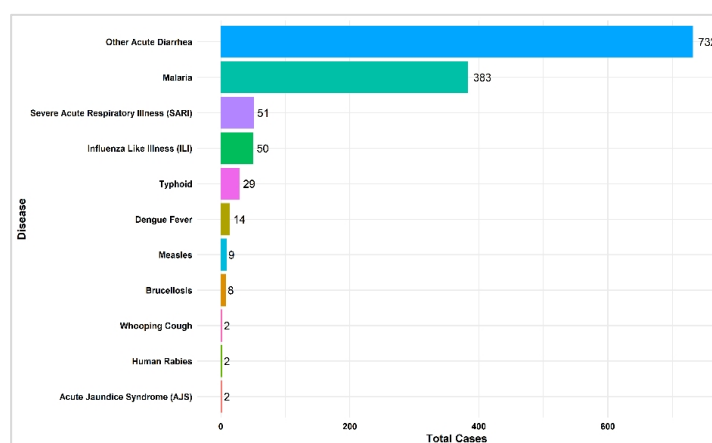




1. Key Highlights

- ❖ During Epi Week 39, a total of 1,282 cases of priority conditions were reported from 135 of the 142 IDSR surveillance Sentinel sites. Top conditions reported in the current Epi Week were other acute diarrhea (732), malaria (383), SARI (51), ILIs (50), typhoid (29), dengue fever (14), measles (9), brucellosis (8), acute jaundice syndrome (2), and whooping cough (2) (Figure 1).

Figure 1. Top ten conditions reported in Epi week 39



- ❖ In Epidemiological Week 39, the overall completeness and timeliness of surveillance data reporting performance in Somaliland reached 95% and 92%, respectively. This reflects a notable improvement compared to the previous epi week, **with increases of 4.7% in completeness and 7.4% in timeliness.**
- ❖ From Epi week 32 through 39, a cumulative 4,298 other diarrhea cases, 955 confirmed malaria cases, 326 severe acute respiratory illness (SARI) cases and 228 typhoid cases were reported.
- ❖ An active outbreak of measles exists in Somaliland with Togdher region having the highest caseload followed by Marodi-jeh and Sahil regions. Strengthening of routine immunization to prevent further spread and urgent vaccination campaigns are crucial.

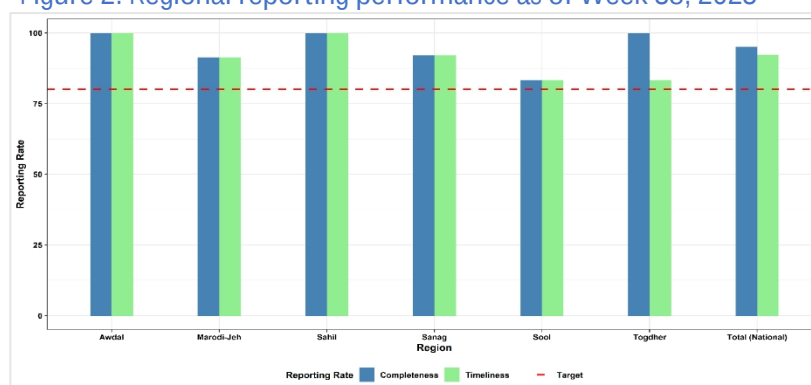
2. Reporting Performance

The performance of surveillance reporting is measured by the proportion of facilities that submitted their reports both on time and in full. In week 39, the number of surveillance sites that submitted complete reports were 4.7% higher than that of the preceding week. In addition, facilities that sent their reports on time in Epi Week 39 were 7.4% higher than in Epi Week 38. These improvements indicate an overall enhancement in reporting performance during week 39 relative to the preceding week.

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Awdal and Sahil regions attained the highest score both timeliness and completeness rates at 100%, followed by Togdher (100% completeness and 83% timeliness) and Sanag (92% for both completeness and timeliness) regions. On the

Figure 2. Regional reporting performance as of Week 38, 2025



contrary, the lowest-performing region was Sool region which achieved 83% for both timeliness and completeness. However, it is worth noting that number of surveillance in Sool region are only six.

Overall, all regions have shown improved reporting performance during the last four weeks. Completeness has increased from 77% (110/142) in Epi Week 36 to 95% (135/142) in Epi Week 39, while timeliness increased from 70% (100/142) to 92% (131/142) during the same period. Sanag region has shown the greatest improvement in reporting performance, increasing its completeness from 60% to 92%, representing a 53.3 percent increase compared with Epi Week 36.

