hypothesis changes (typically in terms of altitude or direction), noting that a concept is not intended to reach a conclusion but rather to reach a conclusion. Contains a change-based analysis to create awareness for the community, not to reach a definitive conclusion about the consequences of strategy.

This can be based on the literary literature and reviews that will be able to identify document problems and provide solutions.

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In general, high has been found to be economical and efficient to raise awareness for the community rather than to reach a conclusion. An individual who fulfills the benefits mentioned and the person who fulfills the overall document and the entire document is an approach that will be applied to achieve the objectives of the study.

### 2.3. Source of document information

#### 2.3.1. Secondary source of information

Secondary information refers to information collected by someone other than the user. Common sources of secondary data for social science are censorship, information collected by public health institutions, corporate records, and data collected for the purpose of other research. To create awareness for the community rather than to reach the conclusion of different documents, such as various reports, work reports;

### 2.4. Data collection tools

These are methods of fact-finding using the information gathering tools. They are tools for data collection. There is no doubt that an important part of the educational process, data collection, and documentation will be established. This is because the document enables the document holder to obtain relevant information or allows for the enrichment education or experience of others. In this regard, we are working on various processes and data collection tools. They include a wide variety of texts, especially in research and research, because the information gathered can help to raise questions. Or visual materials are carefully prepared to be read or viewed by the concerned documents.

### 2.5. Document Data Collection Process

Data collection the necessary information has been collected by exploring international documents and guidelines regarding the process. By exploring other literature, it is ultimately drawn from the experience of the documentary that has a similar or parallel mission.

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### 2.7. Data Analysis Method

This document uses a qualitative method of data analysis, and then approaches and ideas are developed to develop solutions based on the available information.

In other studies, the document was analyzed and, based on guidelines and international analysis, the types of information collected were collected together and identified important information.

In order to support and verify the results of the document, the results of the document are based on the information obtained by the entire data collection system in order to support and validate in the text.



## CHAPTER THREE

### 3.1. Global (International) Document Analysis

Seven new countries / territories (Africa region, Eastern Mediterranean region, European region, and US region) reported COVID-19 cases worldwide: More than 200 000 cases with three months to reach the first 10000 confirmed cases, and up to Only 12 days will reach the next 100,000. A new protocol has been developed as part of a positive antibody test in the general population to investigate the extent of COVID-19 infection. Topic: A new protocol for the public health pre-epidemiology test The COVID-19 virus emerged, some specific pathogens, identifying antibodies in the population, multiple virus identifiers and associated clinical and viral features of the virus. Studies examining these behaviors in different settings are critical to further our own and also provide the necessary information needed to validate and inform predictive models. Realization are giving.

As well as the HIV epidemic. In collaboration with technical partners, it has already implemented disease diagnostics protocols, and with MERS -CoV, measures to better understand these behaviors and how to use them are less effective.

Considering local settings and epidemiological features and quickly shared in an easy-to-read format, it is confined to many different settings around the world, and is very poor in understanding Ethiopia.

The latest protocol, a humorous diagnostic protocol with an age-related complication, is intended to provide key epidemiologic and serologic features for the COVID-19 virus in the general population. Specifically, the information from this protocol provides crucial information about the extent of the infection (measuring the presence of antibodies in the study population) in the general population, the age-specific incidence of infection, and whether a patient remains in the hospital for infection or no symptoms. . Or sub-infections are human fractions, and various scholars are commenting that the epidemic will have the greatest impact on the economy in



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Africa. The results of these tests, whether posted on individual sites / countries or more, allow for better estimation and characterization of key clinical, epidemiologic, and pathologic features COVID-19 virus, including:

- Key measures of epidemiology, for example, in the relationship between the rate of secondary infection and the rate of secondary infection, but no patient has any symptoms. The baseline birth rate of COVID-19 between infection and incubation period is COVID-19.
- ❖ Providing clinical assistance with COVID-19 infection and associated disease processes.
- ❖ Identify the causes and disseminations of transmission, and identify and understand the pathways of infection.
- ❖ Prevent infection prevention and control measures in health care facilities
- ❖ Psychological response following symptomatic COVID-19 infection.
- ❖ The incidence of infection, including an age-dependent dose of the antibiotic against the COVID-19 virus.

