



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, decision Making.

Regional Highlights of the reporting week

Of Newly
occurred
outbreak

- ❖ The regional surveillance report completeness and timeliness were **92% and 86% respectively**.
- ❖ A total of **24,671** Confirmed Malaria cases with **Two (2)** death in this week.
- ❖ **Reported Malaria case decreased by 9.4%, likely the testing decreased by 4%.**
- ❖ A total of **135 measles** cases and **Zero death** were reported; cases increased by **55%** from last week.
- ❖ A total of **6 (Six)** Maternal and **59** perinatal deaths were reported.
- ❖ A total of **6 (Six)** AFP with Zero death reported from (Arsi-3, Horo Guduru W -1, West Shoa-1 and Jimma Z-1)
- ❖ A total of **2,937 SAM** U5 cases and **One (1) death** reported
- ❖ A total **6,224 MAM** U5 cases were reported.
- ❖ Enhancing response activities and increasing community engagement are critical in controlling the ongoing outbreaks, (*Malaria, and Measles*)
- ❖ **Preparedness and Enhanced Surveillance activities undertaking** in all Zones/Town to Recent *Marburg Virus Disease* in Ethiopia (Jinka Town, South Ethiopia) following MOH/EPH Announcements.

Of New
Event =0

Of
Ongoing
Outbreak=2



Figure 1: Oromia Region report completeness and timeliness by -Zones, as of WHO Week-1/2026 GC

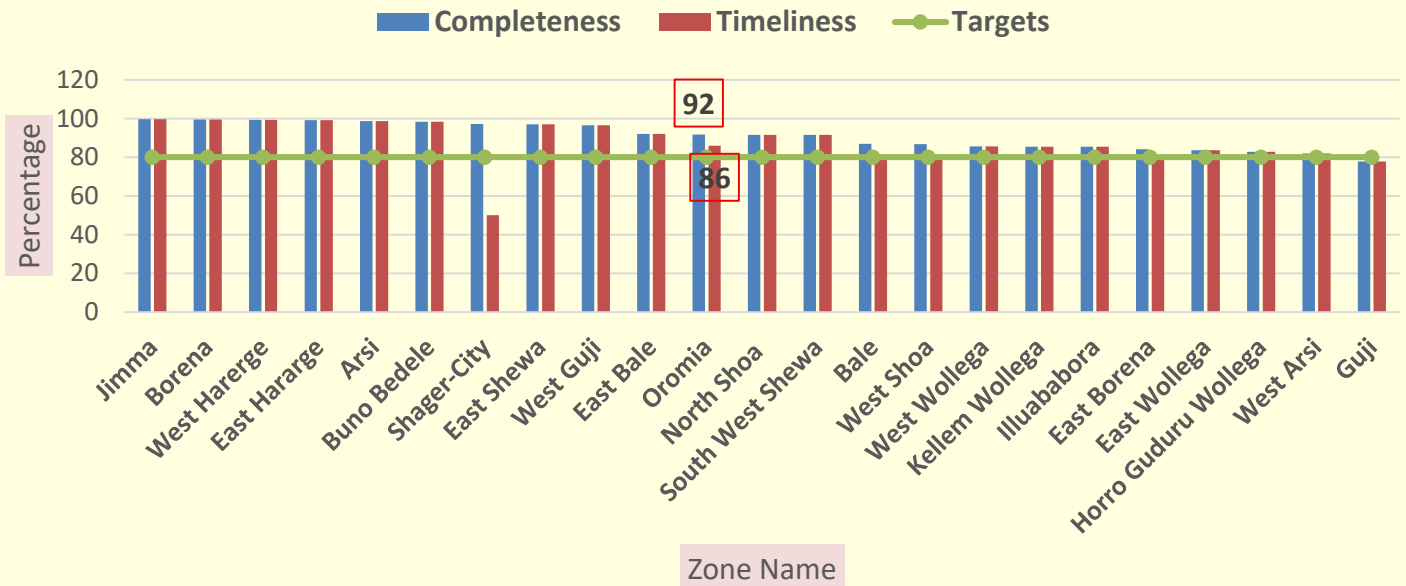


Figure 2: Oromia Region report completeness and timeliness by -Towns, as of WHO Week-1 /2026