Table-1 Summary of Reporting performance as of Week 39, 2025

Region	Expected reports	Actual reports	Reports on time	Completeness	Timeleiness
Awdal	26	26	26	100%	100%
Marodi-Jeh	46	42	42	91%	91%
Sahil	15	15	15	100%	100%
Sanag	25	23	23	92%	92%
Sool	6	5	5	83%	83%
Togdher	24	24	20	100%	83%
Total (National)	142	135	131	95%	92%

3. Summary of cases, deaths and CFR of priority conditions reported

This section presents a consolidated overview of reported cases, associated deaths, and calculated case fatality rates (CFR) for each priority conditions captured through the Integrated Disease Surveillance and Response (IDSR) system during Epidemiological Weeks 39 and cumulative. By analyzing these indicators, the section aims to inform targeted interventions, resource prioritization, and early warning practices within Somaliland's public health framework.

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Table 2: Summary Priority Diseases/Conditions_ epi WK39 and Cumulative

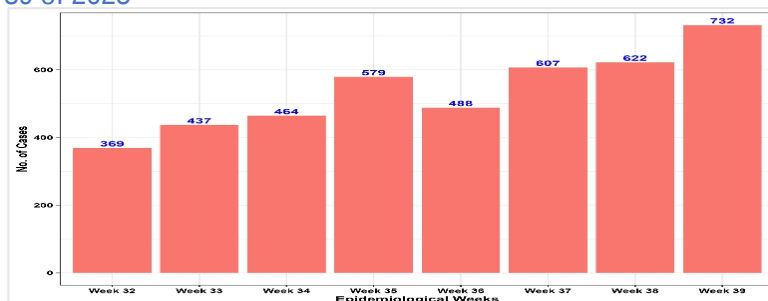
	WK 39 (22 – 28) Sept 2025)			Cumulative - WK 32 to WK39 (04 Aug to 28 Sept 2025)		
Disease	Cases	Deaths	CFR (%)	Cases	Deaths	CFR (%)
Acute Flaccid Paralysis (AFP)	0	0	0	10	0	0.00
Acute Hemorrhagic Fever Syndrome	0	0	0	0	0	0.00
Acute Jaundice Syndrome (AJS)	2	0	0	14	0	0.00
Acute Watery Diarrhea/Cholera	0	0	0	0	0	0.00
Adverse Drug Reaction (ADR)	0	0	0	2	0	0.00
Adverse Events Following Immunisation (AEFI)	0	0	0	0	0	0.00
Anthrax	0	0	0	0	0	0.00
Bloody Diarrhea	0	0	0	0	0	0.00
Brucellosis	8	0	0	46	0	0.00
Chikungunya	0	0	0	0	0	0.00
Cluster Of Illness (Humans Or Animals)	0	0	0	0	0	0.00
Dengue Fever	14	0	0	83	0	0.00
Diphtheria	0	0	0	25	5	20.00
Human Rabies	0	0	0	0	0	0.00
Influenza Like Illness (ILI)	50	0	0	228	0	0.00
Malaria	383	0	0	955	0	0.00
Measles	9	0	0	81	0	0.00
Meningococcal Meningitis	0	0	0	9	0	0.00
Neonatal Tetanus	0	0	0	0	0	0.00
Other Acute Diarrhea	732	0	0	4,298	0	0.00
Severe Acute Respiratory Illness (SARI)	51	0	0	326	0	0.00
Typhoid	29	0	0	228	0	0.00
Whooping Cough	2	0	0	42	0	0.00
Yellow Fever	0	0	0	0	0	0.00
Total	1,280	0	0	6,347	5	0.06

Other Acute Diarrhea

In Epi Week 39, 732 cases and zero deaths of other acute diarrhea were reported.

Other acute diarrhea has been the leading condition reported since week 32. Cases reported in week 39 represent a 17.7% increase over those reported in the preceding week.