### 3.2. Virus load and expansion profiles

So far, six of the six World Health Organization members, including high-income and low and middle income countries, have been in at least one previous screening protocol. They have an additional 18 countries expressing their desire to implement one of the protocols. The World Health Organization will continue to support countries in them through diagnostic tests and providing clear and comprehensive protocols. For more information please contact for more information. [EarlyInvestigations-2019-nCoV@who.int](mailto:EarlyInvestigations-2019-nCoV@who.int)

### 3.3. Beware that current information about the CoV-19

Updated COVID-19 (COVID-19) virus from St. Mary's University Coronavirus Protection Task Force using data from John Hopkins University

1. The virus is lifeless and covered with fat.

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2. When it enters the eye, nose or mouth cells, it changes their behavior and produces undesirable and destructive cells.
3. Since the virus is not living and is a protein molecule, it does not die in its own time, but it dies in its own time. Depending on the temperature and humidity of the environment and the type of material on which the virus is infected.
4. If the virus does not have fat on the outside of the body, it will break down easily. This is why soap and soap-based cleaners are considered to be the best protection. This is because the bubbles that form when soap is eliminated by the virus. It is supposed to last for 20 seconds when washing hands, as it allows for more foam. Since the foam dissolves the fatty acids of the virus, the molecule breaks down and breaks down.
5. Heat absorbs fat, so if you use more than 25 ° C of warm water during washing, washing clothes or other materials at this temperature will produce more foam, so it will have more energy to melt the virus.
6. Alcohol or at least 65% alcohol mixes the virus.
7. The virus does not destroy any anti-bacterial drug because it does not live as a bacterium.

When the virus is inaccessible to the outside of the human body, the time of its disintegration depends on the material. It has a material that lasts for 3 hours on cloth materials, 4 hours on copper and wood, 24 hours on cardboard, 42 hours on metal objects, and 72 hours on plastic. This is why it is not appropriate to dispose of textiles, because less than 3 hours will disappear into the air when the virus disappears.

### 3.4. International preparation

They are based on the interpretation of the International Health Organization Case on COVID-19. "The transfer category is based on the" official data "data analysis and may be available to retrieve as more data becomes available. Countries / regions with multiple transmission types are classified into the top category. It has to be said that, as different categories describe, different

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states / territories / regions may have different transmission levels and other factors. Not all areas within a given country / region are equally affected. Terms

- ❖ Failure to link proven issues to community broadcasting through a wide range of transmission chains or promote positive investigations through related samples.
- ❖ External issues only indicate where all cases were reported outside of the reporting area.
- ❖ According to the research, common use of transportation in all cases reflects the spread of the flu.

Information for the european region comes from the european centers for disease control and prevention. International references to international health organizations may not always be the case for new issues due to differences in reporting quality, lack of background information and delay. It reflects on the real difference between yesterday and today. Who covid-19 status reports provides official certified census the covid-19 issues using different embedded standards and differences, so differences between world health organization (who) reports and other covid-19 data sources let us heed their advice.

### 3.3. Preparation and response

To view all technical guidance documents regarding covid-19, please refer to this article for testing laboratory time, advice on the use of a home care mask, and epidemiology, clinical management, infection prevention and control in health care environments, home care home care for suspected patients: coronavirus, disaster communication and community engagement and international surveillance for all infectious diseases (2019-ncov).

International health organization and working closely with the International Air Transport Association to provide guidance to all staff and airport staff in accordance with domestic requests.

They had formal and direct contact with member states where international health organization issues were reported. It is a global health organization to inform other countries and provide assistance as requested.

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Who is working with a network of researchers and other experts to coordinate the work of the world health organization: epidemiology, mathematics, diagnosis and virology, clinical care and treatment, infection prevention and control, and communication risk? The world health organization (who) has issued a temporary guide to those who have been updated.

The World Health Organization has developed a comprehensive disease prevention package that lists the essential biomedical tools. Essential medicines and supplies to care for patients with 2019 - nCoV.

Who recommends international, WHO to reduce the risk of transmission from animals to humans? Has published timely recommendations for international traffic related to the epidemic of coronavirus 2019. Enables research design to accelerate diagnostics, vaccines and treatments.

