HIGHLIGHTS

► Essential Package of Health Services launched to provide free health services in nine regions of Somalia
► Measles outbreak spreading in Somalia; cases quadrupled in March and April
► High level meeting held in Kampala to strengthen the capacity of the Somali Federal Ministry of Health
► Xudur: medical team redeployed and first polio vaccinations in 4 years for 7000 children
► Almost 900 weapon related injuries treated in six hospitals in Mogadishu, Kismayo and Baidoa
► Outreach campaigns conducted in Somalia to mark World Immunization Week 2014
► First treatment center for resistant tuberculosis opened in Hargeisa
► 500 insecticide treated nets distributed at Banadir hospital on World Malaria Day 2014
► World Health Day 2014 celebrated in Mogadishu, Hargeisa, Garowe and Nairobi

Essential Package of Health Services to improve the health of mothers and children

New framework for primary health care adopted in Somalia

The Essential Package of Health Services (EPHS), a major new scheme to provide a comprehensive range of free health services, was launched in Mogadishu in May, in the presence of the Prime Minister of the Somali Federal Government, high level donor officials including the British ambassador, as well as UNFPA, UNICEF and WHO representatives.

The EPHS framework defines the standard of health services that should be provided at each level of the healthcare. The intervention includes training and deployment of human resource, as well as provision of essential medicines, supplies and equipment.

EPHS will be rolled out the in nine regions across the country to improve maternal, reproductive, and neonatal and child health; combat communicable disease; improve surveillance and control, including water and sanitation promotion; provide first-aid and care of critically ill and injured; treat common illnesses, HIV, sexually transmitted infections, and tuberculosis.

The EPHS initiative, which is supported by the Joint Health and Nutrition programme and Global Fund on AIDS, TB and Malaria (GFATM), will continue until the end of 2016. The EPHS is also in line with the New Deal initiative, the Somali Compact and the Somali Six Pillar policy for peace building and state-building. It will also contribute to the implementation of the Health and Nutrition Policies and the Somali Health Sector Strategic Plan.

The six core EPHS programmes

- Maternal, reproductive health and neonatal health
- Child health
- Communicable Disease and Control and surveillance
- First aid and care of critically ill and injured
- Treatment of common illness
- HIV, Sexually Transmitted Infections and Tuberculosis

Read more on:
Measles in focus

Measles outbreak is spreading all over Somalia

An alarming rise in measles cases has been observed in recent months in Somalia. Outbreaks were confirmed in several regions, and the disease continues to spread across the country. In March and April, the number of cases has quadrupled, with over 1350 children affected, compared to about 330 in 2013. WHO epidemiology experts have warned that this trend will continue to worsen, unless emergency measures are urgently put in place.

Measles is a highly contagious viral disease that can lead to death. Even when it is not fatal, it can cause lifelong disabilities, such as blindness, deafness or brain damage. In Somalia, with high rates of malnutrition and poor health care system, a large outbreak of measles could be deadly for thousands of children. Due to the weak system to monitor diseases in the country, reliable data on deaths from measles are not available. However, WHO estimates that in complex emergencies like that of Somalia, 10% of the children affected by measles could die of complications.

In response to the outbreaks, UNICEF, WHO and partners immediately conducted small scale vaccination campaigns. Larger emergency measles campaigns will be conducted in the highly affected areas of Bari, Nugaal, Mudug, Banadir and Lower Juba in June. The campaign will target around half a million children under the age of 5 with measles vaccination and vitamin A.

In Somalia, the situation is becoming ever more alarming due to extremely low immunization coverage. The immunization rate for measles is estimated at less than 30%, which is outrageously below the 95% coverage considered necessary for the control and prevention of outbreaks. In some parts of central and southern Somalia, where insecurity prevented the vaccination of over half-million young children for the last five years, measles immunization coverage is as low as 15%. Increased population movement and overcrowding in IDP camps are other factors that greatly increase the risk of infection.