Figure 3. Trend of other acute diarrhea cases from Wk 32 to WK 39 of 2025

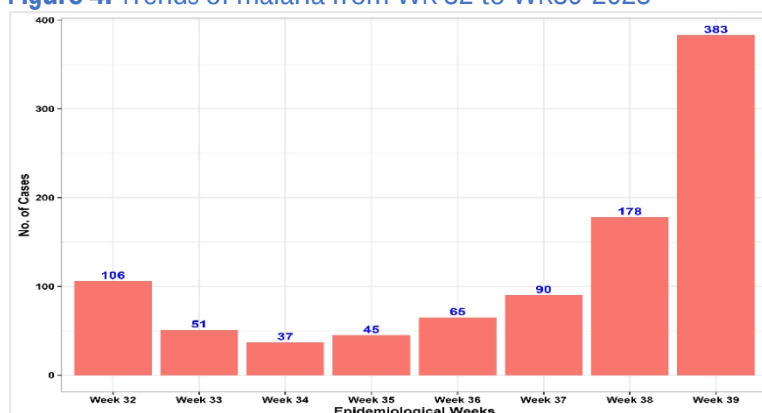


Malaria surveillance

During Epi Week 39, 383 new confirmed cases of malaria were reported, bringing the cumulative total to 955 cases since the beginning of Epi Week 32. No deaths were reported this week.

The new confirmed cases of Epi Week 39 (383 cases) reflect an 115.2% increase of cases from Epi Week 38 (178 cases).

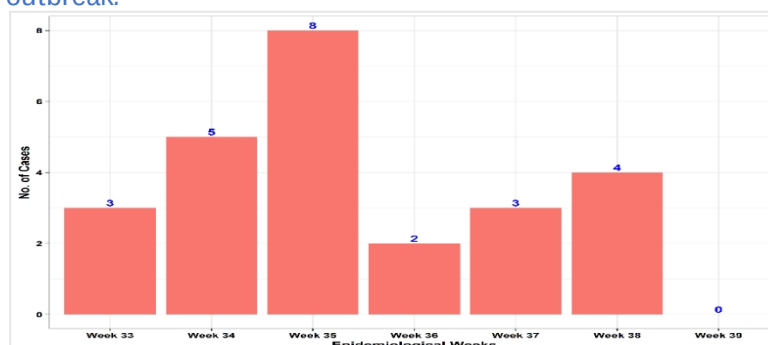
Figure 4. Trends of malaria from WK 32 to WK39-2025



Diphtheria Surveillance

There are no new diphtheria cases reported in Epi Week 39. Cumulative diphtheria cases remain at 25 cases and 5 deaths have been reported since the first case of diphtheria was identified in week 34 with **CFR of 20 percent**. The majority of cases (80 Percent (20/25)] were over 5 years old and 76.0 percent (19/25) of the cases were females.

Figure 5. Number of cases of diphtheria reported since the outbreak.



Since the start of the diphtheria outbreak, five deaths have been reported. These include **3 children** aged 3, 5, and 6 years old, a 49-year-old female, and most recently, a 22-year-old female from the Ainabo who died on Sept 20, 2025.

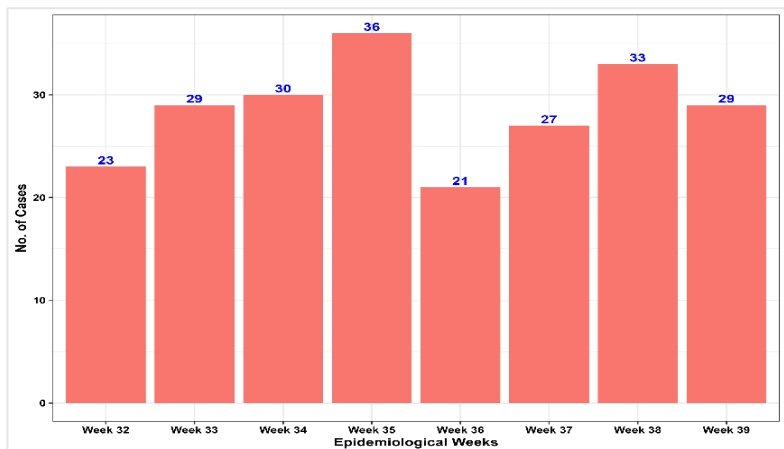
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Typhoid

During epidemiological week 39, 29 cases of typhoid fever were reported with cumulative 228 cases since the start of Epi Week 32. Of the cumulative cases reported 92.1% (210/228) were older than 5 years of age and 59.6% (136/228) were females.