An interactive, web-based, knowledge-forwarding platform that provides online lessons to improve Open OSO. COVID-19 courses can be found here. Specifically, the International Health Organization has grown online: courses on the following topics: general introduction to emerging respiratory viruses including Coronaviruses (Arabic, Chinese, English, French, Russian, Spanish, Hindi, Russian, Portuguese, Serbian and Turkish); Clinical care for acute respiratory infections (available in English, French, Russian); Prevention and Control for Novel Coronavirus (COVID-19) (in Chinese, English, French, Russian, Spanish, Spanish, Spanish, Italian, Japanese, Spanish, English, French, Indonesian, Italian, Japanese, Portugal and Serbian) and is expanding in African countries, particularly Egypt, Kenya, South Africa, and 15 other countries, with all countries ready to respond to COVID-19 Work Plan Guidelines and COVID-19 Partners Forum (available in English and soon in more languages).

16 In Ethiopia, 16 people are infected, and the government is providing daily guidance for the first tests that are crucial for the pandemic outbreak. The information can be used to filter recommendations for follow-up and case definitions collected from the protocols, including identifying COVID-19's key epidemiology, distribution, severity, disease severity, and identifying practical models for action, such as case isolation, contact tracking, and exclusion. One such protocol was developed for the early COVID-19 cases and the first cases designed for the communication protocol to gain an early understanding of key clinical, epidemiologic, and

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pathologic features: a CVD-19 infection was found everywhere to set up a committee to monitor cases and reduce the spread and impact of the disease. To this end, the Government is providing guidance to the government and the necessary goals are being implemented.

According to the Ministry of Health, three more people have been diagnosed in the laboratory within the last 24 hours and three (3) people have been infected in the country. It has reached nine. The first patient was a 26-year-old Ethiopian, from Brussels Belgium on March 8, 2012, and a trip to Cameron on March 10, 2012, where she was diagnosed with the disease and went to the health facility for an examination. The Institute was confirmed to have been infected by the laboratory in March 19, 2012, in a laboratory report reported to the Ethiopian Institute of Public Health. Second and third patients are Ethiopians who are members of the same family of 14 and 48 years. Although the individuals showed no symptoms, they were closely monitored because they had close contact with an infected person. According to the Ministry of Health, 2020 the individuals were confirmed to be infected with a laboratory test on March 19, 2020.

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Worldwide [Cov 19] More than 600,000 people have been infected with the Corona virus. March 30, 2020	
Country	No people infected with the virus
1. The United States	105,016 people infected with the virus
2. Italy	86,498 people infected with the virus
3. China	81,394 people infected with the virus
4. Spain:	65,716 people are infected with the virus
5. Germany	53,340 people are infected with the virus
6. France	32,964 people infected with the virus
7. Ethiopia	16 people infected with the virus

Source (2020)

Worldwide [Cov 19] More than 600,000 people have been infected with the Corona virus. March 21, 2020		
Country.	victims	dead
U.S.A.	104,256	1,704
Italy	86,498	9,134
China	81,394	3,295
Total	65,719	5,138

Source (2020)

Worldwide, the number of coronavirus cases reached 607,239. It was reported that 27,674 people had died from the virus, and 134,288 had been hospitalized.

Registered as the highest victim and dead.

### 3.4. Routine Messages on Prevention and Control of the Corona Plague in Ethiopia

Wash your hands often with soap and water. If you can't get water or soap, clean your hands with over 60% alcohol-based hand sanitizer.

- ❖ Don't touch your face with unclean hands. Don't touch your eyes, nose and mouth, especially.
- ❖ Do not hug or kiss with anyone. In general, avoid any contact with people. Also, reduce the amount of time you spend with people.
- ❖ Do not go anywhere where a person is in a crowd! If you do, remember to avoid at least a meter or two of adult action so that the virus does not spread to you when you cough and sneeze.
- ❖ Cover your nose and forearm with your arm or socks to avoid passing the virus on to people who cough or sneeze. Dispose of used software immediately with a lid.
- ❖ If you can, don't leave home. In particular, if you are at high risk for coronary disease (ie if you are over 60, have heart disease, have asthma (if you have asthma, TB, have a disease, have other serious health problems), leave home unless you have a compulsive condition. Not recommended.
- ❖ Wash fruit with water before eating fruits and vegetables.
- ❖ If you have symptoms or symptoms of corona, isolate yourself and call 8335 or 952 to seek medical advice. Do not take painkillers other than paracetamol, for co-occurring headache and fever.

