



Overview

This bulletin serves to summarize weekly surveillance data & performance of OHB/PHEM diseases and other public health emergencies. It comprises report timeliness, completeness, trends of priority diseases, and response activities.

Epidemiological
Bulletin
Week-16

Objective

To provide weekly update on the status of reportable diseases/conditions to the relevant authorities for better preparedness and response activities.

Regional Highlights of the reporting week

Of Newly
occurred
outbreak
=0

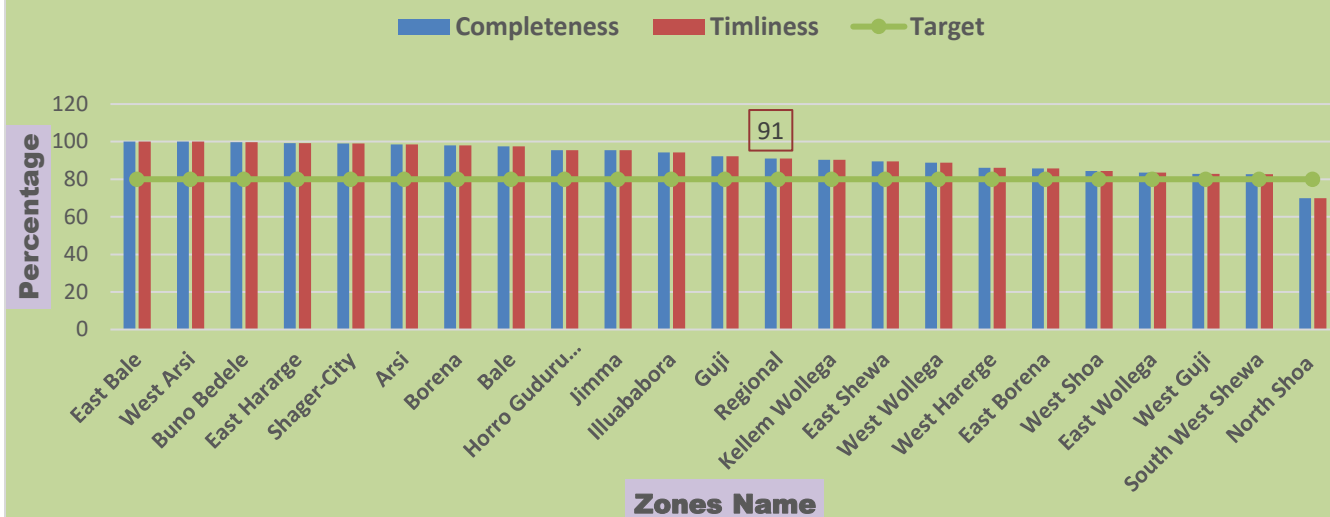
- ❖ The regional surveillance report completeness and timeliness were **90.8% and 90 % Respectively**.
- ❖ A total of **33,077** Confirmed & clinical Malaria cases with **one (1)** death in this week.
- ❖ Reported Malaria case **decreased by 4.3%, likely; the testing decreased by 7%**.
- ❖ A total of **479 measles** cases and **4 (Four) death** were reported, cases increased by **10%** from last week.
- ❖ A total of **7 (seven)** maternal and **47** perinatal deaths were reported.
- ❖ A total of **5** AFP with Zero death reported from (East Harege-1, Metu T-1, Holeta T-1 and Adama T-1 and West Harerge-1)

Of New
Event =0

- ❖ A total of **3105 SAM** U5 cases and Seven (**7**) death reported
- ❖ A total of **5814 MAM** U5 cases were reported.
- ❖ *Enhancing response activities and increasing community engagement are critical in controlling the ongoing outbreaks (**Malaria and Measles**)*

