

October 2023

Health Emergency Programme Update – Somalia



Flooding in Galkayo. © WHO Somalia

KEY HEALTH INDICATORS – SEPTEMBER 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 has declared an emergency in areas where torrential *deyr* (October to December) rains have caused floods that have affected over 706 100 people with more than 113 690 temporarily displaced from their homes as of 6 November especially in South West and Jubaland 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: Deyr rainy season 2023 Flash Update No. 5 (6 November 2023) - Somalia | ReliefWeb

HIGHLIGHTS

- 185 Community Health Workers (CHWs) were deployed in 11 districts across six states where the World Health Organization (WHO) is implementing emergency response activities.
- 176 612 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 35 193 children under the age of five for malnutrition using mid-upper arm circumference (MUAC) measurement, of whom 8952 (16.9%) had moderate acute malnutrition (MAM) and 5568 (15.8%) 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.
- 227 pregnant women were given iron and folic acid supplements, 9468 children aged 6 to 59 months were given vitamin A supplements, and 21 648 lactating mothers were sensitized on infant and young child feeding (IYCF) activities.
- 2720 severely malnourished children with medical complications were admitted to 53 nutrition stabilization centres that are supported by WHO, of whom 2370 (87.1%) were cured, 33 (1.2%) was registered as defaulters, while 28 (1.0%) 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, health and water, sanitation and hygiene (WASH) cluster partners in conjunction with the Puntland Ministry of Humanitarian Affairs and Disaster Management (MOHADMA) conducted a joint Rapid Needs Assessment following heavy rains that were reported in Galkayo that caused flash floods, displacing over 32 000 people and destroying 41 latrines. Galkayo is one of the districts that is hosting internally displaced people (IDPs) impacted by the conflict in Lasanood. During the assessment, the team convened coordination meetings with community leaders and interviewed the people who have been displaced by floods. The urgent health needs of displaced communities include shelter and essential medical supplies for the treatment of water and vector-borne diseases and food. Health cluster partners donated essential medical supplies to displaced communities. However, health and WASH cluster partners reported limited funding constraining response activities in Galkayo and other affected districts.
- WHO, in collaboration with the UK Health Security Agency and the Ministries of Health, Agriculture, and Animal Health, convened a cross-border one health simulation exercise in Addis Ababa, Ethiopia. The purpose of the simulation exercise was to identify gaps in preparedness and response to diseases that occur at the animal/human interface. The meeting was attended by 130 delegates from ministries responsible for one health in Kenya, Somalia and Ethiopia as well as community representatives and academia. Using different scenarios for zoonotic disease outbreaks among communities living in districts bordering the three countries, delegates and technical teams identified major gaps affecting implementation of response activities for emerging and re-emerging zoonotic diseases. During the meeting, delegates from the three countries resolved to strengthen coordination and collaboration between animal and human health sectors with strong participation of affected communities.



Community engagement for vaccination campaign with nomadic population in Puntland. Photo credit: © WHO Somalia

Implementation of community-based surveillance

WHO deployed 185 Community Health Workers (CHWs) in 11 districts in which WHO is supporting emergency response operations. The CHWs conducted risk communication, community education, alert detection, reporting, screening for malnutrition among children, and home-based management of common childhood illnesses.

- CHWs visited 6249 households and sensitized an estimated 176 612 people with preventative messages for epidemic-prone diseases including COVID-19.
- CHWs detected and reported 1409 alerts of acute watery diarrhoea (AWD), 196 alerts of suspected measles and 50 alerts of COVID-19. These alerts were investigated and validated by the district-based rapid response teams.

In the 11 drought-affected districts where WHO has scaled up the implementation of health interventions, CHWs conducted the following activities:

- Identified and treated 5232 children under the age of five with acute diarrhoea with ORS and zinc. 112 (2.1%) children with severe dehydration were referred for further management in health facilities.
- Screened 35 193 children under the age of five for malnutrition using MUAC, of whom 8952 (25.4%) had MAM and 5568 (15.8%) 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 227 pregnant women, vitamin A supplementation to 9468 children aged 6 to 59 months and deworming tablets to 421 children aged 12 to 59 months and sensitized 21 648 lactating mothers with key messages on IYCF activities.
- Identified 8617 children with respiratory infections of which 706 of them 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. However, El Niño has so far affected 706 100 people and displaced 113 690 people especially in Jubaland and South West States increasing the risk of cholera outbreaks. Currently 29 drought-affected districts have reported 14 905 cholera cases and 39 deaths (case fatality ratio (CFR) 0.3%) resulting from limited access to safe water, poor sanitation, and uncontrolled populations movements internally and to neighboring countries. Cholera cases in Baidoa have increased nine-fold over the past two weeks. As the cholera case load increased by 67% from 167 cases in week 36 to 279 in week 44, WHO has scaled up preparedness and response activities in districts at risk of flooding.