To mitigate the risk of a large outbreak, mass measles vaccination campaigns need to be urgently conducted in the entire country. WHO and UNICEF estimate that US$ 9 million are needed to vaccinate about 5 million children between nine months to 14 years and prevent thousands of avoidable deaths.
Somali health sector development

Strengthening the Ministry of Health of the Somali Federal Government

A high level meeting was held in Uganda in March to redefine the roles and functions of the Somali Federal Ministry of Health. The meeting was attended by the deputy Minister of Health, the Director General, ministerial technical advisors, an expert from Leeds University, as well as representatives from IOM, UNICEF and UNFPA.

The discussions touched on the sustainability and the decentralization of health management and services, as well as on the human resources needed to strengthen the capacity of the Somali Federal Ministry of Health.

Important outcomes of the meeting were the development of a new organogram and the definition of roles, functions and responsibility for the employees of the SFG Ministry of Health.

This consultative meeting is a first step to strengthen the capacity of the Somali health authorities, following the letter of understanding between IOM and WHO signed in February 2014. As part of this agreement, technical experts from the Somali diaspora will be recruited and placed within the Ministry of Health.

National strategic plan for HIV/AIDS endorsed

The HIV/AIDS National Strategic Plan for Somalia was endorsed by the Somali health authorities at a meeting in Kampala, Uganda, in April. The meeting was attended by officials from the Federal Ministry of Health and the Executive Directors of the National AIDS Commissions from the three zones. The HIV/AIDS National Strategic Plan 2015 – 2019 was developed with technical support from WHO.

New early warning system for disease surveillance adopted by 45 sentinel sites in Puntland

In April 2014, the electronic disease early warning and response system (eDEWS), already adopted by several sentinel sites in Puntland, was expanded to an additional 20 facilities. The health workers from these sentinel sites were trained to submit electronic data through the new system.

All the 45 sentinel sites in Puntland are now submitting weekly reports through eDEWS via mobile phone or internet. The eDEWS system contributes to improve disease surveillance capacity, thus allowing a prompter response to public health threats.

Community health workers curriculum finalized

A two day workshop was conducted in Mogadishu to review and finalize the curriculum for community health workers. Based on this curriculum, in June 40 community health workers will begin a training in management of common illnesses and prevention of diseases in the community.

After the training, the health workers will be deployed at health posts in poor and underserved communities and will provide basic health services to mothers and children. Increasing access to health service at the community level is the main objective of the community health workers initiative, which is in line with the Essential Package of Health Services (EPHS), launched in Somalia in May 2014 (read more on EPHS on page 1).
Over 300,000 health facility visits were reported from the 207 sentinel sites of the Communicable diseases Surveillance and Response (CSR) network in March and April 2014. More than 45% were children under the age of five. Increased number of cases of confirmed malaria, suspected measles and suspected cholera were reported across the country.

In early May, food security experts warned that Somalia’s fragile humanitarian situation is at risk of relapsing into an emergency. More than 200,000 children under five years are malnourished. Delayed rains, rising food prices and continued conflict could worsen the already high levels of malnutrition, increasing the vulnerability of the population to diseases and health complications.

**Malaria, measles and cholera trends**

In March and April, the CSR network reported over 3100 cases of confirmed malaria and 830 cases of suspected cholera. Suspected measles cases have alarmingly increased fourfold to over 1350 from about 330 cases reported in the same period in 2013 (read more on the measles outbreak on page 2). Measles and suspected cholera accounted respectively for 90% and almost 7% of the 276 disease alerts generated during this period.

**Risk of Dengue fever remains high**

Antibodies for Dengue fever were detected in 10 of 13 samples collected from malaria patients in Bossaso. While excluding recent infections, these results indicate sustained Dengue fever in Bossaso. The widespread presence of *Aedes aegypti* mosquitoes, the main vector for Dengue fever in Somalia, is a major risk for future outbreaks. WHO is urging partners to conduct vector control activities, jointly with the National Malaria Control programme. Surveillance activities continue and will increase in intensity following the seasonal trends.

**Civilians bear the brunt of ongoing conflict**

Violence and conflict continue to take a heavy toll on civilians in Somalia. Southern and central parts of the country bear the greatest brunt of the ongoing conflict and resulting interruption of health services. In March and April 2014, almost 900 weapon-related injuries were treated in six hospitals supported by WHO in Mogadishu, Kismayo and Baidoa.

