



## EMERGENCY PREPAREDNESS AND HUMANITARIAN ACTION NEWSLETTER JANUARY 2010

*The Emergency Preparedness and Humanitarian Action (EHA) Newsletter provides a summarized overview of the current humanitarian health situation in Somalia and activities that WHO is carrying out in response to the ongoing humanitarian crisis.*

*The newsletter is issued on a monthly basis and is available online at [www.emro.who.int/somalia/CollaborativeProgrammes-eha.htm](http://www.emro.who.int/somalia/CollaborativeProgrammes-eha.htm)*

### Health events & situation overview

#### Banadir Region

- According to OCHA<sup>1</sup>, throughout January, clashes were reported from Mogadishu with at least 48 people, including children, killed and over 65 wounded. The most affected districts were Yaaqshiid, Hodan, Wardhiigleey, and Hawl Wadaag. On 25 January, a hospital near Mogadishu airport which treats around 3,200 patients monthly, was attacked killing civilians and patients. As of end of January, UNHCR estimates that since the beginning of the year more than 18,000 people have fled the conflict in Mogadishu, of which 4,400 have stayed within the capital.
- In January, 333 cases of acute watery diarrhoea (AWD) and 4 related deaths (CFR<sup>2</sup> 1.20%) were reported from Banadir Hospital in Mogadishu. Children under the age of 5 years constituted 78% (259) of cases and all deaths.

#### Lower and Middle Jubba regions

- In Lower Jubba, the number of internally displaced persons began to mount in the third week of January in Kulbiyo village of Badhaadhe district after the Kenyan-Somali border was closed. According to WHO's partners, around 440 households were stranded between the two country's border for more than three days.

<sup>1</sup> See OCHA weekly humanitarian bulletins #1-4, 2010

<sup>2</sup> The case fatality rate (CFR) refers to the number of deaths per 100 cases. The globally-accepted standard CFR for AWD/ cholera is 2% for IDP settings and rural populations.



### WHO response and activities

#### Banadir Region

- WHO continues to monitor and report trends of AWD and other communicable diseases, focusing particularly on populations of humanitarian concern such as the conflict-affected people in Mogadishu. WHO has also prepositioned supplies in the area in the event of an outbreak.

#### Lower and Middle Jubba regions

- WHO is monitoring the health situation and the availability of health services provided by part-

- In epidemiological weeks 1-4 (4-31 January), 433 cases of AWD were reported from Afmadow (52), Hagar (61), Kismayo (129) and Badhaadhe (41) in Lower Jubba, and Bu'aale (46), Sakoow (51), and Salalge (53) in Middle Jubba. The number of reported cases remained stable compared to last month. The data was not available from Jamaame (Lower Jubba) and Jilib (Middle Jubba) in the reporting period due to security reasons. Children under 5 years accounted for 73% (314) of all consultations.

### Lower and Middle Shabelle regions

- Between epidemiological weeks 1-4 (4-31 January 2010), the Integrated Disease Surveillance and Response System (IDSR) in Lower Shabelle reported a total of 20,921 consultations. Acute respiratory infections (ARI) accounted for 20% (4,194), diarrhoeal diseases (DD) for 6% (1,355 cases of which 138 were AWD). Other common causes of morbidity were injuries (655); severe malnutrition (349); malaria (481 cases of which 185 confirmed by either laboratory or RDT); and suspected measles (29). Children under 5 years constituted 46% (9,735) of all consultations, 72% (99) of AWD cases, 56% (196) of severe malnutrition, 55% (16) of suspected measles, and 56% (2,341) of all ARI cases.

#### COUNTRY-WIDE SURVEILLANCE

- The WHO department for communicable disease surveillance and response (CSR) operates in Somalia through 204 selected sentinel sites (health facilities) which are reporting on a weekly basis. In 2009, the system reported a total of 121,964 health events and 309 deaths. Watery diarrhoea constituted for 60% (73,665) of all cases and 71% (219) of all deaths, malaria for 23% (27,803) of cases and 13% (41) of deaths, and bloody diarrhoea for 14% (16,818) of cases and 1 death. Also reported were suspected measles (2,477 cases and 9 related deaths), whooping cough (823 cases), meningitis (325 cases and 20 related deaths), and neonatal tetanus (53 cases and 19 deaths).

### Bay and Bakool regions

- Between 2-8 January, 8 suspected cases of measles were reported from Baidoa (Bay).
- 4 suspected cases of measles were reported between 9-15 January from Labatunjerow (Bay). No new cases were reported in the following week.

