

Situation update

The current drought situation has forced several people into displacement camps thereby losing their source of livelihood and shelter. From November 2016 to June 2017, more than 766,000 people were displaced due to drought related matters. Most of the IDPs are living in hash living condition plagued with food and water scarcity and consequent malnutrition. An estimated 388,000 cases of acute malnutrition including 87,000 severely malnourished children are in need of urgent and lifesaving health intervention. There are an estimated 3.2 million Somalis living in an emergency or crisis situation (IPC phases 3 and 4).

These extreme conditions in addition to already existing health indicators has triggered a dramatic increase in the number of people in need of critical life – saving health services.

Health Situation

The health needs of the people of Somalia continue to rise exponentially since the start of drought in 2015. Recent projections shows that the situation will continue to the end of 2017. (FSNAU, 2017). Thus, if rigorous measures are not taken, the impact health impact of the drought may spill over to 2018. The driving factors of the current health emergency is a complex mix of factors including; massive displacement due to the current drought, the destruction of health infrastructure due to the protracted civil war, volatile security situation in some parts of the country and the impact of the prior famines in 1992 and 2011.

Almost half of the 12.3 million population of Somalia, 5.5 million people, are in urgent need of emergency health services. Insecurity, displacement, poor health seeking practices, concentration of health facilities in urban areas, as well as the continuous spread of measles, AWD/Cholera and complications arising from severe malnutrition has complicated health crises in Somalia.

Acute Watery Diarrhoea/Cholera

There is a further decline in the number of AWD/cholera cases in September, as compared to August and the subsequent months. The number of cases in September as of 650 cases compared to the 917 suspected cholera cases and no deaths (CFR 0%) reported for the month of August.

The overall cumulative suspected cases of cholera in 2017 is 77,783 including 1,159 deaths with an overall case fatality rate (CFR) remain 1.49%.

The accomplishment is attributed the vigorous activities implemented by WHO and Health Cluster partners in collaboration with the Federal and Regional ministries of health as well as other cluster partners. These activities include; improved surveillance system, improvement in cases management, provision of safe water, sanitation and hygiene and oral cholera vaccination campaigns conducted in recent months.

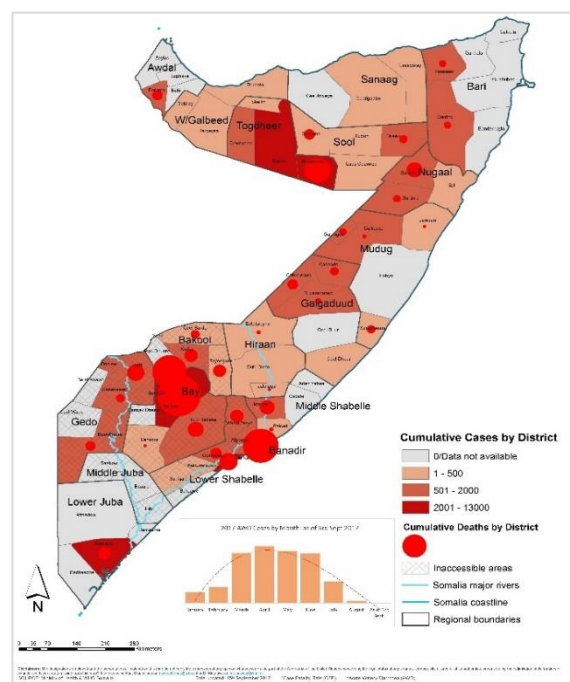


Figure 1: Epidemic curve of suspected cholera cases, deaths and proportion of deaths in Somalia, January – September, 2017