Following the explosion of a Vehicle Borne Improvised Device (VBID) in Baidoa, 24 weapon-related casualties were transported to Baidoa Regional Hospital. Thirteen injured people including one child were attended to by medical staff deployed by WHO. Most patients suffered fractures, head and chest injuries, and five patients had to undergo surgical operations.

Another 11 people were already deceased when they reached the hospital, or succumbed to their injuries while undergoing treatment. It was observed that some victims were treated elsewhere, hence the total number of deaths are estimated to be higher, but cannot be confirmed.

**Emergency health interventions in “newly accessible” areas**

WHO is working with the Health Cluster partners to assess the most urgent needs, update the mapping of existing health services, and preposition equipment and medical supplies at health facilities in the affected areas.

**Medical team and polio vaccination in Xudur**

In March, WHO re-deployed a medical team to Xudur, where thousands of people reportedly returned, to provide life-saving services to the population on the move. The team includes one surgeon, two nurses, two midwives and an anaesthetic technician. Since mid-March, the hospital has reported 65 deliveries and one caesarean section. On 20 March WHO delivered emergency medical supplies to cover the health needs of 6000 people for one month.

At the beginning of May, the first polio vaccination campaign in four years has been conducted in Xudur district, targeting about 7000 children below 5 years. Three additional polio vaccination rounds will be conducted before the end of June, at 10 days intervals, to boost the population immunity against the virus. The second and third round will target all the children under the age of 10, while the fourth round will combine polio and measles vaccination for under-five children.

**Urgent funding for lifesaving health needs**

The Health Cluster estimates that up to 3 million people in southern and central Somalia will be affected by the ongoing conflict and other climatic emergencies in the next three months. Available medical supplies will hardly cover regular consultations and needs until mid-2014, and will not be sufficient for additional needs of people displaced by conflict or climatic emergencies.

Around US$ 6 million is urgently required to provide life-saving humanitarian health services, cover critical gaps in medical supplies and equipment, provide immunization services, support health facilities, and sustain the disease surveillance system.
Treatment center for resistant tuberculosis opened in Hargeisa

World TB Day celebrated in Somalia

The first specialized diagnosis and treatment center for Multidrug-resistant tuberculosis (MDR-TB) was officially opened at the Hargeisa Group Hospital on the occasion of World Tuberculosis Day on 24 March 2014.

Treatment for MDR-TB has been introduced in Hargeisa in September 2013, and there are currently 45 patients enrolled at the Hargeisa Group Hospital. The specialized centre is funded by the Global Fund through World Vision and receives technical support from WHO. The centre will treat patients affected by resistant tuberculosis (TB) from different regions of Somalia.

Tuberculosis is a serious public health problem in Somalia. In 2013, more than 13,000 new cases were detected, one every 40 minutes. Resistance to anti-TB drugs is considered an emerging concern in the country. Drug resistance arises due to improper use of anti-TB medicines, including administration of improper treatment regimens and when patients fail to complete the whole course of treatment. The levels of MDR-TB in Somalia are among the highest in the Eastern Mediterranean and African region. The National Drug Resistance survey conducted in 2011 found 5% of the newly diagnosed cases are affected by resistant tuberculosis. The prevalence reaches 41% among previously treated TB patients.

The TB programme was re-established in Somalia in 1995, with the overall aim to reduce significantly the burden of TB in Somalia. To date, 68 TB centres are operating across the country, and TB treatment success rate is maintained above the 85% recommended by WHO.

Read more on:
www.emro.who.int/som/somalia-news/multidrug-resistant-tuberculosis-somalia-treatment.html

Events

Somalia commemorates World Malaria Day 2014

Invest in the future. Defeat malaria

World Malaria Day was celebrated in Somalia in April 2014 to highlight the need for continued investment and sustained commitment for malaria prevention and control.