Protect yourself and your money from scammers / cheaters / dishonest healers without being misinformed. Whenever possible, keep in touch with the information provided by the World

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Health Organization, the Ministry of Health, the Community Health Institute, health institutions and professionals.

Share only the right information! If you do not think the information is accurate, consult a professional or all of the best people before sharing it and make sure to read it from a trusted source. Share tirelessly with word, print, and media to get this constant message delivered and behavior change! Together we can fight coronavirus infection (Nsubuga P, 2020)

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### CHAPTER FOUR

#### 4.1. For public registrations and recommendations

If you are not in the region where COVID-19 is distributed in Ethiopia, or if you do not travel from COVID-19, you have not been exposed to the disease. It's hard to understand You may feel worried about the flu. Get the facts from real sources to help you decide exactly (see FAQ). Ask the Directorate for International Health Organization for accurate information on COVID-19, whether a health care provider, national public health authority or your employer and COVID-19 is being distributed where you live. It is important to be informed and take the appropriate steps to protect yourself and your family (see preventive measures for everyone).

If you are in COVID-19 cases in our country, you need to take the risk of infection seriously. Follow the following: The National Institutes of Health's National Institutes of Health guidelines for most COVID-19 infections cause mild illness, which can make some people very sick and can cause some deaths. Although the highest number of young people in Ethiopia, the risk of the flu is lower compared to the elderly, the World Health Organization report states that older people, and those with previous health conditions (such as cardiovascular disease, chronic obstructive pulmonary disease), are at higher risk for chronic disease. (See safety precautions for people visiting or recently visited) (last 14 days) In areas where COVID-19 is distributed.

#### 4.2. Covid 19 Case descriptions

The international health organization updates the international monitoring of human infection with coronavirus (COVID-19). A document containing case definitions is provided below for a simple reference.

COVID-19 disease within 14 days of the onset of illness or history of traveling or living in an area reporting a migraine.

Any acute respiratory illness associated with a confirmed or potentially COVID-19 symptom will occur within 14 days of the onset and be confirmed by diagnosis;

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Explains a clinical presentation in the absence of an alternative diagnosis for a patient with severe acute respiratory illness (fever and at least one respiratory symptom, for example, cough, and shortness of breath;

Connection Definition - Contact is the person who has experienced the following exposure within the last two days and 14 days after the symptoms begin:

1. Meet face-to-face with a person who is face-to-face or certified in 1 meter and over 15 minutes;
2. Have direct physical contact with a possible or certified subject;
3. Direct protective equipment for a patient who may or may not have COVID-19 disease without appropriate personal use 1; or
4. As noted in other environmental risk assessments. Note: For verified cases, the connection time is measured within 2 days before the date the sample is taken, leading to the confirmation.

### 4.3. World Health Organization decision

The World Health Organization ensures the quality of the ongoing investigation and the commitment to share information in response to measures implemented in Wahain as well as regular information sharing. The evidence is that the epidemic is linked to exposures in a seafood market in Wuhan. Market Closed January 1, 2020. At this stage, there is no infection among medical professionals, Chinese authorities continue to conduct intensive surveillance and follow-up investigations and ongoing disease outbreaks. Of the 41 confirmed diagnoses, there is one death. This death occurred in a patient with a serious medical condition. China On January 12, she shared the Geneva Corona-Virus gene sequence, which is of great importance to other countries in developing specialized diagnostic tools.

The watchdog team first began its year-long program. Reported December 31, 2019 The World Health Organization is China's national office. Chinese authorities said in a statement on Monday. On January 7, 2020, they identified a new type of coronavirus (novel Corona-Virus,

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Nikova). Laboratory testing was conducted on all suspected cases in the search and retention of active cases. As the influenza, avian influenza, adenovirus, severe respiratory syndrome (SARS-CoV), Middle East Respiratory Syndrome (MERS - CoV) have been implicated.

May According to data released by the Chinese authorities on January 11 and 12, 41 patients were diagnosed for the first time in the city of Winche. Seven of the 41 diagnoses reported were critically ill. This is when one of the deaths mentioned above was reported by a patient with other underlying health problems. Six patients were released from the hospital. It shows the launch of the 41 certified CoV cases between 8 December 2019 and 2 January 2020. As of January 3, 2020, no further issues have been identified.

The clinical symptoms reported are primarily fever, with few having respiratory problems, and have been contagious with pneumonia in both lungs. National officials said that patients have been isolated and are receiving treatment at Hanhan Medical Institutions.

