SIMPLIFIED EARLY ACTION PROTOCOL ACTIVATION

Somalia | Simplified Early Action Protocol Cholera

17 October 2026



Practical training for SRCS volunteers in Burao on ORP kit deployment covering ORS preparation, acute watery diarrhoea management, and referral systems to strengthen branch readiness. (Photo: SRCS).

EAP №: **sEAP2025SO02**	Operation №: **MDRSO023**	EAP approved: **24/06/2025**	EAP timeframe: **24/06/2025 – 23/06/2027 (2 years)**
Trigger date: **11/10/2026 (T1)**	Early action lead time: **4 months**		Early action timeframe: **3 months (17/10/2026 – 16/01/2027)**

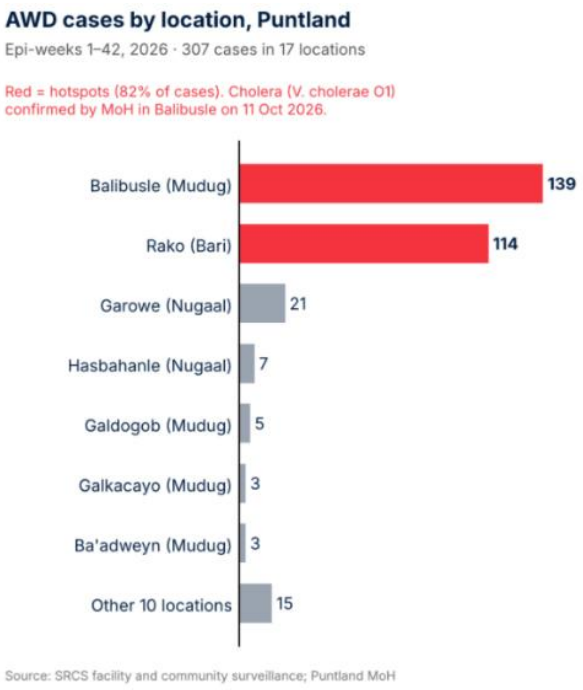
Budget: 83,947
To assist: 24,700 people

EARLY ACTION PROTOCOL ACTIVATION

Activation Overview

On 11 October 2026, the Somali Red Crescent Society (SRCS) activated Trigger 1 (T1) under its Simplified Early Action Protocols (sEAPs) for Acute Watery Diarrhoea (AWD)/Cholera following the confirmation of elevated epidemiological and environmental risks in Puntland and Somaliland. The activation was based on surveillance data indicating a sustained increase in AWD cases, confirmation of cholera transmission, and deteriorating water quality conditions that could accelerate the spread of disease.

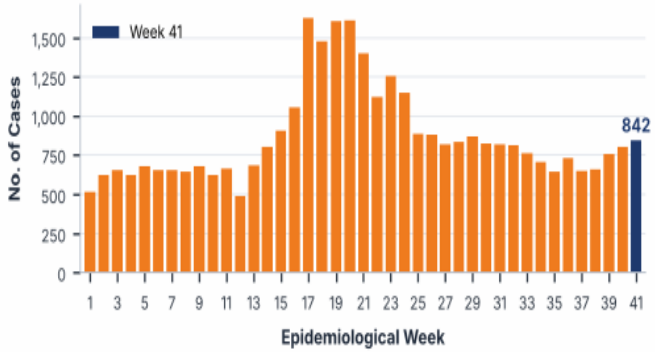
In Puntland, the Puntland Ministry of Health (MoH) confirmed Vibrio cholerae O1 (Ogawa) in samples collected from Balibusle, Mudug region. A total of 307 AWD cases were reported across 17 locations in Mudug, Bari, Nugaal, and Ras-Asayr regions by epidemiological week 42 of 2026. The majority of cases were concentrated in Balibusle (139 cases) and Rako, Bari (114 cases), while Garowe, one of the priority intervention areas, reported 21 cases. Additional spikes in AWD cases have also been reported in a neighboring location to the selected PAMIs, indicating an expanding risk of transmission across the affected areas.



Trend of AWD cases in Puntland,

Furthermore, water quality testing conducted by the Puntland Water Development Authority (PWDA) detected E. coli contamination in two of the three main water sources serving Balibusle, highlighting an increased risk of waterborne disease transmission and the potential for further spread of AWD/cholera in the region.