Table 1: Immediately Reportable Diseases, Pattern

S.No	Disease/condition	Week-52/2025		Week-1/2026		Difference (Wk1-Wk-52) of cases/deaths	
		Cases	Deaths	Cases	Deaths	#	(%)
1	Cholera	0	0	0	0	0	0
2	Measles	87	0	135	0	+48	↑55
3	Dengue Fever	0	0	0	0	0	0
4	AFP	10	0	6	0	-4	↓40
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	1	0	0	-1	↓100
9	Maternal Death		8		6	-2	↓25
10	Perinatal Death		47		59	+12	↑26
11	Pandemic Influenza	0	0	0	0	0	0
12	(Human) Rabies	0	0	2	1	0	0
13	Suspected rabies exposure	73	0	67	2	-6	↓8
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	23	0	12	0	-11	↓48
20	Chikungunya	0	0	0	0	0	0
21	Mpox virus	0	0	0	0	0	0
22	Brucellosis	20	0	33	0	+13	↑65
23	Obstetric Fistula	0	0	6	0	+6	↑600

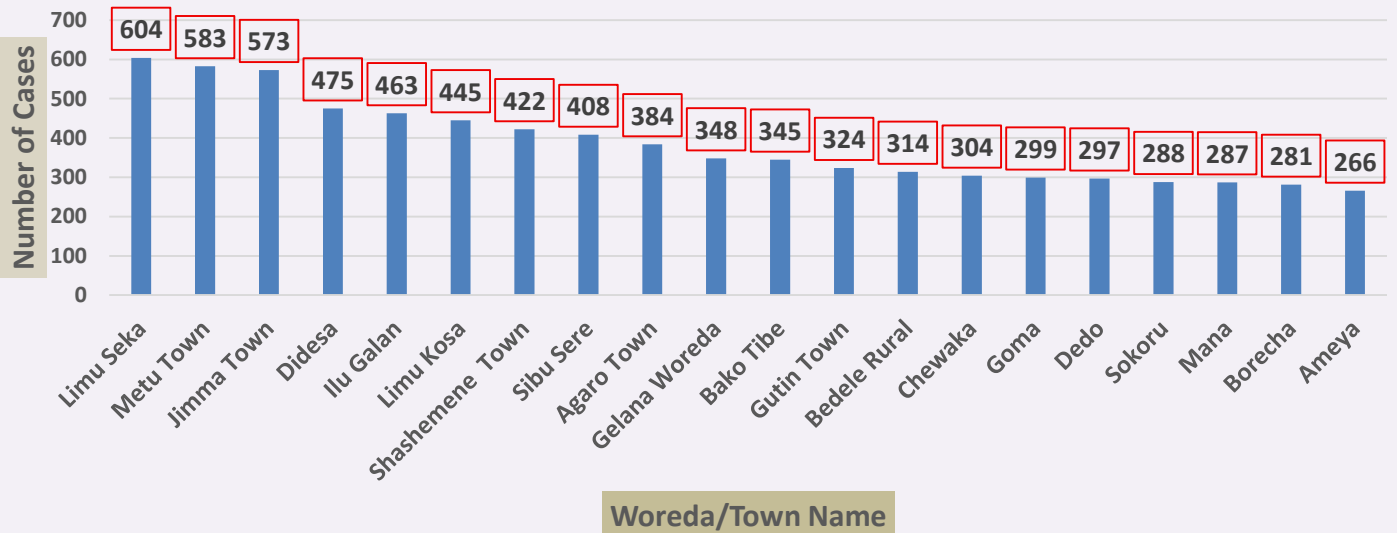


Table 2: Weekly Reportable Diseases, Pattern

Sr. No	Disease/condition	Week-52/2025		Week-1/ 2026		Difference (Wk-1) -(Wk-52)	Percent Decreased or increased)
		Cases	Death	Cases	Death	cases/deaths	
						#	
1	Malaria	27,233	0	24671	2	-2,562	↓9
2	Meningitis	77	1	68	0	-9	↓12
3	Dysentery	1804	0	1813	0	+9	0
4	Relapsing fever	9	0	7	0	-2	↓22
5	SAM	3401	1	2937	1	-464	↓14
6	Scabies	650	1	583	0	-67	↓10
7	New HIV cases	156	0	147	0	-9	↓6
8	Diarrhea with dehydration in children less than 5 years of age	2476	0	2367	0	-109	↓4
9	Acute Jaundice Syndrome within 14 days of illness	49	0	43	0	-6	↓12
10	Severe Pneumonia in children under 5 years age	2277	0	2073	0	-204	↓9
11	Hypertension new cases	1320	0	1301	4	-19	↓1
12	Diabetes new cases	350	0	423	0	+73	↑21
13	Tuberculosis	720	0	713	0	-7	↓1
14	Moderate Acute Malnutrition (MAM) in U5C	7674	0	6224	0	-1,450	↓19