According to previous epidemiologic investigations, most of the cases were operators or tours on the wholesale and seafood markets. The government reported no clear evidence that the virus was transmitted from person to person. At present, no matter what happens with the novel coronavirus infection, it has been reported elsewhere outside Wuhan. Public Health Response The Chinese National Health Commission deployed a team of specialists to the city of Wuhan. National authorities reported the following response measures.

A total of 763 close relationships have been identified, including health workers, and it has not been possible to identify a novel coronavirus infection. The Wahan Municipal Health Commission has been actively investigating and the current review of a group of patients has been completed.

The Hanana seafood area has been temporarily closed for sanitation, public awareness activities and self-defense measures have been put in place.

The World Health Organization is closely monitoring the situation and is contacting national authorities in China to provide needed assistance. The novel is a technical guide to the virus, and

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will continue to be updated as more information becomes available. Health Assessment Until now, investigations are still underway to fully evaluate the disease.

More general information and ongoing investigations need to better understand the prevalence, clinical picture, source, and transmission status and infection rate. They have also been applied.

According to data provided by all local national authorities in Ethiopia, the World Health Organization's comments on public health measures and follow-up surveillance of coronaviruses apply.

The world health organization risk assessment does not recommend specific health measures. During and after the trip, they are encouraged to seek medical attention and share their travel history with their medical providers about risk assessment of respiratory symptoms. Travel policy updated. Recommends you apply any travel or business restrictions on china based on the available information.

### 4.4. Volunteer Team in Ethiopia covid-19

The Volunteer Group was formed in a press briefing at the Harmony Hotel on Saturday morning, and the government has set up a campaign to help protect our people from the disease since it has entered the country with a range of voluntary services. In Ethiopia, the country has been temporarily closed to carry out sanitation, public awareness activities, and self-protection measures.

"I'm human!" The human rights advocacy group, which aims to meet three main objectives, helps the community to be aware of the severity of the disease in various ways, to provide financial and material-raising services to our disadvantaged populations and to expose the public through false and controversial information released on social media. He has officially started his work.

He said that the foundation of this group of volunteers would work closely to assist the government and called on medical professionals, volunteers, investors, religious fathers, country elders, and all its partners to work together for its various services.

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I have been working to alert the community since the outbreak, saying that all of them should stand up to protect the profession as a professional soldier.

"We are working to help the government in the technology sector as it is an obligation to help our people fight this epidemic." Manay True, a member of this group of volunteers and the event's co-ordinator for the event, said in a statement, "Go ahead!" We are all "volunteers ambassadors!" He said we should go through this dark time wisely, alerting us to every aspect of our profession.

University students who returned to their families due to the Corona virus sent a message to themselves that they should be aware of their own community. Religious leaders, elders, parishioners, and tribal leaders attended the event and pledged to provide this service in their area.

### 4.5. Distribution of coronavirus in Ethiopia

The spread of the Corona virus is a global epidemic, with a major threat to Africa, our country and Ethiopia. Presently preventing and preventing this epidemic is a major national focus. All of our efforts and cooperation are vital to combat the spread of this epidemic that threatens the lives and health of citizens, the survival and well-being of the nation.

It is known that the government has taken various steps to prevent the outbreak, considering the spread of the epidemic in different countries, as well as the professional information and advice provided by the World Health Organization and our country's health experts and institutions. In addition to raising awareness about the nature of the epidemic and the pathways to keep the public informed of the disease, it is remembered that the government has made decisions and guidelines to take precautionary measures to prevent coronavirus infection.

It is not possible to say that the present situation is sufficient and reliable in implementing these decisions and guidelines. Efforts to reach this population are intensified, but individuals and institutions that are deliberately and publicly infringing on dangerously dangerous public information systems, and by spreading false information about the epidemic, and in this case. We

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would like to remind individuals and institutions that create a supply shortage for the sake of making unfair profits.

