



## 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-1

## 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% and 89% respectively**.
- ❖ **A zero Cholera cases and zero death were reported this week and for more than 45 Days**
- ❖ A total of **292 measles** cases and **2** deaths were reported (Deaths from West Arsi & East Wollega).
- ❖ A total of **3** maternal and **49** perinatal deaths were reported.
- ❖ A total of **8** AFP with Zero death reported from Guji (**1**), West Hararge (**2**), South West Shoa (**1**), West Shoa (**1**), East Harerge (**1**), Metu Town (**1**) Kelem Wollega (**1**).
- ❖ A total of **81,826** Confirmed & clinical Malaria cases with **5** deaths (reported from Jima Town-1, Horu Guduru Wolega-1, Guji-1, Jima -1 and Kelem Wollega-1) in this week.
- ❖ Reported Malaria case **decreased by 16% likewise the testing decreased by 11.2%**.
- ❖ A total of **3213 SAM U5** cases and **Seven (7)** death reported (Shashemene Town-2, Sheno T-1, West Harerge-1, West Arsi-1, Kelem Wollega-1 & Arsi-1).
- ❖ A total of **5461 MAM U5** cases were reported.
- ❖ *Enhancing response activities and increasing community engagement are critical in controlling the ongoing outbreaks.*

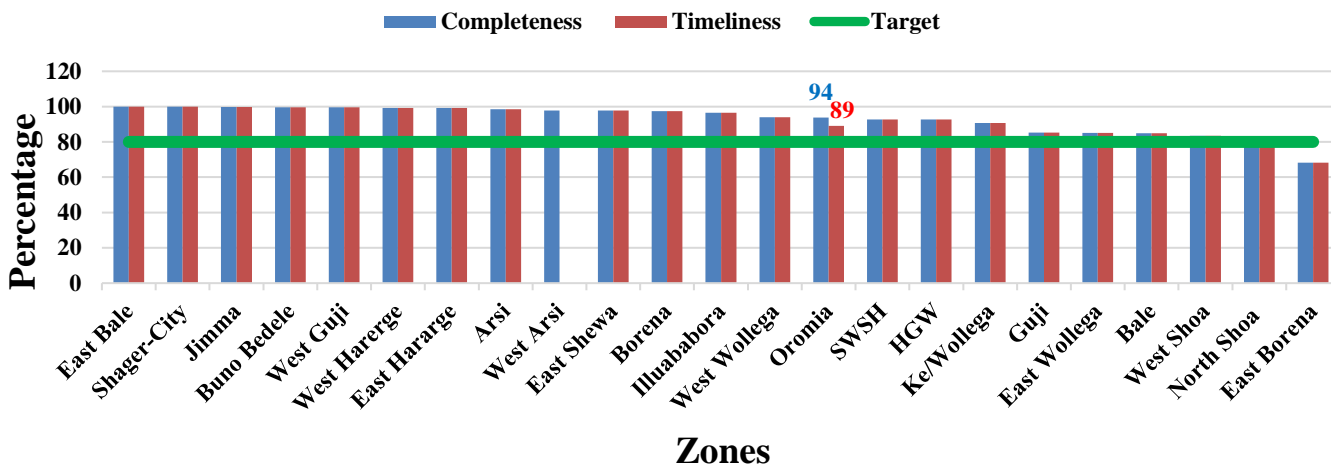
# Of New  
Event =0

# Of  
Ongoing  
Outbreak=2

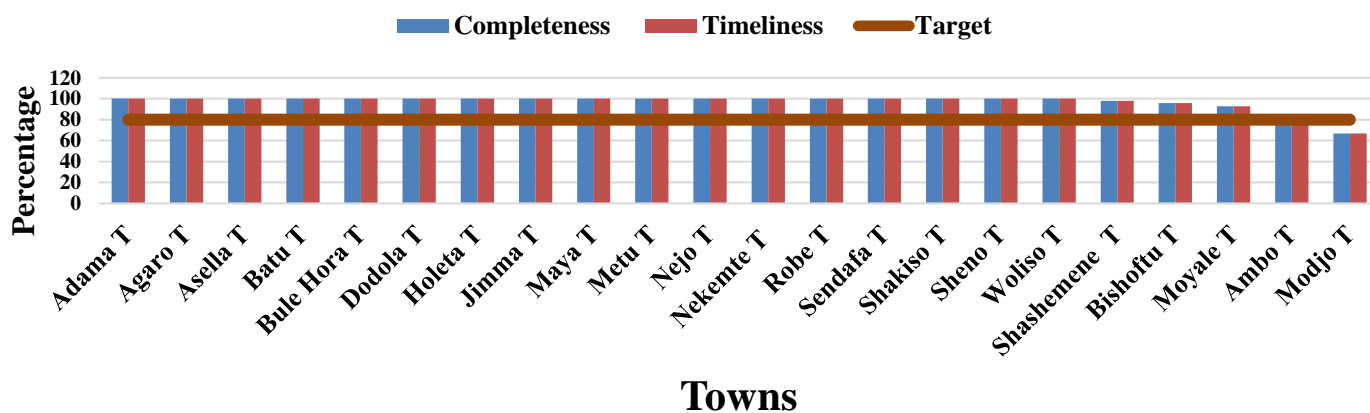
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**Figure 1: Oromia Region report completeness and timeliness by Zones, as of WHO Week 52, 2024**



**Figure 2: Oromia Region report completeness and timeliness by - Towns, as of WHO Week 52, 2024**





**Table 1: Immediately Reportable Diseases**

S.No	Disease/condition	Week-52/2024		Week-1/2025		Difference (Wk1-Wk 52) of cases/deaths	
		Cases	Deaths	Cases	Deaths	#	(%)
1	Cholera	0	0	0	0	0	0
2	Measles	363	0	292	2	-71	↓20
3	Dengue Fever	0	0	0	0	0	0
4	AFP	7	0	8	0	1	↑14
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	0	0	3	1	3	↑300
9	Maternal Death		9		3	-6	↓67
10	Perinatal Death		53		49	-4	↓7
11	Pandemic Influenza	0	0	0	0	0	0
12	(Human) Rabies	3	0	0	0	-3	↓100
13	Suspected rabies exposure	87	3	79	0	+2	↑2.3
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	1	0	3	0	2	↑200
20	Chikungunya	0	0	0	0	0	0
21	Monkeypox virus	0	0	0	0	0	0
22	Brucellosis	0	0	0	0	0	0
23	Obstetric Fistula	3	0	3	0	0	Same #