<sup>3</sup> OCHA weekly humanitarian bulletin #5

For WHO Somalia updated information, reports, and guidelines see [www.emro.who.int/somalia/CollaborativeProgrammes-eha.htm](http://www.emro.who.int/somalia/CollaborativeProgrammes-eha.htm). For more information about WHO's coordination role and health cluster documents see [www.emro.who.int/somalia/healthcluster.htm](http://www.emro.who.int/somalia/healthcluster.htm)

ners to the IDPs stranded at the Somali-Kenyan border and coordinating with health partners who are providing health assistance to those affected.

- WHO is working with health partners in Lower and Middle Jubba to strengthen preventive measures to reduce the transmission of AWD through health education and chlorination of drinking water.
- WHO visited all health centres in Bu'aale district in the second week of January to assess the prevailing health situation and health service needs, and for improved information sharing and coordination.

### Lower and Middle Shabelle regions

- WHO continues prepositioning emergency medical supplies, and the investigation and rapid response team is on standby.

#### CONFLICT AND DISPLACEMENT

- According to UNHCR<sup>3</sup>, violence sharply escalated in January resulting in the death of 258 people and another 253 wounded in central regions alone, making January the deadliest month since August 2009.
- The number of displaced people across Somalia has been revised. According to UNCHR, there are 1.4 million people (revised down from 1.55) displaced across the country with 366,000 temporarily residing in the Afgooye Corridor (revised down from 524,000) (UNCHR Somalia Briefing Sheet, February 2010).



Photo: WHO Somalia

### Bay and Bakool regions

- The WHO team on the ground is working with the health partners to investigate the rumours and follow up on the cases, and will coordinate with ongoing child health interventions such as Child Health Days, which include in their package of interventions, measles vaccination.

### Hiraan and Galgaduud regions

- Between 9-14 January, fighting in Belet Weyne (Hiraan) resulted in at least 30 deaths and more than 50 injured, according to OCHA<sup>4</sup>. Renewed fighting was again reported on 22 January leaving another 10 people killed and more than 21 other wounded, and offices belonging to UN and NGOs were looted. 5 other people were killed and 7 wounded in Elgal village near Belet Weyne town, on 25 January, and 8 people were beheaded outside town in the following 2 days. According to UNHCR at least 25,100 people have been displaced during this period.
- According to OCHA<sup>5</sup>, on 2 January, conflict broke out in Dhusamareb (Galgaduud). Within 2 days of fighting, an estimated 150 people were killed and 81 wounded. UNHCR estimates that 29,100 people (of the 40-60,000 who were initially estimated to have fled the conflict) remain displaced as of end January. Humanitarian assistance reaching the newly displaced is limited due to access constraints.

#### VACCINE-PREVENTABLE DISEASES

- The Child Health Days (CHDs) campaign that started in Mogadishu in November 2009 reached 288,639 children under five years old and 296,265 women of child-bearing age in all the 16 districts of the city. This is the first time the campaign was implemented in Mogadishu. In the first round the campaign in early 2009, Mogadishu, Lower Shabelle Region, and Kismayo district were not reached due to insecurity and lack of access. More than 1 million children under five years and 800,000 women of child-bearing age (84 percent of children and 55 percent of women) were reached in other parts of the country. During the second round, which began in August 2009, a total of 955,699 children and 770,200 women were reached in North West and North Eastern and parts of South Central regions. UNICEF, WHO and partners aim to reach 1.5 million children and 1.2 million women countrywide in each round.
- The WHO AFP surveillance and EPI sites have reported a total of 2,471 suspected cases of measles in 2009. This is an increase of over 120% compared to 1,081 suspected cases in 2008, and an increase of over 410% compared to 479 suspected cases in 2007.

### Puntland and Somaliland

- OCHA reported that parts of Somaliland and Puntland that did not receive sufficient rainfall

<sup>4</sup> OCHA weekly humanitarian bulletin #2

<sup>5</sup> OCHA weekly humanitarian bulletin #4

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### Hiraan and Galgaduud regions

- Continuing to liaise with health partners to respond to the recent conflicts in Hiraan and Galgaduud, WHO provided one trauma kit with sufficient supplies for 100 surgical procedures as an immediate response for the wounded. Also WHO is following up with partners in the region to provide assistance, including the transportation of supplies.

#### TRAINING AND CAPACITY-BUILDING

- In January, WHO and Merlin jointly trained over 55 health workers in disease surveillance and reporting in line with the Integrated Disease Surveillance and Response System (IDSR) in several locations in South Central Somalia. Between 24-26 January, 29 health workers from 8 NGOs operating in Bay and Bakool regions were trained in Wajid, and between 30 January and 1 February, 30 health workers of 12 NGOs operating in health facilities in Lower and Middle Jubba regions were trained in Bu'aale. The workshops covered case definitions and management of communicable diseases under surveillance, data collection, response and reporting. Weekly reporting and outbreak alert forms were distributed to ensure the monitoring of disease trends and timely detection of possible outbreaks. A third training will be held in Banadir in early February for health workers from Banadir and Middle Shabelle regions.