The highest number of cases 61.8% (141/228) were reported from **Sool region** followed by **Togdheer region** with 22.4% (51/228).

Figure 6. Trends of typhoid cases for WK 32 to WK 39-2025



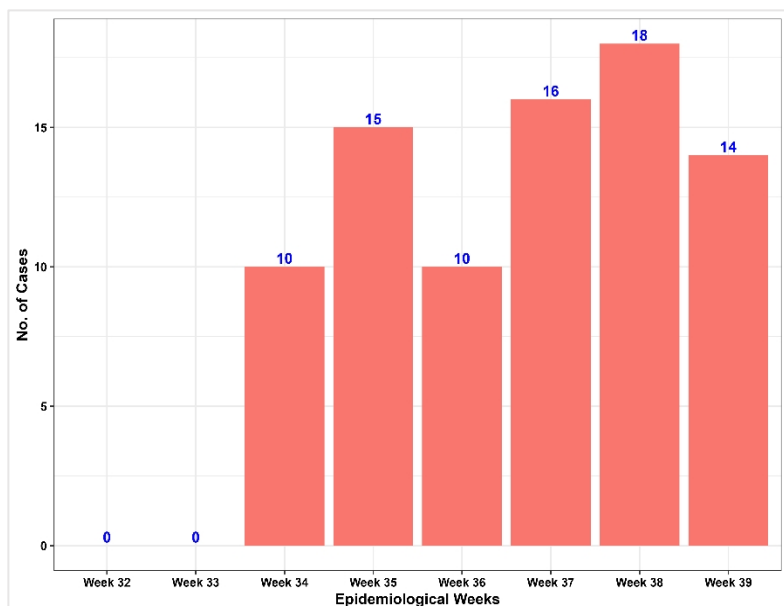
Dengue Fever Surveillance:

In epidemiological week 39, 14 cases of dengue fever were reported. Of these, 71.4 percent (10/14) were females and 64.3 percent (9/14) were reported from Sahil region.

Regarding the cumulative cases since week 32, 83 cases of dengue fever were reported. Of the cumulative cases, 54.2 percent (45/83) were females and 59.0 percent (49/83) were older than 5 years of age.

Notably, 84.3 percent (70/83) of the dengue fever cases were reported from Togdheer (40/83) and Sahil regions (30/83).

Figure 7. Trends of Dengue Fever cases for WK 32 to WK 39-2025



AFP Surveillance:

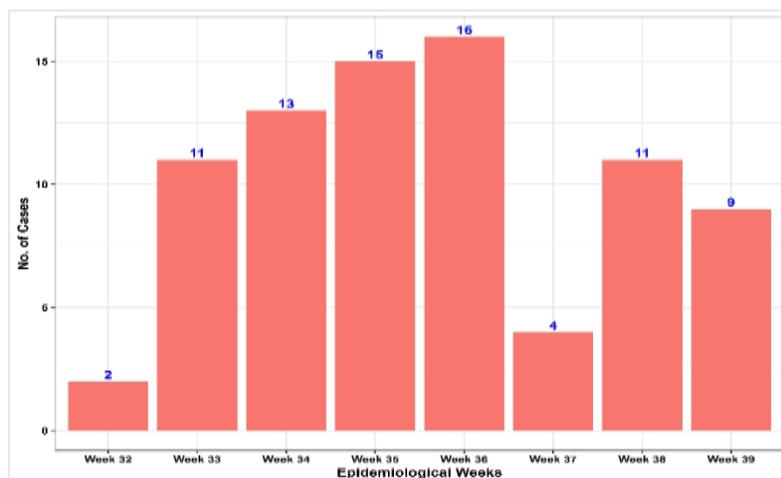
In Epi Week 39, *no new AFP* cases were reported. Hence, the cumulative number of AFP cases from Week 32 through 39 remains 10 cases. Notably *no deaths* were reported during this period.

Measles Surveillance

In Epi Week 39, 9 cases of Measles were reported reflecting an 18.2 percent decrease of cases compared to Epi Week 38 (11 cases).

The majority of cases, 6 of the 9 (66.7 percent) cases reported, were under-five children and 5 of them (55.6 percent) were females. In addition, 7 of the 9 cases (77.8 percent) were reported from Togdheer region, accounting for the highest weekly case load.