**Figure3:Oromia Region top 20 Districts reporting Malaria
Outbreak WHO week-1,2026 GC**



**Figure4:Oromia Region, top 20 Zones/Town reporting Malaria
Outbreak as of WHO Week-1,2026**

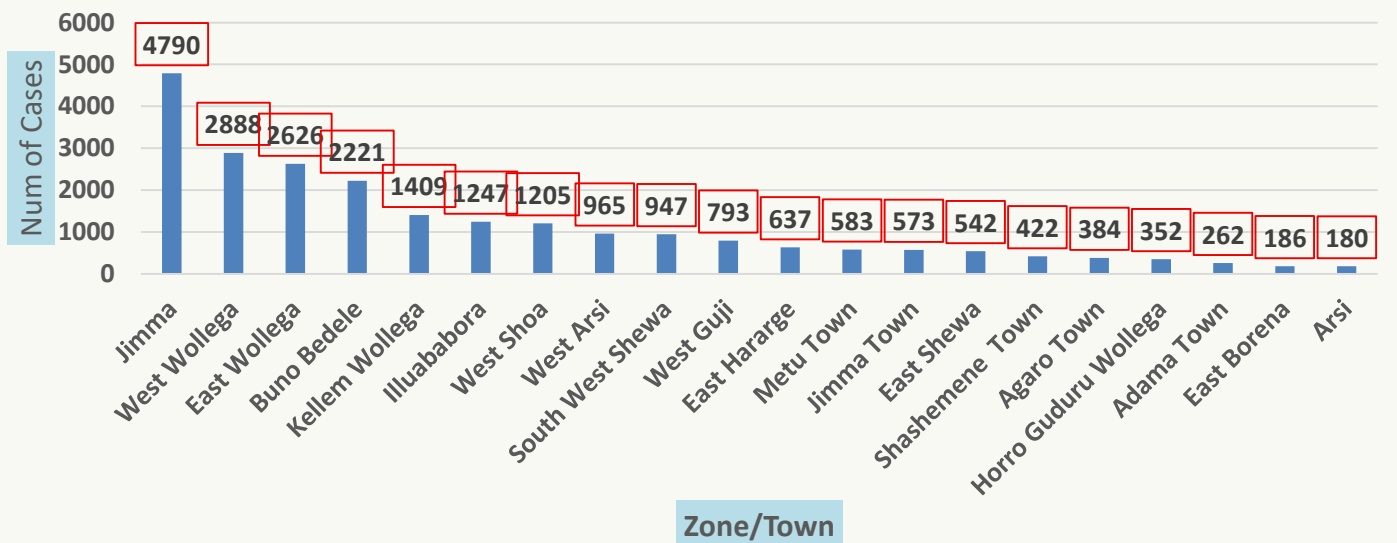




Figure 5: Oromia region weekly trends of measles outbreak, WHO WK-1/2026 Compared to 2025 cases