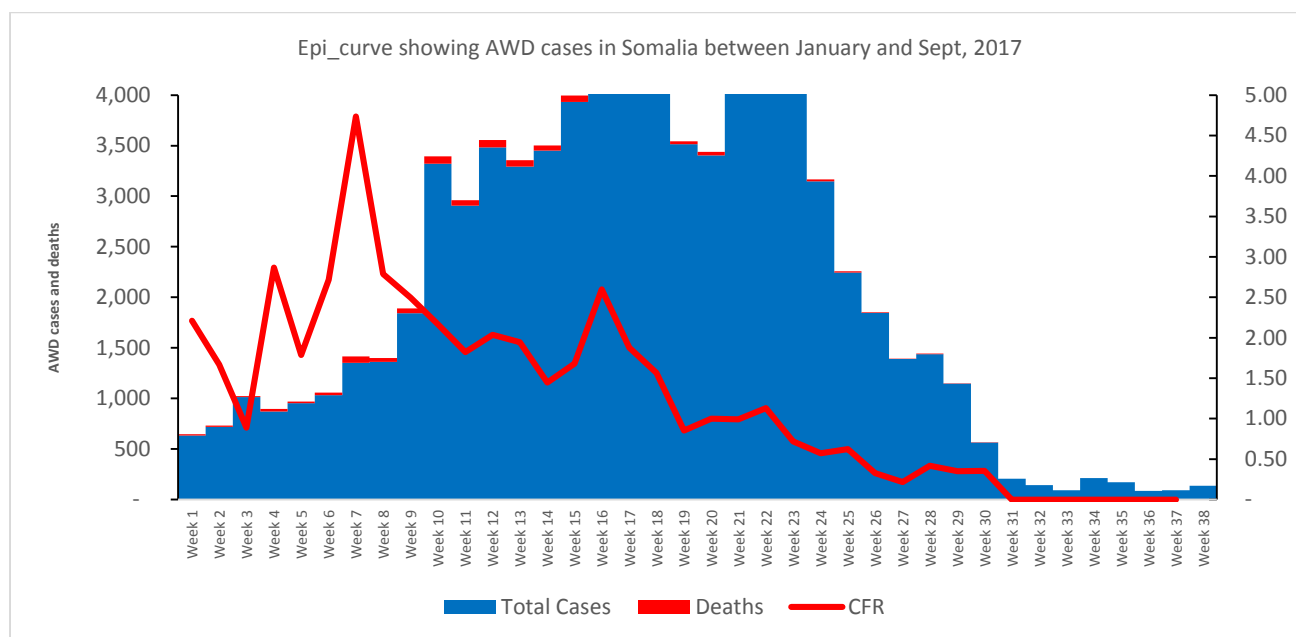


Table 1: suspected cholera cases, deaths and proportion of deaths in Somalia by state, January – August, 2017

Region	Week 37(11th - 17th Sep - 2017)			Week 38 (18th - 24th Sep - 2017)			Cumulative as of Epi-Week 1 to 38		
	Live	Deaths	CFR (%)	Live	Deaths	CFR (%)	Live	Deaths	CFR (%)
Bakol	0	0	0	0	0	0	3975	171	4.3
Banadir	20	0	0	36	0	0	6798	122	1.8
Bay	0	0	0	0	0	0	14941	214	1.4
Galgadud	0	0	0	0	0	0	4010	22	0.5
Gedo	0	0	0	0	0	0	5,603	53	0.9
Hiiran	0	0	0	0	0	0	374	3	0.8
lower Jubba	10	0	0	13	0	0	2952	15	0.5
Lower shabelle	0	0	0	0	0	0	5567	63	1.1
Middle Shabelle	0	0	0	0	0	0	2491	23	0.9
Bari	0	0	0	0	0	0	5700	104	1.8
Mudug	0	0	0	7	0	0	2722	17	0.6
Nugal	0	0	0	0	0	0	2739	27	1.0
Sanaag	0	0	0	0	0	0	1638	28	1.7
Sahil	0	0	0	0	0	0	3	1	33.3
Sool	0	0	0	0	0	0	3641	56	1.5
Awdal	23	0	0	44	0	0	1727	10	0.6
M.Jeex	0	0	0	0	0	0	729	5	0.7
Togdher	34	0	0	33	0	0	11905	225	1.9
Grand Total	87	0	0	133	0	0	77515	1159	1.5

Measles Outbreak

Measles continued to pose a major threat in Somalia. During the month of September, a total of 1459 suspected cases of measles have been accounted, this figure brings the cumulative total of suspected cases of measles to 18,000 in 2017. This number is about four times higher than the 5,657 cases of suspected measles reported in the whole of 2016.

More than 80% of all those affected by the current outbreak are children below the age of 10 years in all regions of the country.