Of
Ongoing
Outbreak=2

**Figure 1: Oromia Region report completeness and timeliness by -
Zones, as of WHO Week-16, 2025**



**Figure 2: Oromia Region report completeness and timeliness by -
Towns, as of WHO Week-16, 2025**



Table 1: Immediately Reportable Diseases

S.No	Disease/condition	Week-15/2025		Week-16/2025		Difference (Wk16-Wk-15) of cases/deaths	
		Cases	Deaths	Cases	Deaths	#	(%)
1	Cholera	0	0	0	0	0	0
2	Measles	435	0	479	4	+44	↑10
3	Dengue Fever	0	0	0	0	0	0
4	AFP	7	0	5	0	-2	↓29
5	Anthrax	0	0	0	0	0	0
6	Human influenza caused by new subtype	0	0	0	0	0	0
7	Dracunculiasis/Guinea worm	0	0	0	0	0	0
8	Neonatal / Non-Neonatal Tetanus	1	0	0	0	0	↑100
9	Maternal Death		5		7	+2	↑40
10	Perinatal Death		54		47	-7	↓13
11	Pandemic Influenza	0	0	0	0	0	0
12	(Human) Rabies	2	0	2	0	0	0
13	Suspected rabies exposure	85	0	60	0	-25	↓29
14	SARS	0	0	0	0	0	0
15	Small pox	0	0	0	0	0	0
16	Viral hemorrhagic fever	0	0	0	0	0	0
17	Yellow fever	0	0	0	0	0	0
18	COVID-19	0	0	0	0	0	0
19	AEFI	4	0	4	0	0	0
20	Chikungunya	0	0	0	0	0	0
21	Mpox virus	0	0	0	0	0	0
22	Brucellosis	0	0	7	0	+7	↑700
23	Obstetric Fistula	2	0	2	0	0	0

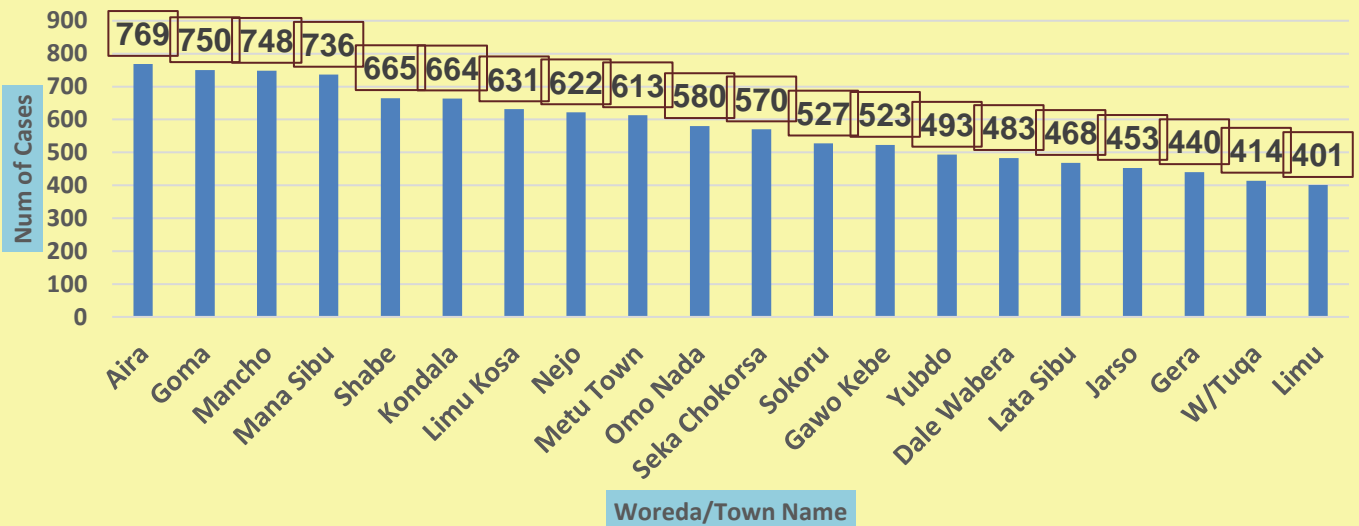


Table 2: Weekly Reportable Diseases

Sr. No	Disease/condition	Week-15/2025		Week-16/ 2025		Difference (Wk-16) -(Wk-15)	(% Decreased or increased)
		Cases	Death	Cases	Death	cases/deaths	
						#	
1	Malaria	34557	0	33077	1	-1480	↓4.3
2	Meningitis	87	0	80	0	-7	↓8
3	Dysentery	2752	1	2831	5	79	↑2.9
4	Relapsing fever	29	0	19	0	-10	↓35
5	SAM	3992	4	3105	7	-887	↓22
6	Scabies	800	0	770	0	-30	↓4
7	New HIV cases	127	0	102	0	-25	↓20
8	Diarrhea with dehydration in children less than 5 years of age	2891	0	2719	1	-172	↓6
9	Acute Jaundice Syndrome within 14 days of illness	32	0	38	0	+6	↑19
10	Severe Pneumonia in children under 5 years age	1852	2	1699	0	-153	↓8
11	Hypertension new cases	1148	0	1070	0	-78	↓7
12	Diabetes new cases	343	0	301	1	-42	↓12
13	Tuberculosis	585	0	495	0	-90	↓15.4
14	Moderate Acute Malnutrition (MAM) in U5C	5714	0	5814	0	+100	↑2