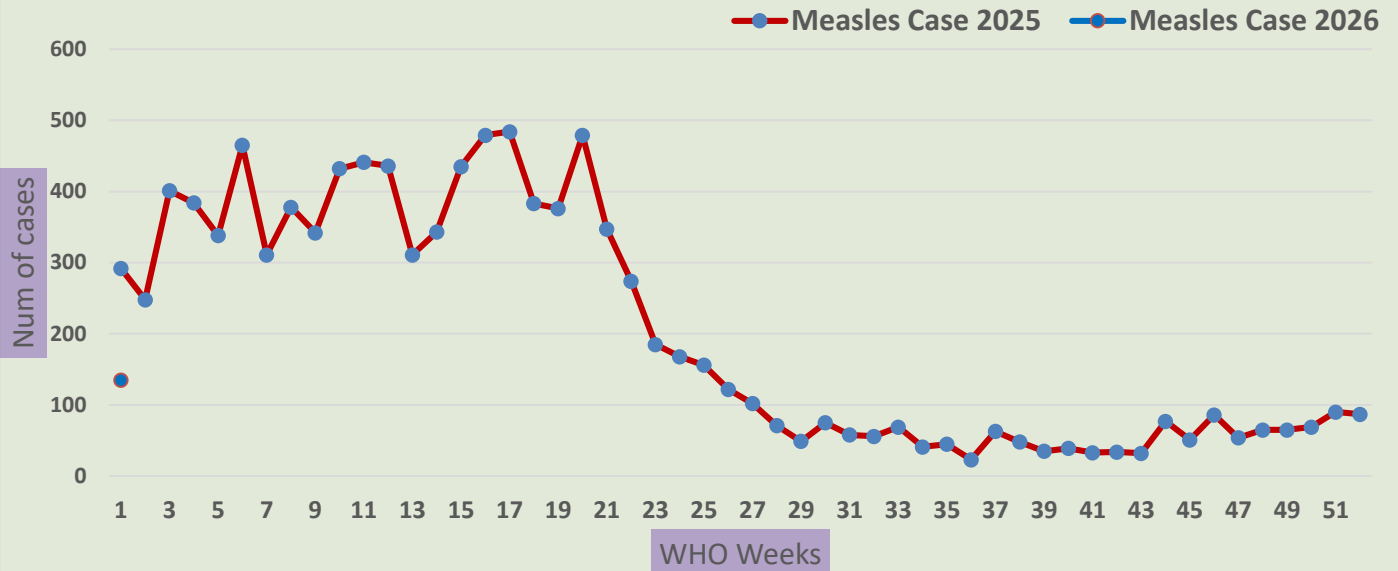


Figure 6: Oromia region weekly trends of Malaria outbreak, WHO WK-1/2026 Compared to 2025 cases

