

November 2023

Health Emergency Programme Update – Somalia



Flooding in Galkayo, Puntland. © WHO Somalia/ Mukhtar Sudani

KEY HEALTH INDICATORS – NOVEMBER 2023

130	43 (33.1%) active health cluster partners in 56 districts.
7.8 million	People in need of health care

HEALTH NEEDS AND PROVISION

- 8.3 million people (over half the population of Somalia) are in need of humanitarian assistance¹.
- Nearly 3.7 million people – 22% of the population – are experiencing acute food insecurity including 2.8 million facing emergency (IPC 3) and 919 000 in catastrophe (IPC 5) levels of food insecurity. 1.5 million children are facing acute malnutrition².
- Somalia is currently experiencing escalating flash floods caused by heavy Dyer rains that started in October and have destroyed infrastructure and farms. So far 2.1 million people have been affected, 1.1 million have been displaced and 110 people have died mainly in Jubaland, South West and Hirshabelle states³.
- Fewer than 1 consultation per person per year reported during the month (as compared to the OCHA standard of 1 new visit/person/year).

1 <https://reliefweb.int/report/somalia/somalia-humanitarian-response-plan-february-2023>
 2 Integrated Food Security Phase Classification Report -September 18, 2023
 3 Somalia: 2023 Deyr Season Floods Situation Report No. 3 (As of 3 December 2023) - Somalia | ReliefWeb

HIGHLIGHTS

- 444 Community Health Workers (CHWs) were deployed in 17 flood-affected districts across six states where the World Health Organization (WHO) is implementing emergency response activities.
- 74 385 people were reached with preventative messages for epidemic-prone diseases including water and vector-borne diseases and respiratory pathogens including COVID-19.
- 5232 children under the age of 5 years with acute diarrhoea were identified and treated in the community with oral rehydration salts (ORS) and zinc.
- CHWs screened 36 953 children under the age of five for malnutrition using mid-upper arm circumference (MUAC) measurement, of whom 8952 (24.2%) had moderate acute malnutrition (MAM) and 5568 (15.1%) had severe acute malnutrition (SAM). Children with MAM were referred to an outpatient therapeutic programme (OTP) while those with SAM were referred to stabilization centres.
- 516 pregnant women were given iron and folic acid supplements, 6056 children aged 6 to 59 months were given vitamin A supplements, and 23 817 lactating mothers were sensitized on infant and young child feeding (IYCF) activities.
- 2157 severely malnourished children with medical complications were admitted to 53 nutrition stabilization centres that are supported by WHO, of whom 2076 (96.2%) were cured, 25 (1.2%) were registered as defaulters, while 23 (1.1%) died.
- 16 511 people in drought-affected communities, including 6014 (36.4%) children under 5 years, received integrated primary health care services.

Coordination meetings

- WHO, the United Nations Office for Coordination of Humanitarian Affairs (UNOCHA), the United Nations Children's Fund (UNICEF) and the World Food Program (WFP) conducted a field mission to Dolow to assess the impact of flash floods. During the mission, the team met with the vice president of Jubaland state, local Non-Government Organisations (NGOs) and community representatives. During these meetings, the UN agency heads discussed progress on key recommendations to control aid diversion. Some measures taken include creating awareness among employees and targeted communities on the meaning of aid diversions and its implications. The partners resolved to share relevant information including targeted populations and to involve local leaders in identifying aid beneficiaries and called for strong government leadership in ensuring equity in the identification of targeted beneficiaries.



Communities respond to flooding, Dolow. Photo credit: © WHO Somalia

- WHO, in collaboration the World Organization for Animal Health (WOAH), the United Nations Food and Agricultural Organization (FAO), and the United Nations Environment Program (UNEP), supported the Federal Ministries of Health, Agriculture and Animal Health, and Environment to convene a National Bridging workshop (NBW) in Nairobi. The meeting was attended by technical officers from across government ministries and agencies, academics, UN agencies and other partners as well as observers.. The purpose of the meeting was to identify key gaps in the implementation of One Health activities among different government agencies using disease specific scenarios focusing on key pillars including laboratory capacity, risk communication and community engagement, field investigation and response, coordination and financing of acute public health events that occur at the human, animal and environment interface. After the workshop, participants developed a roadmap to strengthen the implementation of One Health activities.
- WHO conducted a joint rapid health needs assessment with local NGOs to identify the needs of the flood-affected populations in Galkayo district. The team identified 180 000 people displaced by floods located in five camps for internally displaced people (IDPs). The most urgent health needs were: (i) continuation of primary health care services including vaccination services that were disrupted by floods; (ii) water, sanitation, and hygiene (WASH) facilities; and (iii) food and shelter. Health and WASH cluster partners developed response plans to meet the basic health needs of flood-affected communities.

Implementation of community-based surveillance

WHO deployed 444 CHWs in 17 flood-affected districts in which WHO is supporting emergency response operations. CHWs conducted risk communication, community education, alert detection, reporting, screening for malnutrition among children, and home-based management of common childhood illnesses.