**Figure3:Oromia Region top 20 Districts reporting Malaria Outbreak
WHO week-16,2025 GC**



**Figure4:Oromia Region top 20 Zones/Town reporting Malaria
Outbreak WHO week-16,2025**

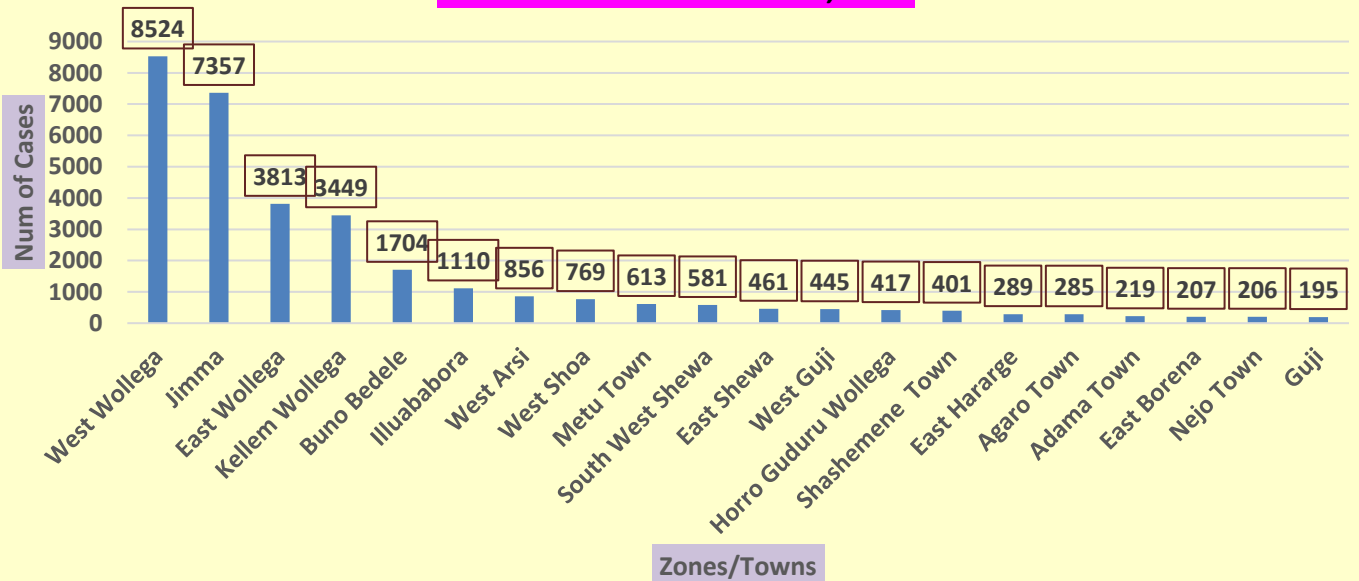




Figure 5: Oromia region weekly trends of measles outbreak, WHO WK-16/2025 Compared to 2024 cases