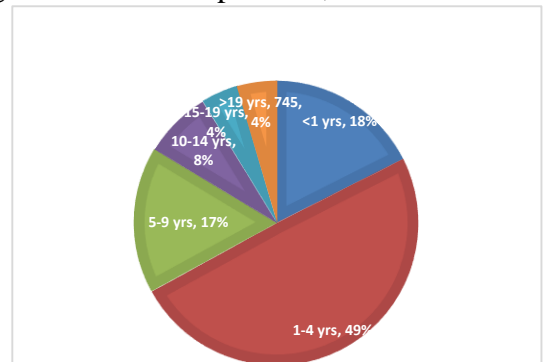
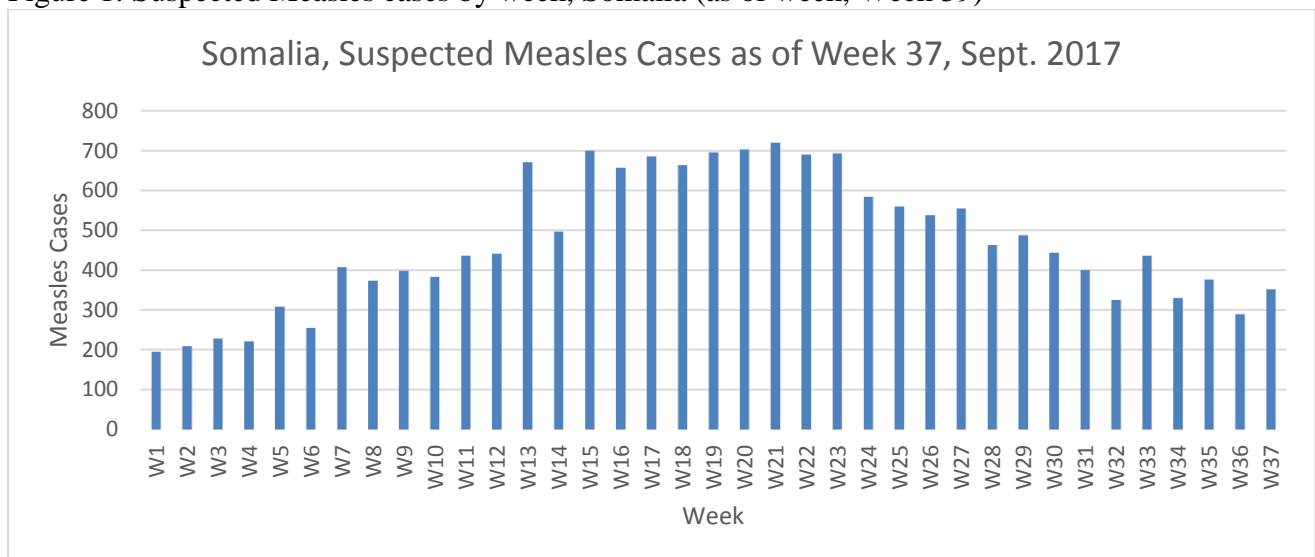
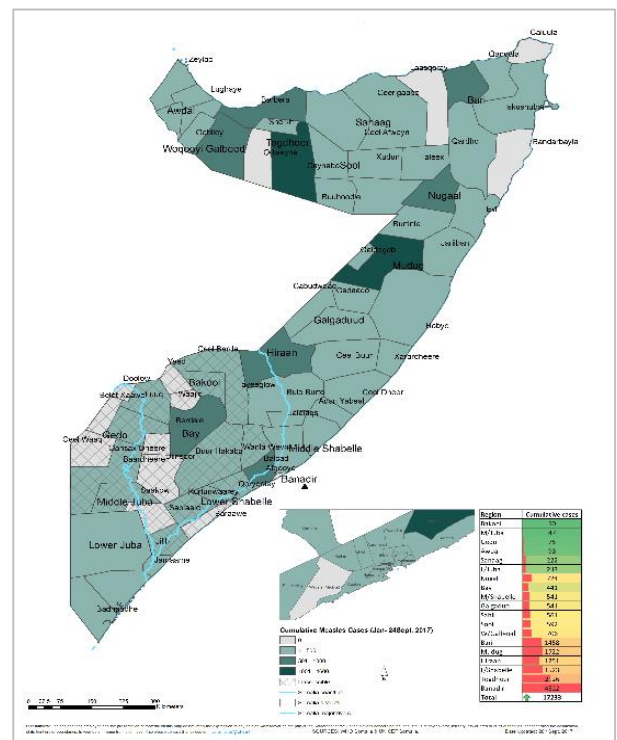
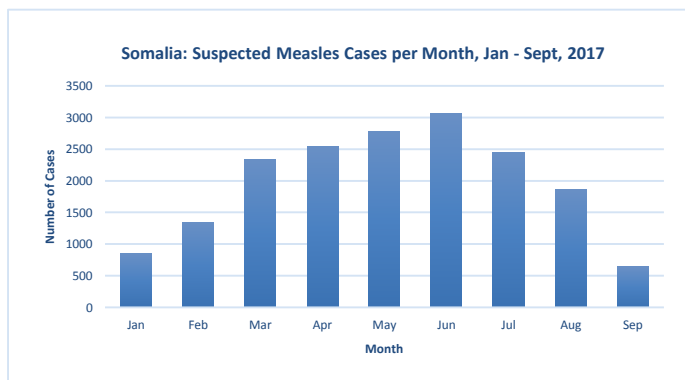