- CHWs visited 74 385 households and sensitized an estimated 249 554 people with preventative messages for water and vector-borne diseases including COVID-19.
- CHWs detected and reported 1 476 alerts of acute watery diarrhoea (AWD), 422 alerts of suspected measles and 50 alerts of COVID-19. These alerts were investigated and validated by district-based rapid response teams.

In the 17 flood-affected districts where WHO has scaled up the implementation of health interventions, CHWs conducted the following activities:

- Identified and treated 6263 children under the age of five with acute diarrhoea with ORS and zinc. 565 (9.0%) children with severe dehydration were referred to health facilities for further management.
- Screened 36 953 children under the age of five for malnutrition using MUAC, of whom 8952 (22.2%) had MAM and 5568 (15.1%) had SAM. Children with MAM were referred to an OTP while those with SAM were referred to stabilization centres.
- Provided iron and folic acid to 516 pregnant women, vitamin A supplementation to 6056 children aged 6 to 59 months and deworming tablets to 14127 children aged 12 to 59 months, and sensitized 23 817 lactating mothers with key messages on IYCF activities.
- Identified 2817 children with respiratory infections of whom 631 had one or more danger signs and were referred for specialized care.

Cholera response in drought-affected districts

Somalia is currently emerging from the risk of famine that was projected in 2022 following five failed rainy seasons. Now, the country is experiencing flash floods resulting from heavy Dyer rains that have affected 2.4 million people and displaced 1.1 million especially in Southwest, Hirshabelle, Galmudug and Jubaland states. The flash floods have destroyed over 100 water sources and 150 latrines. Many displaced communities have no access to latrines leading to water contamination. Since the start of heavy rains in October 2023, 2834 cholera cases and 8 deaths (case fatality ratio (CFR) 0.3%) in 11 flood-affected districts with cases almost doubling in Daynile, Kahda, Burhakaba and Baidoa over the past eight weeks. WHO has scaled up preparedness and response activities in districts at risk of flooding.



CPrepositioning supplies for the Baidoa flood response © Ali Mustaf / WHO Somalia

To reduce the risk of new cholera cases, WHO has supported the Ministry of Health to implement the following activities:

- Convening coordination meetings with WASH cluster and the cholera taskforce of the Ministry of Health, to identify response gaps and develop a response plans
- Community sensitization on home-based water treatment and community management of water sources to prevent contamination, targeting 1.2 million IDPs in districts at risk of flooding during El Niño.
- Supporting district-based rapid response teams on the investigation and validation of 80 alerts of cholera, of which 16 were tested positive for *Vibrio cholerae* 0139 Ogawa.
- Convening cross-border coordination meetings with teams in Somalia, Ethiopia and Kenya to review the progress of cholera response activities as well as planning for reactive oral cholera vaccination campaigns in the three countries.
- Prepositioning information, education and communication (IEC) materials to all states in preparation for El Niño response.
- Prepositioning medical supplies in flood-affected states that are adequate for the management of over 5000 cases.
- Conducted capacity assessment of the cholera treatment facilities and review response needs for each cholera treatment centre (CTC).

However, despite the prepositioning of medical and laboratory supplies, most of the roads have been cut off making last-mile delivery of supplies very difficult. During the assessment of the CTCs, implementation of infection prevention and control interventions was identified as one of the major gaps.

Response to suspected cases of diphtheria in Galmudug and Puntland state

- The state-based Ministry of Health in Galmudug and Puntland reported alerts of suspected diphtheria cases in Galkayo North district to the Federal Ministry of Health, WHO and health cluster partners. Since September 2023, 109 cases and 18 deaths (CFR 16.5%) have been reported in Galkayo. The majority of the reported cases are children under 5 years with no history of vaccination. The suspected cases were recorded in standard line list by district-based rapid response team. There is an urgent need for additional diphtheria anti-toxin (DAT) to manage suspected cases of diphtheria. WHO is supporting the shipment of samples to the UK Health Security Agency for confirmation of suspected cases.
- The Expanded Program on Immunization (EPI) team developed a plan to scale up vaccination campaigns targeting children under five years who have never been vaccinated in Galkayo, Gardo, Garowe and surrounding villages. So far 1128 children under 5 years have been vaccinated with pentavalent vaccine.
- WHO organised a training for 110 healthcare workers on the clinical management of suspected diphtheria.

Response to dengue fever outbreak in Somaliland

- WHO received alerts of a dengue fever outbreak from the Somaliland Ministry of Health and Development (MOHD) in October 2023. In response, the WHO office supported the MOHD technical teams to conduct field visits and validate alerts. The field teams listed 1863 cases in standard line list form, of which 668 were tested positive for dengue by rapid diagnostic test (RDT) kit. The

most affected districts are Hargeisa, Boroma and Gebiley. WHO shipped RDT kits that are adequate to test 3000 cases of dengue, distributed IEC materials for community sensitization and coordinated scaling up of mosquito vector surveillance with UNICEF to implement targeted interventions aimed at destroying breeding sites for mosquito vectors. In addition, WHO built the capacity of 110 frontline health workers in Somaliland on timely detection, reporting, testing and standard clinical management of dengue fever. However, surveillance records show that the number of dengue fever cases are increasing in Somaliland and WHO will provide additional laboratory supplies to support laboratory confirmation of additional cases.