- The following agencies participated in the training: World Vision, GTZ, Somali Red Crescent Society, Intersos, DMO, BMO, Salama, COOPI, Muslim Aid UK, Mercy USA, African Rescue Committee, Somali Relief and Development, Somali Red Crescent Society, Relief and Health Organization, Swedish African Welfare Alliance.

### Puntland and Somaliland

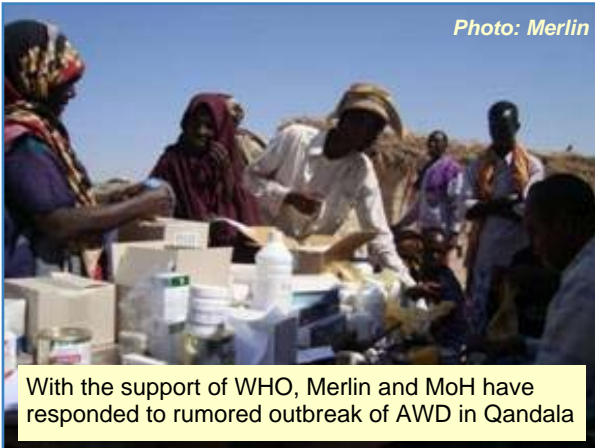
- The Ministry of Health and Labour of Somaliland together with WHO conducted a joint mission to Erigavo in Sanaag region in early January. During the 5-day visit, WHO handed

during the Deyr season (October-December) are experiencing water shortages both for humans and livestock. Reports from Somaliland say that abnormal population and livestock movements have been observed from north-western regions towards Sool region in search of pasture and water. Additionally, dry conditions are prevailing with extreme cold weather.

**MONTHLY SUMMARY OF SUPPLIES  
PRE-POSITIONED/ DISTRIBUTED BY WHO**

- WHO provided Merlin with one trauma kit in Ceel Buur in immediate support of emergency health care for people affected by the conflict in Dhusamareb in the first week of January
- The Regional Health Board of Somaliland received 1 emergency health kit from WHO in early January
- WHO has provided supplies to Baidoa Hospital (COOPI) and the MCH/OPD in Labatunjerow (SAMA) in Bay region

- On 23 January, rumours of 254 AWD cases and 7 related deaths (CFR 2.75%) between 15-23 January were reported from Qandala and Aluula districts in Bari region in Puntland.



With the support of WHO, Merlin and MoH have responded to rumored outbreak of AWD in Qandala

**NUTRITIONAL SITUATION**

- According to FSNAU's most recent assessment, 42% of the Somali population is experiencing an acute crisis in the food security and nutrition. Based on this assessment, FSNAU is estimating that there are currently 3.2 million people in need of humanitarian assistance across Somalia [1]. According to the same assessment, 1 in 6 children under five years is now malnourished as opposed to the post-Gu assessment rates of 1 in 5 in August 2009. However in south and central regions, 1 in 5 children remain acutely malnourished with 1 in 22 are severely malnourished.
- WHO, as health cluster lead, is working to strengthen coordination with nutrition cluster partners, particularly through forging greater linkages between health and nutrition programmes.

[1] <http://www.fsnau.org/fileadmin/uploads/1642.pdf>

over an emergency health kit to the regional health board, the minister allocated two newly graduate doctors from Boroma medical school to Erigavo Hospital.

- WHO is supporting Merlin together with MoH in operating the IDSR in Puntland with 45 reporting sentinel sites (7 hospitals and 38 MCHs) through 6 regional focal points. The information about 5 diseases under surveillance is gathered on a weekly basis. The number of diseases to be reported upon will be increased to 14. In the first 3 weeks of January, 597 cases of AWD of which 67% children under 5 years, 119 cases of bloody diarrhoea of which 48% children under 5 years, 29 suspected cases of measles of which 52% children under 5 years, 12 cases of malaria of which half were children under 5 years, and 2 cases of meningitis were reported.
- With support of WHO, Merlin and MoH initiated a joint investigation mission in response to the rumours from Bari region. Findings state that there is no ongoing AWD outbreak in Qandala and cases and deaths may have been over-reported. Health care services in Beli-Wacatay and Unuun are very limited due to lack of staff incentives and training. People in the area are experiencing severe water shortage as there has not been substantial rainfall in the area for 2 years. The major causes of morbidity in the region are reported as urinary tract infections, anaemia and malnutrition-related conditions.



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