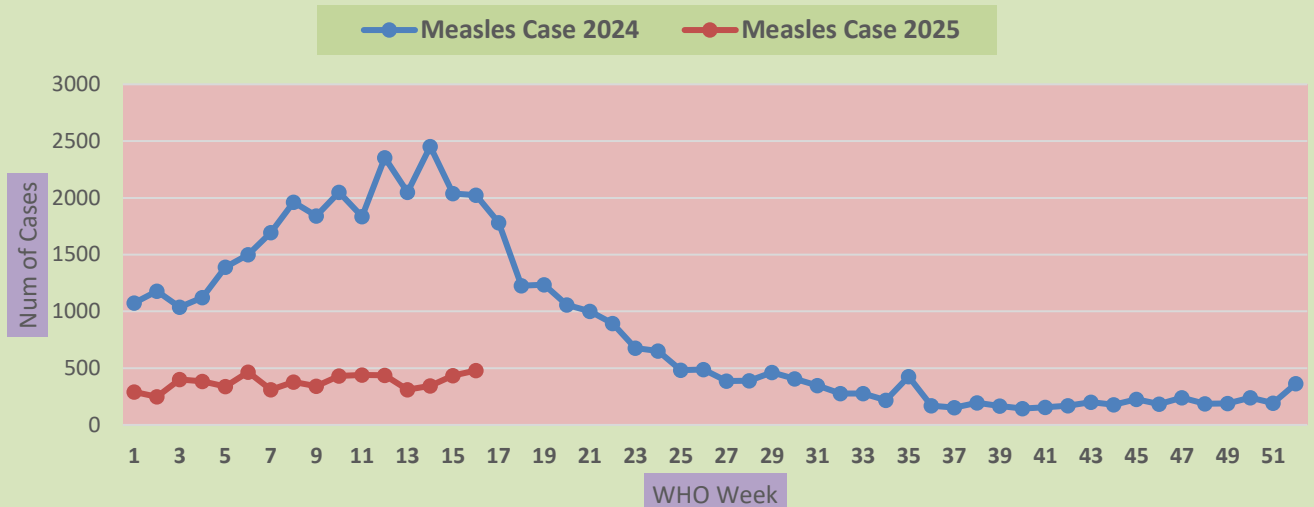


Figure 6: Oromia region weekly trends of Malaria outbreak, WHO WK-16 /2025 Compared to 2024 cases

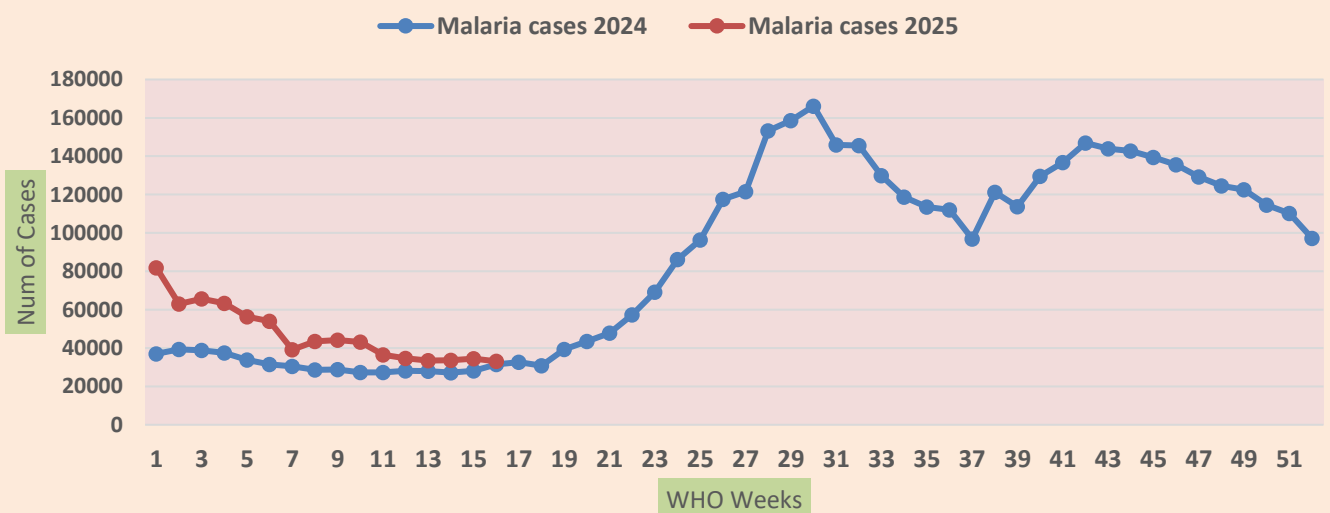
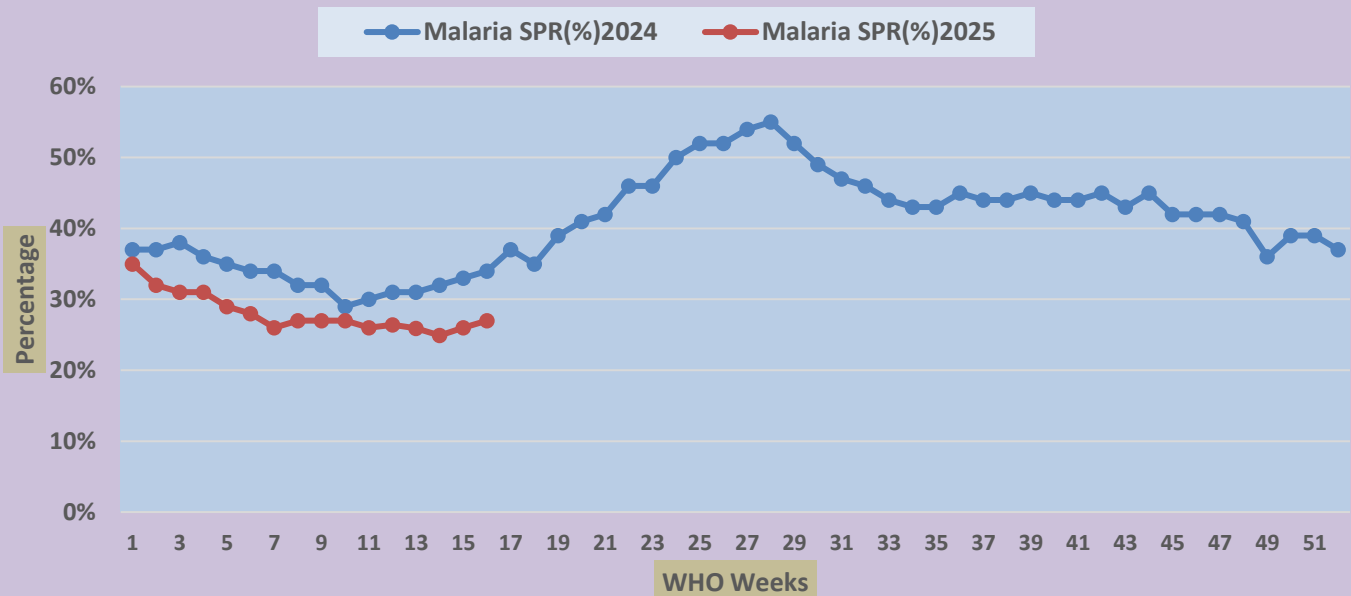