The Food, Drug and Health Care Administration Regulation No. 661/2002 contains detailed provisions on infectious diseases, which clearly states: "In accordance with the international health standards that the country has adopted ... the obligation to cooperate for diagnosis is contagious. . ." It can also be "banned from entering a country where there is an epidemic." The Proclamation further states that "the appropriate health professional must ensure that anyone who has been infected with or suspected of a contagious epidemic is isolated for a period of time;"

He has to be "willing to be tested, medically...." Breach of these provisions can be punishable by up to six months in prison. In addition, FDRE's Criminal Code stipulates that Section 514 deliberately or negligently transmits the disease. Criminal law in violation of this article could lead to up to ten years' imprisonment, particularly if the infectious disease was caused by a pandemic or epidemic, and, in fact, the penalties could result in life imprisonment or death. In addition, under the provisions of Article 830 Public Health and Well-Being, the Criminal Code is a crime punishable by up to three months' imprisonment for the prevention of diseases, particularly the spread of disease, treatment or prevention.

In addition, Article 485 of the Criminal Code provides that a person who knowingly intimidates a person for fear of endangering a public health threat may be punished with no more than three years imprisonment or, in fact, a maximum sentence of three years.

Applying safety precautions against the transmission of the corona virus is first and foremost for ourselves, and for our families around us, parties and even nationally. Recognizing this, we are calling for all of us to take appropriate precautionary measures, but not significantly violate precautions, and against institutions and individuals that endanger the public health and national security; We would like to acknowledge that we are obliged to take immediate legal action in accordance with the provisions of the Act and other applicable laws. (FDRE court, 2012)

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3.10. Time Schedule

No	Tasks to be done	Specific time schedule for the activities											
		march		april		may		june		jullay			
		3 <sup>rd</sup> week	4 <sup>th</sup> week	1 <sup>st</sup> week	2 <sup>nd</sup> week	3 <sup>rd</sup> week	4 <sup>th</sup> week	1 <sup>st</sup> @ 2 week	3 <sup>rd</sup> @ 4 week	1 <sup>st</sup> @ 2 week	3 <sup>rd</sup> @ 4 week		
1	Proposal submission	X	X										
2	Present research proposal for research team			X	X								
3	Preparation tools					X							
4	Tools selection & preparation Data collection					X	X						
5	Data collection							X					
6	Data processing, analyzing & interpretation								X				
7	Draft submission										X		
8	Reserve time										X		
9	Final research submission										X	X	
10	Presentation												

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**3.11. Budget Schedule**

No	Description	Unit measurement	Quantity	Unit cost		Total cost	
				Birr	C.	Birr	C.
1	Transportation	Trip	05	200x4		8000	00
2	Training	60 day	200	200x60		12000	00
3	Allowance	Per day	05	200x10		2000	00
4	Phone	No	05	100	-	500	00
5	Reserve cost	-	-	-	-	7000	00
Total						<b><u>29500</u></b>	<b><u>00</u></b>



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### Reference COVID-19

- Considerations related to the safe handling of bodies of deceased persons with suspected or confirmed COVID-19. ECDC. Stockholm. 23 March 2020.
- Coronavirus disease 2019 (COVID-19) and supply of substances of human origin in the EU/EEA. ECDC. Stockholm. 23 March 2020.
- Guidance for health system contingency planning during widespread transmission of SARS-CoV-2 with high impact on healthcare services. 17 March 2020.
- Infection prevention and control for COVID-19 in healthcare settings. 12 March 2020.
- Considerations relating to social distancing measures in response to COVID-19 – second update. 23 March 2020.
- Novel coronavirus (SARS-CoV-2) - Discharge criteria for confirmed COVID-19 cases. 10 March 2020.
- Resource estimation for contact tracing, quarantine and monitoring activities for COVID-19 cases in the EU/EEA. 2 March 2020.
- Guidance for wearing and removing personal protective equipment in healthcare settings for the care of patients with suspected or confirmed COVID-19. 28 February 2020.
- Checklist for hospitals preparing for the reception and care of coronavirus 2019 (COVID-19) patients. 26 February 2020.
- Public health management of persons, including healthcare workers, having had contact with COVID-19 cases in the European Union – first update. 25 February 2020.
- Interim guidance for environmental cleaning in non-healthcare facilities exposed to SARS-CoV-2. 18 February 2020.

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- Guidelines for the use of non-pharmaceutical measures to delay and mitigate the impact of 2019-nCoV. 10 February 2020.
- Personal protective equipment (PPE) needs in healthcare settings for the care of patients with suspected or confirmed novel coronavirus (2019-nCoV). 7 February 2020.
- Public health management of persons having had contact with novel coronavirus cases in the European Union. 25 February 2020.

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