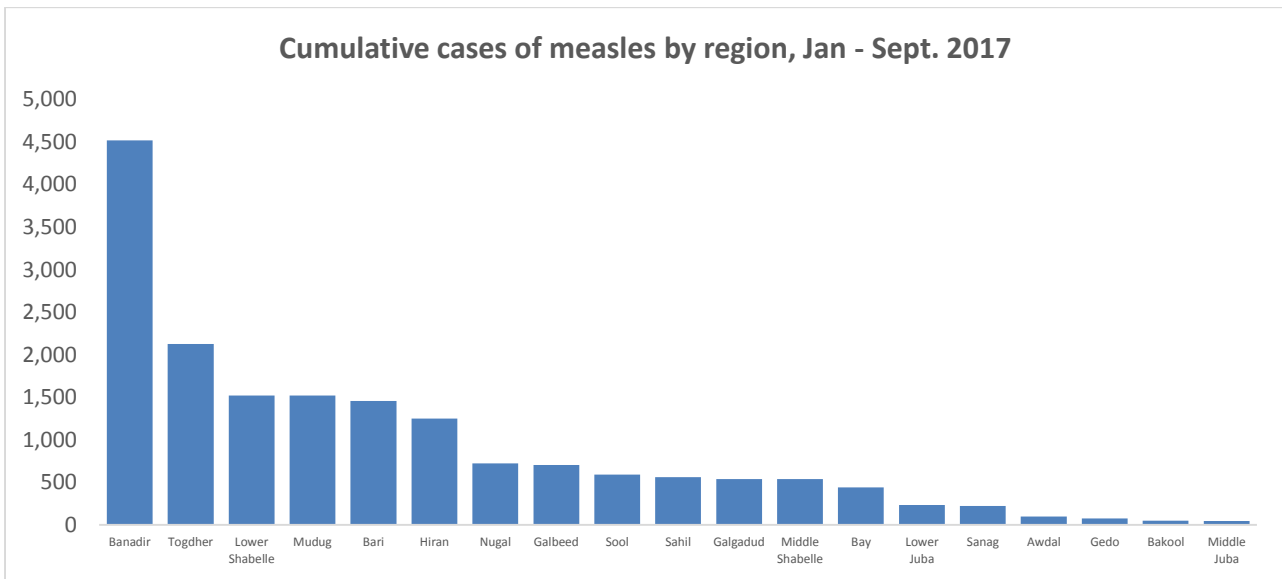
Figure 1: Suspected Measles cases by week, Somalia (as of week, Week 39)



The top five affected regions are Banadir (4,395), Togdheer (2,126), Lower Shabelle (1,523), Mudug (1,522) and Bari (1,458).

A laboratory confirmation was conducted for a total of 51 suspected measles cases in Somaliland and South Central zone from January to September 2017, out of these 40 of the cases were (78%) were confirmed measles cases.





The rising number of suspected measles cases is a combined effect of the drought and its associated displacement resulting in overcrowding in IDP camps as well as the overall low vaccination coverage prior to the current crises and low population immunity due to high prevalence of malnutrition.

WHO and HC partners are planning for a nationwide emergency mass measles campaign targeting children under 10 years in November to stop the spread on measles in the country. An estimated US\$14 million is required to support the nationwide measles campaign. Resource mobilization for the campaign is ongoing with part of the funding already committed from some sources.