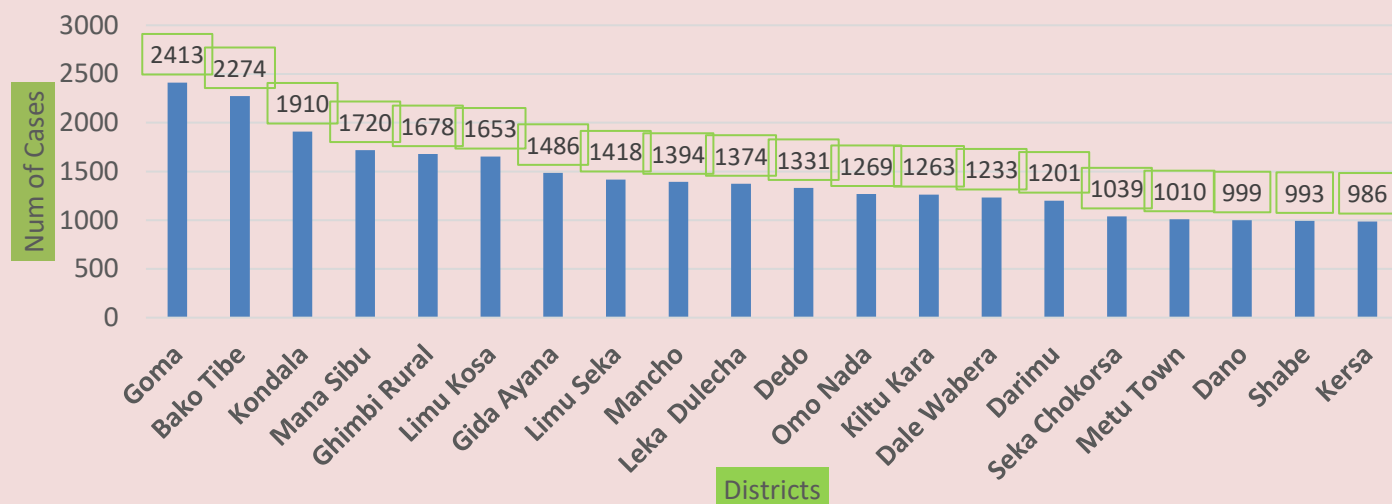


**Table 2: Weekly Reportable Diseases**

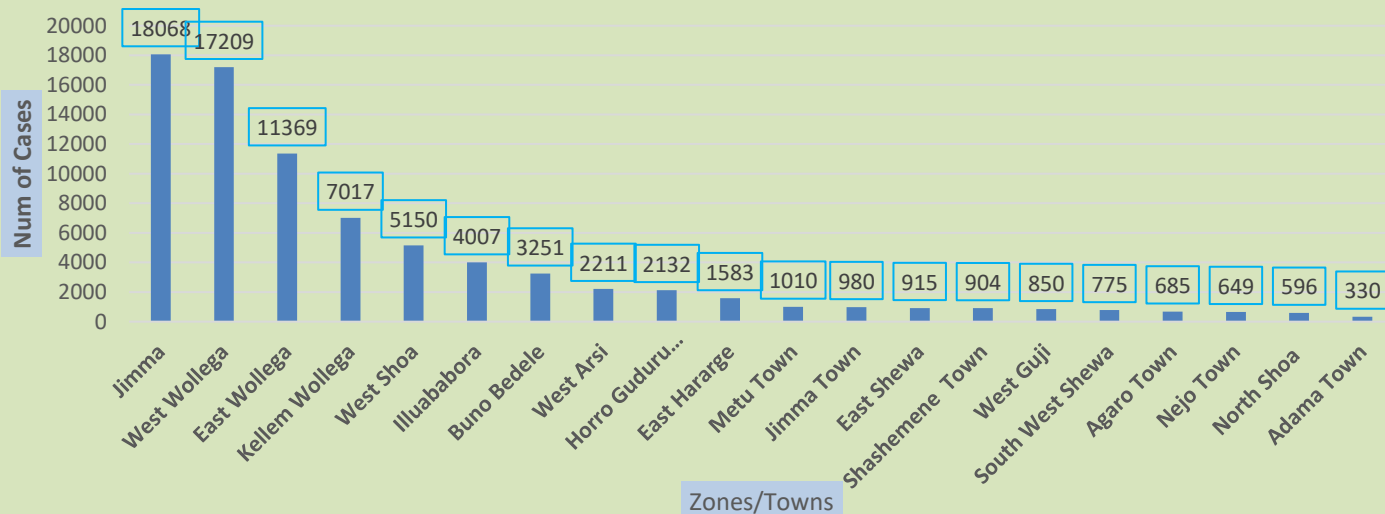
S. No	Disease/condition	Week-51 /2024		Week-1/ 2025		Difference (Wk 1-W-52)	
		Cases	Death	Cases	Death	Of cases/deaths	
						#	(%)
1	Malaria	97,152	8	81826	5	-15,326	↓15.8
2	Meningitis	88	0	77	0	-11	↓12.5
3	Dysentery	2207	0	2070	0	-137	↓6.2
4	Relapsing fever	27	0	3	0	-24	↓88.9
5	SAM	3964	1	3213	7	-751	↓18.9
6	Scabies	829	0	736	0	-93	↓11.2
7	New HIV cases	153	0	118	0	-35	↓22.9
8	Diarrhea with dehydration in children less than 5 years of age	2070	3	1967	1	-103	↓5.0
9	Acute Jaundice Syndrome within 14 days of illness	27	0	31	0	+4	↑14.8
10	Severe Pneumonia in children under 5 years age	2059	3	1726	2	-333	↓16.2
11	Hypertension new cases	1103	0	940	0	-163	↓14.8
12	Diabetes new cases	383	0	328	0	-55	↓14.4
13	Tuberculosis	648	0	448	1	-200	↓30.9
14	Moderate Acute Malnutrition (MAM) in U5C	7004	0	5461	0	-1,543	↓22.0



