

Somali Health Cluster Bulletin #13

July 2008



Assessment of health facilities in Boroma, Somaliland Photo: WHO

The Somalia Health Cluster Bulletin aims to provide an overview of the health activities conducted by the health cluster partners active in Somalia.

The Health Cluster Bulletin is issued on a monthly basis.

Contributions are to be sent to cluster@nbo.emro.who.int

HIGHLIGHTS

- WHO Polio campaign coming up in mid August
- Security in Southern and Central Zones of Somalia drastically deteriorated
- Fighting in Belet Weyne since mid July

SITUATION OVERVIEW

- Security in Southern and Central Zones of Somalia has drastically deteriorated, forcing some agencies to reduce their activities. On 26 July, a national WHO staff member in Dinsoor was shot and been evacuated to Nairobi for further treatment. However, WHO and partners in the health sector are maintaining best possible service to ensure health of IDPs and other vulnerable groups.
- Standoff between forces loyal to ICU in Belet Weyne and Ethiopian troops has been ongoing since mid July. Under coordination of UNICEF, aid agencies are responding to the impact on the local population. WHO has provided a full emergency health kit (IAEHK) to IMC containing supplies for 10,000 people for approximately 3 months.

HEALTH RESPONSE TO THE HUMANITARIAN CRISIS

1. Assessment and Monitoring

- More than 5,000 people have been displaced along river banks in Kurtunraway and Afgooye area of Lower Shabelle due to heavy rains. **WHO, CONCERN, CARE** and other health cluster partners in place are monitoring the situation ready to intervene
- **MoH** in partnership with **SOPHPA** conducted chlorine residual tests of 12 drinking water wells in Madina (8), Waberi (3), and Hamarweyne (1) in Lower Shabelle region 3 July 08.
- **Muslim Aid UK** has initiated nutritional assessment for Jamaame and surrounding villages to identify levels of malnutrition as well as for additional Malaria testing in Middle and Lower Shabelle regions between 23 June and 1 July.
- A reassessment of IDP populations in Lower Shabelle conducted by **JUMBO** and **UNICEF** from 27 to 29 June showed the following updated numbers: Kah-Shiqal (12,202); Daynile (35,537); and Mogadishu North (12,384). Of the total 60,123 IDPs, children under five years of age count to 9,620. A UNIMIX distribution plan has been set up.
- End of July, **AFREC** started assessment for all health posts to re-evaluate health care deliveries in 5 villages in Afmadow district (Mido, Xayo, Tobaney, Tabta and Birta-Dheer). Suggestions include refresher courses for health staff on guidelines for anti malaria treatment, drug use and supplies management.
- On 30 July, **Muslim Aid UK** started assessment for returning IDPs from villages affected by clan conflicts in North-West Jamaame district (Sabatuni, B/Washaq, Malayley ,Reynaro ,B/ Musse, Afgole and Buulo-Jeelle) with aim to re-establish damaged health facilities, such as health posts providing basic PHC, health education, and treatment of malaria.



2. Health Coordination & Capacity Building

Training

- In June, **WHO** and **COOPI** assessed Bourao and Boroma Hospitals (Togdheer Region) in response to increased numbers of reproductive health complications and high infection rates. As recommended, trainings on aseptic and hygienic measures were conducted to prevent wound infection due to improper disinfection and sterilization as well as irrational drug use in case management. A total of 51 health workers (midwives, qualified and auxiliary nurses, medical students) participated.
- Between 29 June and 2 July, **AFREC** trained auxiliary nurses in Afmadow MCH with focus on aseptic techniques for safe delivery of mothers to prevent maternal mortality due to tetanus.
- From 5-10 July 08 in Puntland MoH Training Hall Garoowe, Nugaal Regional Health Office delivered, with **WHO** technical assistance, a 6-day workshop for 26 (90% of Nugaal Region's) qualified nurse-midwives entitled "Helping Midwives to help Mothers". The workshop, conducted entirely in Somali, was designed to promote peer-learning and addressed all-round staff development needs. Concurrently, on-the-job training for 6 regional and national managers (midwives' workshop facilitators) on facilitation techniques and participatory methodology to deliver similar workshops in their own regions later.
- **World Vision** conducted 1-day workshop on 26 July 08 for community Volunteers Groups (20 participants) in Buaale town surrounding villages with focus on healthy living, including balanced diet, avoiding Miraa and cigarettes, and seeking medical care at early stage of TB.
- 12 qualified nurses received training on primary health care concepts by **World Vision** in Middle Jubba (Buaale, Sakow and Salalge districts) in July.
- On 10 July, **World Vision** conducted training for local staff on cold chain management in Sakow district, Middle Jubba.
- **WHO** trained 41 pharmacy assistants, storekeepers and dispensary assistants in health facilities in Wajid from 19-29 June. Objectives were quantification of drug needs, supply/stock management, SOPs in receiving and delivering medicines/ supplies, drug storage and good dispensing practices.
- **SRCS** conducted intensive job training with WHO guidelines for data collection and information sharing from 16-18 June in Jilib district, Middle Jubba.