In Somaliland, surveillance data from the Ministry of Health Development (MoHD) reported 842 AWD cases in epidemiological week 41, representing a 5.3 per cent increase from the previous week and continuing an upward trend observed since epidemiological week 38. Since the beginning of 2026, a cumulative 35,439 acute diarrhoea cases have been reported. The highest caseloads have been recorded in Awdal, Togdheer, Maroodi Jeex, Sahil, Sanaag, and Sool regions. Additional spikes in AWD cases have also been reported in a neighboring location to the selected PAMIs, indicating an expanding risk of transmission across the affected areas. In parallel, the SRCS community-based surveillance system, through the Nyss platform, reported an increase in AWD alerts from affected communities, providing additional evidence of escalating public health risks.



Trend of AWD cases in Somaliland

The situation is further exacerbated by the anticipated Deyr rainy season and El Niño conditions, which are expected to increase flooding, contaminate water sources, and create favorable conditions for the transmission of AWD and cholera. Based on these combined epidemiological and environmental factors, early action was triggered to reduce the risk of outbreak escalation and mitigate potential humanitarian impacts.
The activation will support anticipatory interventions in AWD hotspot areas, including Borama and Burao districts in Somaliland and Bosaso and Garowe districts in Puntland. Planned actions include refresher training for volunteers on Water, Sanitation and Hygiene (WASH), dissemination of Risk Communication and Community Engagement (RCCE) and Information, Education and Communication (IEC) materials, community engagement through local leaders and health committees, and water quality testing and monitoring in collaboration with relevant authorities. These activities will be implemented over an initial period of up to four months in accordance with the Simplified Early Action Protocol framework.

Early Action Overview

PLANNED OPERATIONS

Health & Care	Female:	**6,084**	**CHF 34,614**
	Male:	**5,616**	AP Code: **107,108, 109**
Indicator:	# of people reached with health and care interventions in advance of a hazard.		
Priority Early Actions:	**1.** Intensify health and hygiene promotion related to AWD/Cholera, incl. promotion of healthy nutrition for children and PLWs, including breastfeeding. **2.** Engage local community leaders and community health committees on AWD/Cholera prevention and control.		

Water, Sanitation and Hygiene	Female:	**6,084**	**CHF 33,129**
	Male:	**5,616**	AP Code: **110, 111**
Indicator:	# of people reached with WASH interventions in advance of a hazard		
Priority Early Actions:	1. Conduct (one/half day) refresher training for NS and Govt staff and volunteers on WASH (if relevant44). 2. Intensify targeted RCCE using IEC material on cholera prevention and control, incl. environmental factors contributing to cholera transmission (e.g. drought, floods) and hygiene. 3. Engage local community leaders and community water management committees on AWD/Cholera prevention and control. 4. Water quality testing/monitoring in collaboration with other stakeholders.		

Community Engagement and Accountability	Female:	**6,084**	**CHF 2,285**
	Male:	**5,616**	AP Code:
Indicator:	Establish community consultation and feedback mechanism. % of key messages disseminated through at least 3 communication channels.		
Priority Early Actions:	1. Distribution of CEA materials, key messages and feedback channels.		

Enabling approaches

Coordination and Partnerships	Female:	**N/A**	**CHF 3,515**
	Male:	**N/A**	AP Code: **118, 119, 127, 128**
Objective:	# of lesson learned Workshop conducted.		
Priority Early Actions:	1. Conduct lesson learned Workshop.		

Secretariat Services	Female:	**N/A**	**CHF 6,011**
	Male:	**N/A**	AP Code: **122**
Objective:	IFRC supports SRCS with technical, financial, logistics and reporting services for the T1 activation.		
Priority Early Actions:	**1.** Support coordination with stakeholder and authority. **2.** Pro vision of technical supporting during the implementation. **3.** Support operation management and reporting.		

National Society Strengthening	Female:	**N/A**	**CHF 4,394**
	Male:	**N/A**	AP Code: **122**
Objective:	# of monitoring and supervision conducted		
Priority Early Actions:	1. Mobilize BDRT to support early action and prepare for early response. 2. Conduct monitoring and supervision.		

Contact information

For further information, specifically related to this operation please contact:

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- **President:** Yusuf Hassan Mohamed, yhmohameds@gmail.com , +254 722 144 284
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In the IFRC

In the IFRC Country Cluster Delegation

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Reference

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