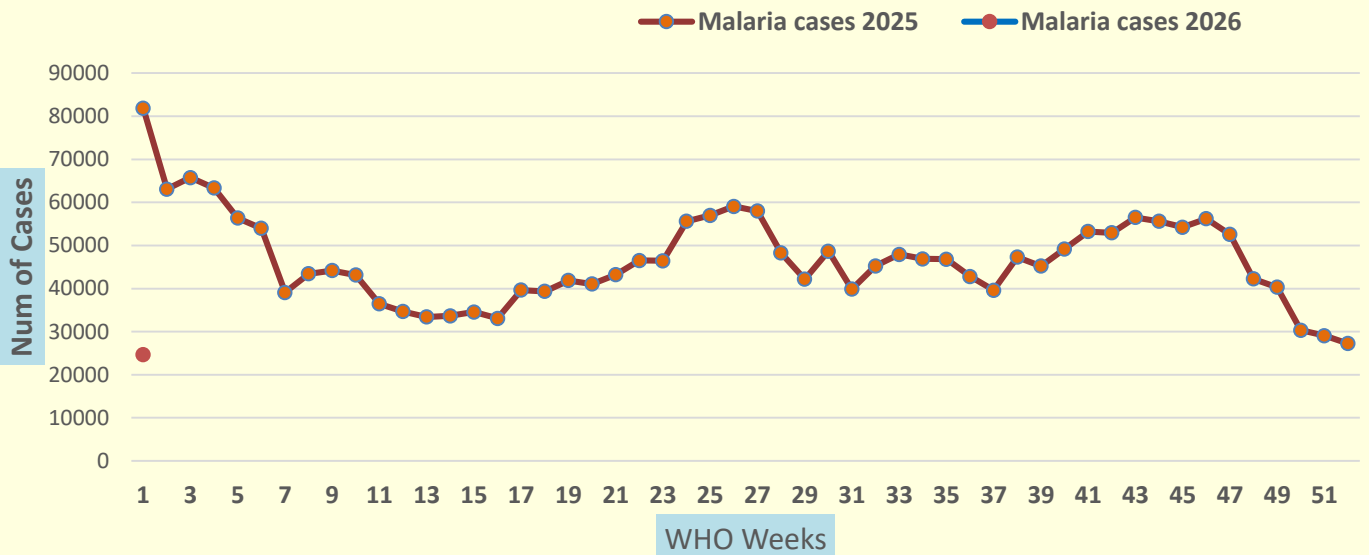
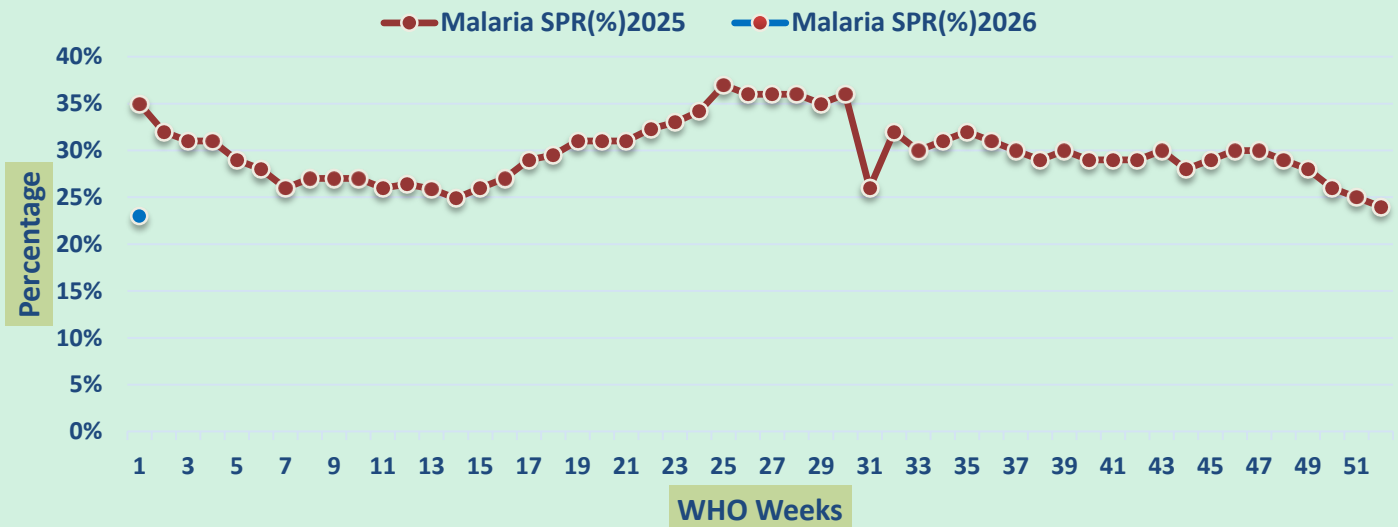




Figure 6: Oromia region weekly trends of Malaria SPR, WHO WK-1/2026 Compared to 2025 cases



➤ Outbreak Response Activities

- Still coordination efforts continue via EOC and other available platforms for emergencies in the region
- Intensive Response: continued intervention activities of trained community volunteers'(CV) in majority of high burden locality integrated with Health center 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 in intervention
- Continuous feedback on DHIS2 data quality and reporting errors to zone and woreda were given
- Coordination, RCCE, Isolation, Testing and Enhanced Surveillance activities undertaking in all Zones/Town to Recent *Marburg Virus Disease* in Ethiopia (Jinka Town, South Ethiopia) following MOH/EPH Announcements.



➤ **Major gaps/Challenges**

- ✓ Multiple public health emergency in the region (**Measles and Malaria**)
- ✓ Operational budget shortage (Surveillance and response)
- ✓ Volatile security problem (disrupted control efforts at western and south zones of the region)
- ✓ Political leaders' attention for malaria response at bottom level (Woredas and Kebele).
- ✓ Data quality and entry level errors, hence on transition to digitalization reporting platform
- ✓ Infrastructure (Network and road inaccessible) among some affected woredas

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

- ✓ **Heightened surveillance, rapid laboratory testing**, and the implementation of strong **infection prevention and control (IPC)** to **Marburg Virus Disease** outbreak in Neighboring region
- ✓ Strengthen coordination and collaboration among key stakeholders
- ✓ Strengthen larva control (both by Environmental and Larvicidal)
- ✓ 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
- ✓ Leadership ownership and community involvement and mobilization
- ✓ **Sustain community Volunteers (CV)** activities and strengthen Health Center RRT supervision to CV
- ✓ **Improve and strengthens the PHEM-DHIS2 platform in its quality and Sustain Current completeness**

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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