Training on aseptic and hygienic measures in Bourao Hospital
Photo: WHO

3. Communicable Diseases and Environmental Health



Acute Watery Diarrhea in Barghaal, Bari Region/
Puntland
Photo: WHO

Acute Watery Diarrhea (AWD)

- For epidemiological weeks 27-31 (28 June - 1 August), a total of 541 cases of AWD have been reported from Middle and Lower Jubba regions. The high ratio of cases in children < 5 years of age (488) and low fatality rate (related deaths: 2) are indicators that the diarrhea does NOT constitute cholera.
- An increase of AWD was reported from Barghaal District, Bari Region in Puntland with 109 reported cases (as of 30 July) and 7 related deaths. Outbreak verification was conducted by the Ministry of Health, **UNICEF** and **WHO** and **Merlin**.

Water and Sanitation (WASH)

- Environmental hygiene and chlorination of shallow wells has been initiated in Jilib district by **SRCS** in the third week of July. The major goals are to mitigate vulnerability to AWD and prevention of malaria.
- With the aim to avoid water borne diseases, **AFREC** has initiated chlorination of water shallows in Tortora, Tarri, and Xabaalo-Culimo in Afmadow district (Lower Jubba). By 9 July, 32 wells were already chlorinated.

Nutrition

- Since June, **Mercy USA** are running a feeding program for vulnerable groups such as severely malnourished children <5 in Jilib district.

Polio

- **WHO** Polio campaign will be launched from 11 August targeting more than 1.8 million children under the age of 5 in a house-to-house strategy throughout Somalia. The national immunization days (NIDs) for polio will also include a mass de-worming activity targeting more than 1 million children between 2 and 5 years.

Examination for nutritional status of child in Bakool Photo: WHO



4. Primary and Secondary Health Care

Primary Health Care

- **World Vision** has upgraded its outreach teams for nomadic communities consisting of qualified nurses and sanitarians in Salagle, Sakow, Buaale in Middle Jubba. Outcome assessments are planned after 3 months.
- **Muslim Aid UK**, in partnership with **WHO** and **SCI-Somalia**, started a schistosomiasis program on 12 July in Jamaame, Lower Jubba with the goal to treat cases, improve prevention awareness and interrupt the transmission cycle
- On 21 July, **SRCS** report to have visited more than 800 households in Gududey (Jilib district of Middle Jubba) for de-worming of children under 5 years of age. This response was indicated by higher numbers of suspected cases due to poor environmental hygiene in the area.

Rehabilitation and Support to Health Facilities

- **Muslim Aid UK** has been supported in the rehabilitation of 3 OPDs on Afgoooye IDP corridor by **WHO**, in the establishment of 3 MCHs and OTPs by **UNICEF** and in food distributions to 45 IDP camps by **WFP**.
- After training health workers in Bakool district in June, **SRCS** have opened MCH/OPDs in Garas Weyne and Biyooley.
- **MURDO** has opened an OPD in Kah-Shiqal, Lower Shabelle region.
- In July, Baidoa Hospital has received reproductive health supplies from **UNFPA**.
- In June and July, **WHO** has provided partners and health facilities with over 20 Interagency Emergency Health Kits (IAEHKs). Each Kit provides medicines and medical supplies for 10,000 people for 3 months, and pre-positioned another 20 kits. Furthermore, 20 Diarrheal Disease Kits (DDKs) have also been pre-positioned (WHO offices in Garowe, Hargeisa, Wajid and Merka, as well as Luuq Hospital) and another 15 DDKits are expected to arrive in the coming weeks. In addition, 10 Trauma Kits are pre-positioned in the following locations to provide treatment for the war/conflict wounded: WHO Garoowe (2), WHO Hargeisa (2), WHO Merka (1), WHO Wajid (1), WHO Mogadishu (2), COOPI Baidoa (1) and COOPI for Buroma Hospital (1).

Health Education & Public Awareness

- **AFREC**, with support of **WHO**, have been conducting health education and soap distribution, as well as chlorination activities to prevent water borne diseases, among the high influx of IDPs in Doble town since end of July. After clan fights in West Kismayo, 4 injured were attended in Doble MCH observation room.
- **AFREC** conducted a health education event with focus on HIV/AIDS in Afmadow from 13 to 17 July with participants from local youth groups (50 female, 20 male participants). Major constraints related to the topic included religious beliefs and cultural taboos
- After assessments in 3 villages (Wallacis, Shabelley, and Warqayaamo) and selection of village health committees (VHCs), Hagar Health Center (Lower Jubba) has started an environmental hygiene program end of July.

IRC, Merlin and WHO will conduct a workshop on "analyzing disrupted health systems in countries in crises" from 20 October to 1 November 2008 in Hammamet, Tunisia. Further information on objectives, contents and participation is available at http://www.who.int/hac/techguidance/training/analysing_health_systems