Polio Eradication initiative

The polio eradication programme in Somalia has made tremendous strides in the past three years. August marked the third anniversary since the last wild polio virus was reported in Somalia.

Somalia Starting Environmental Surveillance (ES) to enhance wild poliovirus surveillance

In Sept. 2017, WHO, in collaboration with the Federal Ministry of Health has trained 23 people including MOH, Zonal, Regional and District polio officers and participants from Mogadishu city council sewage system on site selection, sample collection, storage and transportation collection of sewage water samples.

During the training, three sites were selected in Mogadishu in 03 districts (Waberi, Shangani and Hamarawieni) based on high risk population and area and population movement, surveillance indicators and vaccination coverage. The first samples were



collected on 19th September from Waberi district. The sample was sent to the KEMRI lab the same day in Kenya for virological analysis. Sample from other two sites also collected on 20 and 21 of September 2017 and sent to KEMRI on 21 Sept. 2017. The ES sample collection will continue every month from each of the selected 3 site. Additional ES will be selected Hargeisa and Garowe towns.

The aim of the environmental surveillance is to step up surveillance to detect any poliovirus circulating in the environment as part of the polio end game strategy. WHO, FMOH and partners celebrated 3 years of polio free status in August 2017. The last case of polio was recorded in 2014 in Hobyo district, Mudug region. The outbreak that erupted in the Horn of Africa 3 years ago paralyzed close to 200 children, with Somalia accounting for more than 90

Severe Acute Malnutrition

Malnutrition

The nutritional status of the people of Somalia continued to deteriorate. According to the latest survey conducted by FSNAU, an estimated 388,000 children under age five are acutely malnourished, including 87,000 who are severely malnourished and face an increased risk of complications and death.

WHO Response Activities

WHO continued its leadership role in the response to the emergency health situation in Somalia. In the month of September, WHO collaborated with over 66 health cluster partners and the Federal and State Ministries of Health to delivery primary healthcare services through support to more than 800 health facilities including cholera treatment units and nutrition centres across Somalia. In addition, health services also been delivered to-hard-to reach populations through Integrated Emergency Response Teams. During August, Health cluster partners delivered primary and/or basic secondary health care services.

3 – Level operational review

WHO held an emergency response meeting in Nairobi from 18 – 20th September, 2017. The meeting brought together all technical team leads working on the emergency response to review the status of implementation of the activities planned in the emergency repose plan covering the periods April – September 2017 and agreed priorities for the next six months (October 2017 – March 2018). The plans seeks to emphasize WHO continued its leadership role in the response to the emergency health situation in Somalia. At the end of the meeting, the team endorsed four main strategic objectives and corresponding outputs to guide the operation in the next six month. These include;

- Increase access to essential health and nutrition services



- Prevent and control disease outbreaks
- Strengthen disease surveillance, early warning and health information management and reporting
- Provide leadership, coordination and operations support

AWD/Cholera outbreak response activities

Surveillance and laboratory activities	<ul style="list-style-type: none"> • 265 health facilities were included in the EWARNs with plans to expand reporting sites to all districts • 256 stool samples were collected for AWD/Cholera of which 110 were positive for V. Cholera, Ogawa • 57 IERT have been deployed in most affected districts during the drought response
Coordination and Response	<ul style="list-style-type: none"> • OCV mop up conducted in Daynile and Wadajir districts of Banadir region • 50 h/w trained in AWD/Cholera case management in addition to 400 trained in all regions since the start of outbreak • Weekly coordination meetings between MoH and cluster partners
Water, Sanitation and Hygiene	<ul style="list-style-type: none"> • Hygienic Kits were distributed to IDPs in most affected districts with AWD/Cholera • C4D conducted social mobilisation in hard to reach areas in all the districts affected by AWD/Cholera
Supplies and logistics	Over 167 tonnes of AWD/Cholera supplies and emergency kits were distributed to affected regions since January 2017

Measles outbreak response

Since the beginning of the outbreak, WHO and partners have successfully vaccinated 472,033 children less than five years in 22 hotspot districts of 8 hotspots regions (Sahil, Togdheer, Sool, Sanag, Middle sheble, Banadir, Mudug and Bari) of measles outbreak in Somaliland and South Central. This has resulted in a slight decrease in the number of reported cases over the last two months.