Figure 8. Trends of measles cases for weeks 32 through 39 of 2025

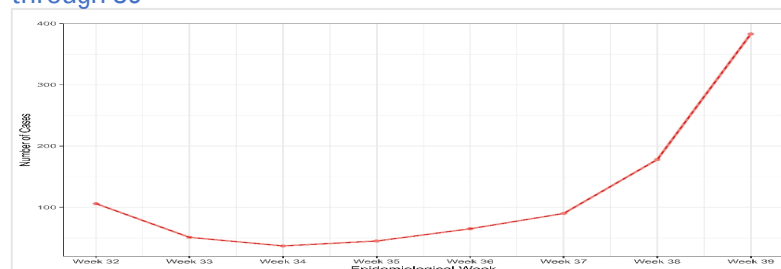


4. Detailed Analysis of Selected Priority Conditions

4.1. Malaria

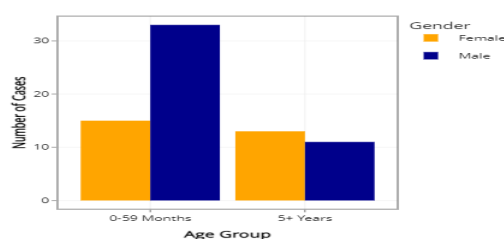
Overall, 955 cases of Malaria were reported between weeks 32 and 39. Among these cases, only 107 (11.2 percent) were 5 years old or younger and 592 (62.0 percent) were males. The lowest number of malaria cases were observed in Epi Week 34 after which cases have been increasing.

Figure 9. Number of malaria cases reported for Epi Weeks 32 through 39



Overwhelming majority of these cases (86.3%) were reported from Awdal region. Of the 824 cases reported from Awdal region, 89.2 percent were older than 5 years and 59.3 percent were male. These cases were concentrated in Borama (70.1% of overall cases) and Bakri (19.3%) districts. Marodi-jeh and Togdher regions reported second and third highest caseloads, respectively. Hargeisa (4.7% of overall cases) and Gabiley (3.4%) districts of Marodi-jeh region and Buhodle (26.2%) and Burao (17.8%) districts of Togdher region contribute the highest number of cases per respective region.

Figure 9. Number of malaria cases reported from Epi Weeks 32 to 39

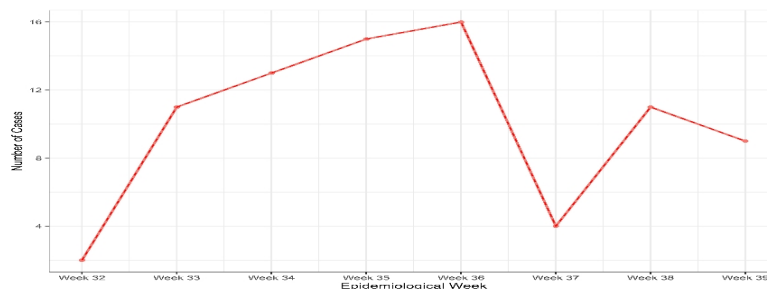


Considering Climate outlook, a moderate rainfall ranging from 40 to 200 mm is anticipated across most regions of Somaliland, particularly in Awdal, Sanaag, Togdheer, and Marodi-jex. Given that 1 mm of rainfall corresponds to 1 liter of water per square meter, these conditions may increase the risk of malaria transmission due to expanded mosquito breeding habitats.

4.2. Measles cases

Since epidemiological week 32, cumulative measles cases of 81 were reported. In week 39 alone, 9 cases of measles were reported. Of all the cases reported in week 39, **77.8 percent (7/9) were reported from Togdheer region.**

Figure 11. Trends of measles cases from week 32 to week 39 of



Earlier, measles cases have been widely distributed across regions with Togdheer (45 cases) contributing the highest number of cases followed by Maroodi-jeh (16 case) and Sahil regions (12 cases). However, in Epi Week 39, only three regions (Togdheer (7 cases), Marodi-jeh (1 case) and Awdal (1 case)) have reported measles cases.

5. Summary of ongoing public health events in the region

- ✚ Cholera/Acute Watery Diarrhea remains the dominant threat across countries of the Horn Africa and Yemen, with South Sudan, Sudan and Ethiopia and Yemen carrying the heaviest current burdens.
- ✚ Mpox is emerging as a notable concern in Kenya with sustained transmission. In Ethiopia, as of 5 September, 28 Mpox cases including one death (CFR 3.6%) were reported
- ✚ According to Africa CDC, as of 30 September 2025, measles cases were reported in Ethiopia (4,429 cases), Kenya (61 cases), Somalia (7,605 cases), and Sudan (2,887 cases).