Figure 6: Oromia region weekly trends of Malaria SPR, WHO WK-16 /2025 Compared to 2024 cases



➤ **Outbreak Response Activities**

- **Intensive Response: still continued intervention activities of trained community volunteers'(CV) in majority of high burden locality, HC RRT**
- Trained health workers
- HH Visit and Febrile Case Search, enhanced Surveillance
- Assess for ITNS Availability and Utilization
- Febrile Cases Linking to HF
- Treating breeding sites by using larvicides and environmental activities.
- Reaching community by RCCE
- Community Engagement on intervention



➤ **Major gaps/Challenges**

- ✓ Shortage of Some Anti Malaria drugs and Supplies.
- ✓ Operational budget shortage (Surveillance and response)
- ✓ Multiple public health emergency in the region (Measles and Malaria), **outbreak Persist, even minor transmission season**
- ✓ Volatile security problem (disrupted control efforts at western and south zones the region)
- ✓ Political leaders' attention for malaria response at bottom level (Woredas and Kebele).
- ✓ Infrastructure (Network and road inaccessible) among some affected woredas

➤ **Proposed action plan/way forward/**

- ✓ Strengthen coordination and collaboration among key stakeholders.
- ✓ Strengthen larva control (both by Environmental and Larvicidal).
- ✓ Community sensitization (at Kebele level, Woreda Level)
- ✓ Strengthen Malaria technical working group and PHEOC IMS to improve collective efforts of different actors
- ✓ Resource mobilization and budget allocation for epidemic response
- ✓ Strengthen Malaria technical working group and PHEOC IMS to improve collective efforts of different actors
- ✓ Strengthening surveillance system, Environmental management and Community engagement
- ✓ Leadership ownership and community involvement and mobilization
- ✓ Conduct malaria response advocacy at regional, zonal and woreda level
- ✓ Response guidance for high malaria burden woredas
- ✓ **Sustain community Volunteers** activities and strengthen Health Center RRT supervision to CV

DISCLAIMER

The Oromia Health Bureau Public Health Emergency Management compiles reports from various zones and towns' public health surveillance reports to produce a weekly bulletin. The purpose of this bulletin is to inform decision makers from OHB/PHEM, EPHI, UN agencies and NGOs about any outbreaks and other public health emergencies in Oromia. It is published by Oromia Health Bureau Public Health Emergency Management.

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