Child is screened for malnutrition, Mogadishu. © WHO Somalia/ Ismail Taxta

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

- WHO supported community sensitization targeting 1.2 million IDPs in districts at risk of flooding during El Niño on home-based water treatment and community management of water sources to prevent contamination.
- WHO supported district-based rapid response teams on the investigation and validation of 80 alerts of cholera of which 16 were tested positive for *Vibrio cholerae* O139 Ogawa.
- WHO teams in Somalia, Ethiopia and Kenya convened cross-border coordination meetings and reviewed the progress of cholera response activities as well as planning for reactive oral cholera vaccination campaigns in the three countries.
- WHO prepositioned Information, Education and Communication (IEC) materials to all states in preparation for El Niño response.

Response to suspected cases of diphtheria in Galmudug and Puntland state

- The state-based Ministry of Health in Galmudug reported alerts of suspected cases of diphtheria to the Federal Ministry of Health, WHO and health cluster partners. Since September 2023, 33 cases and 4 (CFR 12.1%) deaths have been reported from Galkayo. In Puntland, 11 suspected cases of diphtheria (of whom 9 were children under 5 years) and two deaths (CFR 18.2%) were reported from Gardo and Garowe districts. The suspected cases were recorded in standard line list by district-based rapid response team. However, there is 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.
- WHO organized a capacity building session for 110 health care workers on the clinical management of suspected diphtheria. The objective of the session was to improve the skills and capacity of frontline health workers for the timely detection, reporting, and treatment of suspected cases of dengue cases reported in high-risk districts.

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 755 cases in standard line list form, of which 198 were tested positive for dengue by Rapid Diagnostic 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, 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 workers provide health services, Mogadishu. © WHO Somalia/ Ismail Taxta

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 16 928 displaced people suffering from different drought-associated diseases, of whom 3527 (20.8%) were children under 5 years.
- Screened 6577 children for malnutrition, of whom 412 (6.3%) had SAM and were referred to stabilization facilities for therapeutic nutrition while 1913 (29.1%) with MAM were referred to OTP for supplementary feeding.
- Provided 2920 children with vitamin A, dewormed 1868 children using albendazole tablets and treated 632 cases of acute watery diarrhoea using ORS.
- Vaccinated 496 children with Bacille Calmette-Guérin (BCG) as well as 109 with the first dose of oral polio vaccine (OPV1), 873 with the first dose of pentavalent vaccine (DPT1), 782 with the second dose of oral polio vaccine (OPV2) and second dose of pentavalent vaccine (DPT2), and 715 with the third dose of oral polio vaccine (OPV3) and the third dose of pentavalent vaccine (DPT3). 713 children received the first dose of inactive polio vaccine (IPV1) and 756 received the second dose (IPV2). 752 children received the first dose of measles containing vaccine (MCV1) and 465 received the second dose (MCV2). 1720 pregnant women received tetanus toxoid vaccination.

Capacity building for emergency response operations

- WHO supported capacity building for training of trainers for 20 frontline health workers (including four females) in Public Health Emergency Operations Centers (PHEOCs) at the national and state levels. The purpose of the training was to equip frontline health workers with skills in coordinating emergency response activities using the WHO-supported PHEOCs across Somalia. The training focused on the implementation of event-based surveillance, PHEOC operations, developing and implementing simulation exercises for response to acute public health emergencies. At the end of the training, participants developed a one-year road map to operationalize the PHEOCs at national and state level and developed a cascaded training plan for state-based PHEOCs managers.



Child receives health services, Mogadishu. © WHO Somalia/ Ismail Taxta

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 September 2023, 53 (84.1%) stabilization centres submitted reports on time, including two in Banadir region, nine in Jubaland, six in Galmudug, four in Hirshabelle, 21 in Southwest, and 11 in Puntland state. In September, 2720 children suffering from SAM with medical complications were admitted to stabilization facilities, of whom 2370 (87.1%) were cured, 33 (1.2%) were registered as defaulters, while 28 (1.0%) died. The districts that reported the highest number of SAM cases with medical complications were Baidoa (351) and Dolow (163).
- WHO, in collaboration with the Federal Ministry of Health, built the capacity of 31 frontline health workers including seven females on assessment survival and defaulter rates among children suffering with severe malnutrition with medical complications admitted in selected stabilization centers in Somalia. The data collected by these health workers will be used by policy makers to understand determinants of admission, retention, and deaths among children with SAM admitted in stabilization facilities.

Support for the management of trauma cases in Beletweyne hospital in Hirshabelle states

Twin bomb blast on 23rd March 2022 in the vicinity of Beletweyne Hospital destroyed the entire hospital and most of the biomedical equipment was damaged and became non-functional. To support the emergency management of trauma cases reported, WHO provided surgical equipment including laparotomy sets and anaesthesia machines to Beletweyne hospital. These kits are adequate to provide trauma care to an estimated 300 cases affected by the blast.

Contacts

Dr Mirza Mashrur Ahmed, ahmedmi@who.int
Ms Fouzia Bano, Communications Officer, banof@who.int
Mr Kyle Defreitas, External Relations Officer, defreitask@who.int
Dr Omar Omar, Information Management Officer, oomar@who.int

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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