**Figure 3: Oromia Region top 20 Districts reporting Malaria Outbreak WHO week-52, 2024**

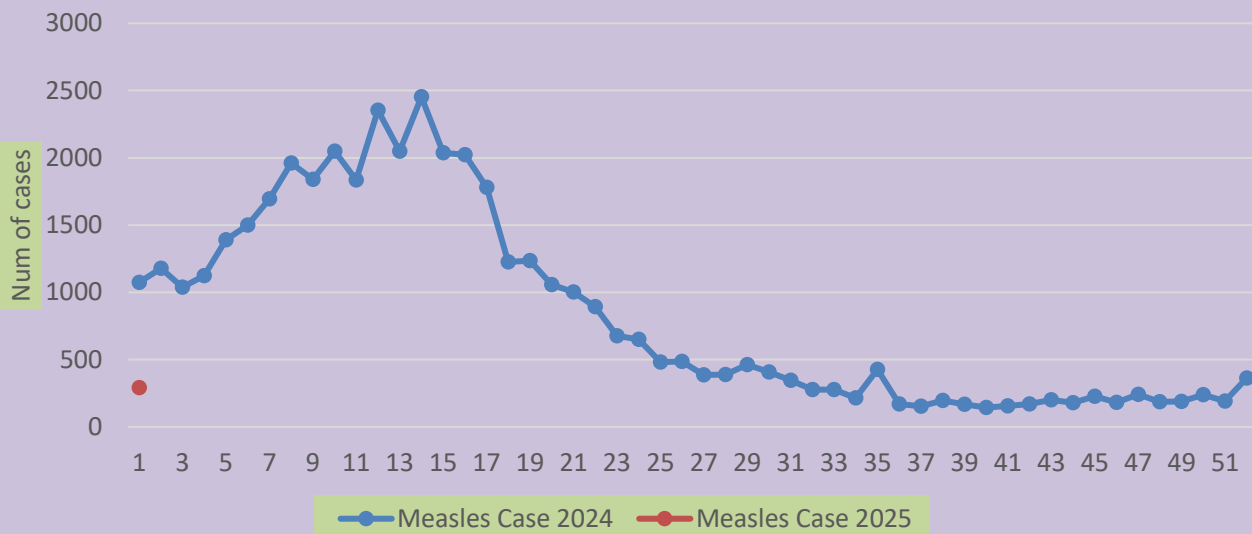


**Figure 4: Oromia Region top 20 Zones/Towns reporting Malaria Outbreak WHO week-52, 2024**

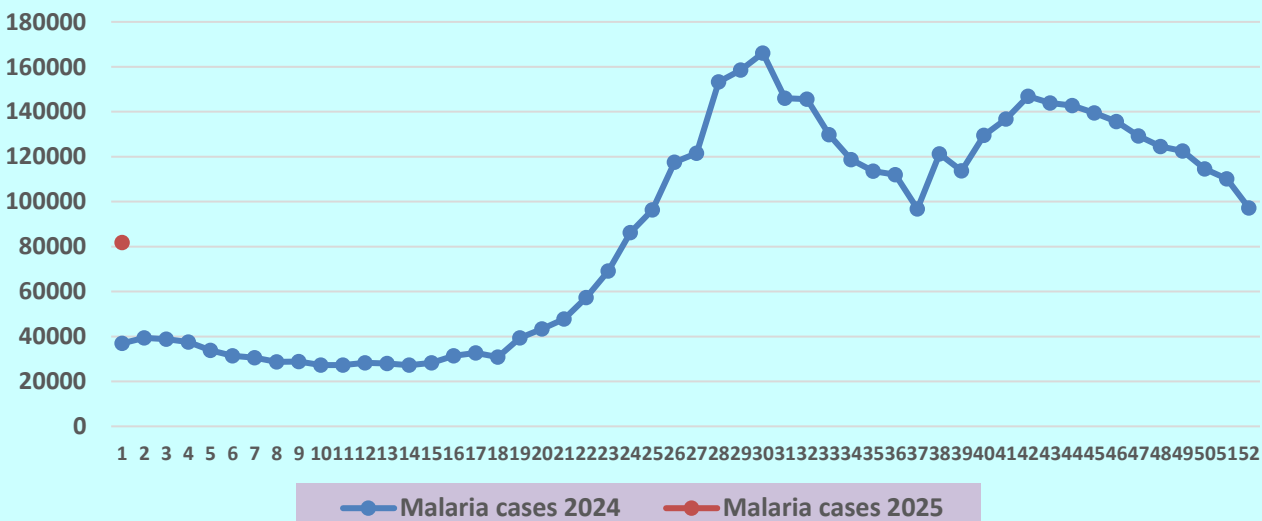




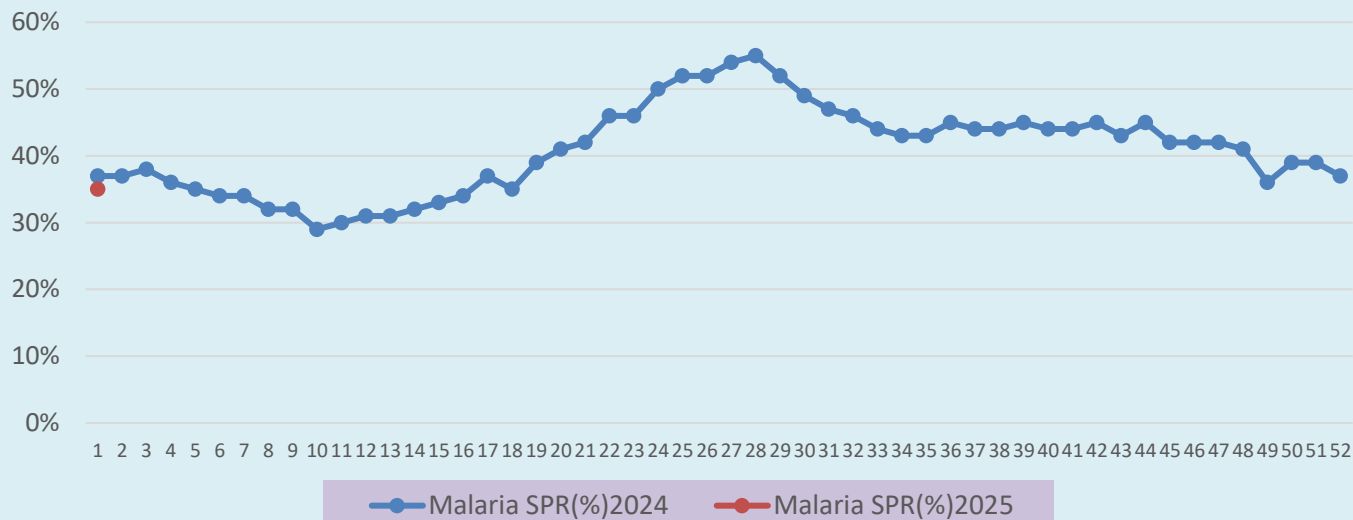
**Figure 5: Oromia region weekly trends of measles outbreak, WHO WK-52/20224 Compared 2024 cases**



**Figure 6: Oromia region weekly trends of Malaria outbreak, WHO WK-52/2024 Compared to weekly 2024 cases**



**Figure 7: Oromia region weekly trends of Malaria SPR (%), WHO WK-52/2024 Compared to 2024 weekly cases**



### ➤ **Outbreak Response Activities**

- Leaders' advocacy at different level.
- **Intensive Response: Trained community volunteers' activities, HC RRT (3 Month Plan and Implementation started among 1,434 Kebeles of 94 high burden Woredas in addition to cluster approach)**
- 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
- Summer Volunteer mobilization Malaria 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)
- ✓ 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 ensure 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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