6. Recommendations

- ✓ The continued increase of the number of malaria cases (115.2% increase in Epi Week 39 compared to Epi Week 38), along with the ongoing rainy season, warrants enhanced malaria prevention and control measures.
- ✓ The continued reporting of measles cases, particularly in Togdheer, Marodi-jeh and Sahil regions combined with the high burden of measles in Somalia and Ethiopia suggests the need for urgent vaccination campaigns and targeted interventions.
- ✓ Although no new diphtheria cases were reported this week, continued vigilance is of paramount importance. Key measures, including prompt case reporting, timely case management and environmental interventions should be continued until the decline is sustained over a long period.
- ✓ Given that other diarrhea cases continue to account for the highest number of reported cases and shows an increase of cases compared with previous weeks, enhanced surveillance and continued control measures is essential.

7. Source of Information/Contacts for Details

Editorial Team: HMIS Technical Team

Source: <https://somalilandhis.net/>

Source of AFP Cases: WHO/DHIS2

Contracts:

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Nasir Mohamed Ahmed, National HMIS Manager- Email- HMIS.mohd@Sldgov.org

Appendices:

Appendix 1: Malaria Cases Reported in epi Week 39 (22 to 28 Sept-2025) per Health Facilities

Region	Districts	Health Facilities	Malaria case	Proportion per HF
Marodi-Jeh	Gabiley District	Agabar Health Center	4.	1.0%
Awdal	Baki District	Ali-haydh Health Center	17.	4.4%
Marodi-Jeh	Gabiley District	Arabsiyo Health Center	2.	0.5%
Marodi-Jeh	Hargeisa District	Aw barkhadle Health Center	6.	1.6%
Awdal	Baki District	Baki Health Center	61.	15.9%
Awdal	Borama District	Boon Health Center	4.	1.0%
Awdal	Borama District	Borama Regional hospital	85.	22.2%
Marodi-Jeh	Gabiley District	Caada Health Center	4.	1.0%
Awdal	Baki District	Cadad Health Center	7.	1.8%
Awdal	Borama District	Central Health Center	12.	3.1%
Marodi-Jeh	Hargeisa District	Dararwayne Health Center	1.	0.3%
Marodi-Jeh	Hargeisa District	Darisalam Health Center	8.	2.1%
Awdal	Lughaya District	Fardaha Health Center	2.	0.5%
Marodi-Jeh	Gabiley District	Gabiley District Hospital	3.	0.8%
Marodi-Jeh	Hargeisa District	Geed deeble Health Center	2.	0.5%
Awdal	Borama District	Haji Nuur HC	13.	3.4%
Awdal	Zeila District	Harirad Health Center	12.	3.1%
Marodi-Jeh	Hargeisa District	Hunbawayne Health Center	1.	0.3%
Awdal	Lughaya District	Lughaya RHealth Center	4.	1.0%
Marodi-Jeh	Hargeisa District	Moha,edmoge Health Center	1.	0.3%
Awdal	Borama District	Qoor gaab Health Center	20.	5.2%
Togdher	Buhodle District	Qorulugud Health Center	1.	0.3%
Awdal	Baki District	Ruqi Health Center	24.	6.3%
Awdal	Borama District	Sh.Ali Jawhar Health Center	84.	21.9%
Awdal	Borama District	Sh.Osman Health Center	1.	0.3%
Awdal	Borama District	Shifo Health Center	4.	1.0%
Total Malaria Cases			383.	100%

Appendix 2: Measles Cases Reported in epi Week 39 (22 to 28 Sept-2025) per Health Facilities

Region	District	Health Facilities	Suspected measles case	Proportion Per HFs
Marodi-Jeh	Hargeisa	Adadley Health Center	1	11%
Togdher	Buroa	Bali-Dhig Health Center	1	11%
Togdher	Buroa	Burao Central Health Center	1	11%
Togdher	Buroa	Khalifa Burao Hospital	5	56%
Sool	Ainabo	Wirir Health Center	1	11%
Total Measles Cases			9	100%