Under the theme “Invest in the future. Defeat malaria”, several sensitization activities were carried out by the National Malaria Control Programme with the support of WHO. In Mogadishu, 500 long-lasting insecticide treated nets were distributed to Banadir hospital and more than 250 people were tested for malaria at Hodan IDP camp. In Puntland, the office for the Malaria Control programme was officially opened on the occasion of World Malaria Day. The office is aimed to strengthen the capacity of the health authorities.

Malaria is still a major cause of disease in Somalia. WHO is supporting the malaria control and elimination programme through early detection and treatment of malaria cases, spraying of households with insecticides and use of insecticide-treated bed nets.
Promoting immunization for a healthy Somalia

World Immunization Week 2014

Somalia joined more than 180 countries around the world to celebrate World Immunization Week in April 2014. Conducted under the theme “Are you up-to-date?”, the week-long campaign aimed to raise public awareness on the importance of immunization. This year’s slogan “Immunize for a healthy future: Know, Check, Protect” encouraged everyone to know more about the available vaccines, to check if they have received all the recommended vaccines, and to be protected through vaccination.

The launch of World Immunization Week took place in Mogadishu, Garowe and Hargeisa, and was attended by government leaders and representatives from UNICEF, WHO and nongovernmental organizations. During World Immunization Week, the health authorities conducted vaccination and outreach campaigns to make parents aware of the importance of immunization. Discussions on the new policy for the Expanded Programme on Immunization were also held as part of the campaign.

In Somalia, the vulnerability of the Somali population to vaccine-preventable diseases remains very high due to the low immunization rate. In 2012, the immunization coverage for Diphtheria-tetanus-pertussis (DTP3), which is considered an indicator for routine immunization, was estimated at 42%.

The polio outbreak that affected Somalia in 2013 and paralyzed 194 children, is a harsh confirmation of the risks associated with low immunization rates. WHO, UNICEF and partners continue to support the Somali health authorities to increase immunization coverage. The polio transmission has drastically declined after several emergency vaccination campaigns.

However, the risk remains high due to continued limited access to around 500 000 children under the age of five. The polio campaigns conducted in March targeted 2 million young children throughout Somalia. Another 1 million children in south central Somalia and Puntland were targeted during the latest campaign in April. The emergency response will continue until the polio outbreak is completely stopped.

Read more on: www.emro.who.int/som/somalia-news/world-immunization-week-2014-vaccination-somalia.html

World Health Day 2014 celebrated in Mogadishu, Hargeisa, Garowe and Nairobi

Small bite - big threat

World Health Day was celebrated in Somalia on 7 April 2014, under the theme vector-borne diseases. World Health Day marks the day in which the World Health Organization (WHO) was founded in 1948 and each year it is an occasion to draw attention to issues of public health concerns.

This year’s campaign, with the slogan “Small bite: big threat”, aims at shedding light on the health threats posed by vectors, which are small organisms (such as mosquitoes, flies, ticks and bugs) that carry and spread diseases from person to person and place to place.

In Somalia, malaria, Dengue fever and visceral Leishmaniasis are among the main diseases transmitted by vectors. It was estimated that almost 620 000 people were affected by malaria in 2010. The risk of Dengue fever is also high in Somalia, where 60 cases were detected in 2013. An estimated 665 cases of Visceral Leishmaniasis were reported in Somalia in 2013.

Celebrations were held in Mogadishu, Hargeisa and Garowe, and were attended by high level officials from the government, UN and partners.

The Embassy of Italy, in collaboration with WHO and Mas children teaching hospital, organized an event in Nairobi to mark World Health Day. The function featured a photo exhibition by the Italian photographer Massimo Grimaldi, and the screening of a documentary by the Italian Television.

WHO Somalia office would like to acknowledge with thanks and appreciation the following partners and donors for their support to the Somalia programme.


For further information please contact:

Dr Ghulam Rabani Popal, WHO Representative for Somalia
wroffice@nbo.emro.who.int, phone +254-20-7266716/04
or
WHO Somalia Communications
communications@nbo.emro.who.int, phone + 254-20-7266702

WHO Somalia
Warwick Centre, UN Avenue, Gigiri
Phone +254-20-7266700
www.emro.who.int/somalia
https://twitter.com/WHOsom