Implementation of drought response activities in affected districts

WHO is collaborating with other UN agencies to scale up the provision of integrated primary healthcare services to drought-affected communities in 11 districts in Galmudug, Jubaland, South West State, Hirshabelle and Banadir region. WHO deployed integrated outreach teams, who:

- Delivered integrated primary healthcare services to 33 565 people in drought-affected communities, of whom 14 269 (42.5%) were children under 5 years of age.
- Treated 1196 children under 5 years with acute diarrhoeal diseases using ORS while 4542 children aged 6 to 59 months were given vitamin A supplementation.
- Vaccinated 2673 children under 5 years with the first dose of pentavalent vaccine, 1704 with the third dose of pentavalent vaccine, 2229 with the first dose of measles containing vaccine (MCV1) and 1317 with the second dose of measles containing vaccine (MCV2).
- Vaccinated 835 pregnant women against tetanus.



Health worker screens child for malnutrition, Baidoa. © WHO Somalia/ Ali Mustaf

Additionally, WHO expanded service delivery in Kahda and Daynile districts in Banadir, which have the highest concentration of IDPs. Integrated outreach teams delivered the following activities:

- Provided primary healthcare services to 15 922 displaced people suffering from drought-associated diseases, of whom 3527 (22.2%) were children under 5 years.
- Screened 6455 children for malnutrition, of whom 409 (6.3%) had SAM and were referred to stabilization facilities for therapeutic nutrition while 1868 (28.9%) with MAM were referred to OTP for supplementary feeding.
- Provided 1848 children with vitamin A, dewormed 2580 children using albendazole tablets and treated 185 cases of AWD using ORS.
- Vaccinated 360 children with Bacille Calmette-Guérin (BCG) as well as 780 with the first dose of oral polio vaccine (OPV1), 770 with the first dose of pentavalent vaccine (DPT1), 595 with the second dose of oral polio vaccine (OPV2) and second dose of pentavalent vaccine (DPT2), and 535 with the third dose of oral polio vaccine (OPV3) and the third dose of pentavalent vaccine (DPT3). 533 children received the first dose of inactive polio vaccine (IPV1) and 517 received the second dose (IPV2). 614 children received the first dose of measles containing vaccine (MCV1) and 281 received the second dose (MCV2). 1333 pregnant women received tetanus toxoid vaccination.

Capacity building for implementation of Integrated Disease Surveillance and Response (IDSR)

- WHO supported capacity building for training of trainers for 118 frontline health workers from Galmudug (22), Puntland (81), Southwest state (15). The health workers were trained on timely detection and reporting of alerts using the IDSR mobile tracker, outbreak investigation and response, data collection, analysis and reporting including monitoring and evaluation of disease surveillance activities. After the training, the frontline health workers were given reference materials that will guide them during the implementation of IDSR strategy.

Capacity building for Field Epidemiology Training Programme (FETP)

- The Federal Ministry of Health, with support from WHO and the Africa Field Epidemiology Network (AFNET), started building the capacity of frontline health workers on basic Field Epidemiology in October 2022. The purpose of the training is to strengthen timely detection and response to public health alerts reported among high-risk populations. In November, WHO supported the Somaliland MOHD to train the first cohort of ten frontline health workers from selected districts. In Mogadishu, WHO supported the training of 28 health workers from technical units of ministry of health and state level in basic FETP. The trainees were trained on alert detection and reporting using IDSR, outbreak investigation and response, disease surveillance and response and data quality assessment. During the training each of the trainees was assigned a mentor who will support them in implementing specific tasks that will be conducted during their deployment.

Nutrition update in drought-affected districts

- WHO, in collaboration with the nutrition cluster, supported 63 stabilization centres to provide care for children suffering from SAM with medical complications in drought-affected districts. In October 2023, 53 (84.1%) stabilization centres submitted reports on time, including one in Banadir region, nine in Jubaland, six in Galmudug, six in Hirshabelle, 21 in Southwest, and ten in Puntland state.
- In October, 2157 children suffering from SAM with medical complications were admitted to stabilization facilities, of whom 2076 (96.2%) were cured, 25 (1.2%) were registered as defaulters, while 23 (1.1%) died. The districts that reported the highest number of SAM cases with medical complications were Baidoa (322) and Dolow (209).
- WHO, in collaboration with the UNICEF and the Federal Ministry of Health, built the capacity of 20 frontline health workers including six females on the management of children suffering from SAM presenting with AWD in flood-affected districts of Somalia. The training follows a projected increase in children suffering from SAM in stabilization facilities located in these prioritized districts.



Planning health service delivery, Dusta IDP camp, Bay. © WHO Somalia/ Ali Mustaf

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Our weekly and monthly information products

Weekly cholera infographic:

- <http://www.emro.who.int/somalia/information-resources/acute-watery-diarrhoeacholera-situation-reports.html>

Monthly reports:

- <http://www.emro.who.int/countries/somalia/index.html>
- COVID-19 Dashboard-Somalia



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