In addition, WHO and Health Cluster partners have planned a nationwide measles vaccination campaign to be conducted in November 2017 to stop transmission of the disease, targeting 4.2 million children. WHO and health partners also launched an appeal to raise about US\$14million from the donor community to implement nation-wide measles vaccination campaign in November 2017 to prevent further spread of measles in the country. The campaign will also intensify efforts to strengthen routine immunization and reach unvaccinated children to boost their immunity.

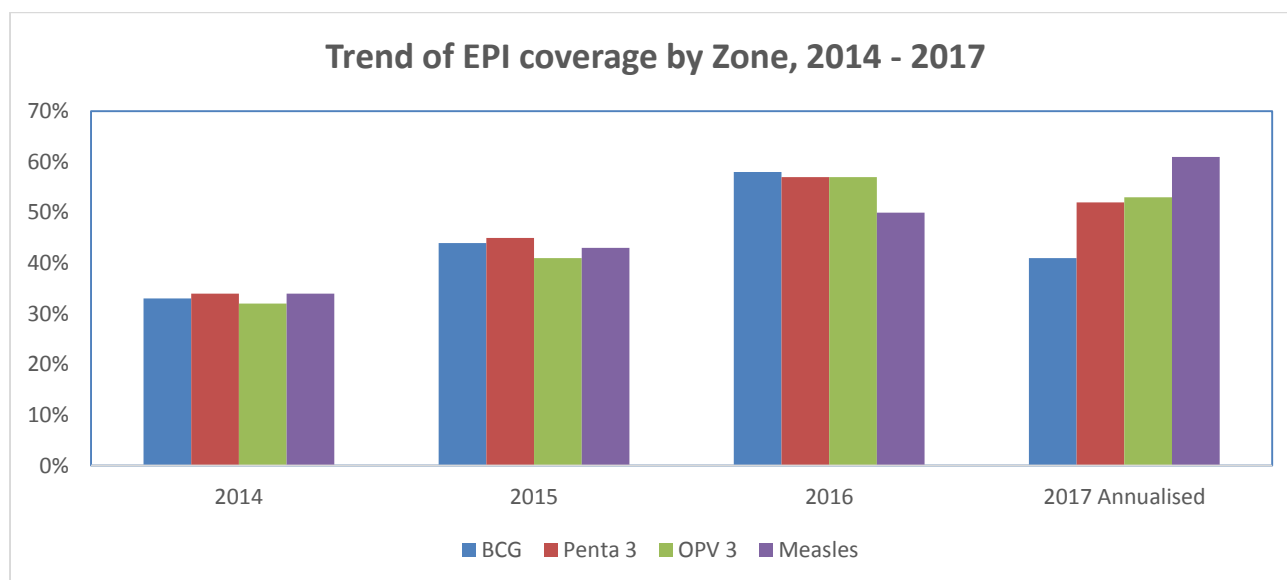
Health information management

WHO participated in the recent data quality review of the DHIS2 system held in Mogadishu. The aim of the meeting was to identify implementation Gaps and find appropriate solution to them. the main areas identified for improvement include;

- Modalities to support the regional HMIS Officers to improve reporting rate into the DHIS2.

- Integration of parallel reporting systems into the HMIS/DHIS2 and DHIS2 will be the only source of HMIS Data routine and surveillance.
- Nutrition and Surveillance data collection tools must be revised and integrated to the main HMIS/DHIS2 which has been rolled out and implemented at Country.

Routine Immunization



Supplementary immunization activities

Two rounds of polio NIDs were conducted in April and May respectively with bOPV to boost the immunity of children against the polio virus. Over 1.8million received at least 2 doses of OPV during the two rounds. Additionally, WHO and partners vaccinated over four hundred thousand children in August and September in a targeted hard-to-reach areas in South Central, Puntland and Somaliland in the month of August and September 2017 to boost the immunity against children against the polio virus. Cumulatively, over 5million dose of polio vaccines have been administered since the beginning of 2017.

Logistics and Supplies

Resource mobilization

FUNDING STATUS OF APPEALS US\$				
	NAME OF THE APPEAL	REQUIRED FUNDS	FUNDED	% FUNDED
WHO	Emergency Health Response Plan	US\$13.6	US\$9.6	71%
HEALTH SECTOR	Humanitarian Response Plan	US\$106.8	US\$24.7	23%

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