

Somali Health Cluster Bulletin #25



WHO on-the-job training in Baidoa hospital Photo: WHO

July 2009

The Somali Health Cluster Bulletin aims to provide an overview of the health activities conducted by the health cluster partners active in Somalia.

The Health Cluster Bulletin is issued on a monthly basis; and available online at www.emro.who.int/somalia/healthcluster

Contributions are to be sent to cluster@nbo.emro.who.int

HIGHLIGHTS

- 123 health workers were trained for the implementation of EWARS in Puntland; and 10 health professionals received on-the-job training in Baidoa hospital
- Health agencies are urged to consider implementation of activities in Bakool region
- All international UN staff has been relocated from Baidoa and operations were suspended on 20 July

SITUATION OVERVIEW

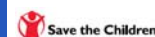
- Fighting in **Mogadishu** has displaced over 230,000 people as of end of July. Health cluster partners have reported that the IDPs fleeing from Northern parts of Mogadishu are starting to create another corridor, between Mogadishu and **Balcad**. Currently, an estimated 8,000 IDPs are recorded, increasing numbers are expected, and health interventions will need to be adapted to the increasing needs.
- Armed groups have entered UN Offices in **Baidoa** (Bay) and **Wajid** (Bakool) on 19 July and removed UN equipment. UNPOS, UNDSS and UNDP were asked to leave the locations; the other agencies can continue activities. However, UN operations in Baidoa were suspended on 20 July, and all international staff were relocated.
- In the first week of July, fighting was reported from **Afmadow** (Lower Jubba), but the tension decreased after successful mediation.
- In the first half of July, heavy rainfall caused restrictions of accessibility between riverine and coastal areas of **Lower** and **Middle Jubba**. The rain also brings along increased mosquito breeding which bears the higher risk of Malaria infections. Accessibility improved in the second half of the month when heavy rains ceased, so that humanitarian activities could continue as usual.
- IDP movement in border areas observed also throughout July, i.e. **Dhobley**, **Afmadow** (Lower Jubba) and **Kulbiyo** village in Badhaade district (Lower Jubba). **AFREC** and **SRCS** are addressing health needs; while **WHO** is addressing gap filling for medical supplies where necessary.
- SKY Humanitarian Organization and Forum for Capacity Building and Development (FCBD) conducted a joint mission on 3 July to assess the humanitarian impact of drought in 23 satellite settlements in **Bay region**. The findings concluded that the lack of water and livelihood assets is forcing many people to migrate to other areas.



Dried up water catchment (*waro*) South West of Baidoa (Bay region) Photo: SKY/ FCBD



ICRC



HEALTH RESPONSE TO THE HUMANITARIAN CRISIS

Communicable Diseases & Environmental Health

Surveillance of Diarrhoeal Diseases/ Cholera

- In epidemiological weeks 26-30 (27 June - 31 July), 736 cases of Acute Watery Diarrhoea (AWD) were reported from Jamaame (91), Afmadow (48), Hagar (54), Kismaayo (154), and Badhaadhe (70) in **Lower Jubba**, and Jilib (169), Bu'aale (45), Sakoow (42), and Salalge (63) in **Middle Jubba**. 82% (600) of all cases were children under 5.
- In epidemiological week 25, a total of 140 cases of AWD and one related death were reported from 3 villages (Adad-Geri; Nataakhuur; Yaaqle) in **Jamaame district** (Lower Jubba). After response and preventive interventions, including chlorination activities, health education, distribution of soap and awareness raising for environmental hygiene, were carried out by **Muslim Aid, WHO, Mercy Corps, Jubba Shine** and **Jubba Foundation**, the caseload had decreased to a total of 31 cases in week 27.
- A joint mission of **WHO** and **Muslim Aid** was conducted between 23 and 28 July to re-assess the progress in the implementation of measures for the prevention of diarrhoeal diseases in 8 villages (namely Nafthakuur; Honqorre; Turdho; Janaale-Jay; Maleyley; Baarka; Sanguine; and Shangalamafunga) in **Jamaame district** (Lower Jubba). Findings included significant improvement in environmental hygiene (pit latrines); household water purification; use of rehydration ORS; and referral mechanisms. WHO will further provide technical guidelines to health facilities for the management of other common diseases such as Malaria and ARI.
- In the second week of July, increasing numbers of AWD were reported from **Jirroole** in Afmadow district (Lower Jubba), with an estimated population of 80 families. High levels of acute malnutrition which were noticed already in a visit by WFP partner agency APD (Agency for Peace and Development) last month, are contributing to the severity of the impact on the affected people. In the case investigation mission by **AFREC** and **WHO** on 16 July, 50 cases of which 80% (40) children under the age of 5 years, and 1 related death were recorded. Humanitarian interventions in the location between 20-30 July included chlorination of shallow wells and at household level; induction of community volunteers for data collection and distribution of rehydration salts until permanent health workers will be trained; monitoring of nutritional status of children; health education for water borne diseases. AFREC has set up a temporary treatment center.
- In epidemiological weeks 26-29 (27 June - 24 July 2009), EWARS in **Lower Shabelle** reported a total of 17,464 consultations, including 15 deaths. Leading causes of morbidity were Acute Respiratory Infections (ARI) with 3,724 cases, and Diarrhoeal Diseases (DD) with 1,469 cases, including 2 related deaths. Other reported diseases included 465 cases of severe malnutrition, including 3 deaths; 339 cases of Schistosomiasis; and 295 cases of Malaria of which 52 were laboratory confirmed, including 1 death.
- Rumors on 16 July of AWD outbreak in **Mahaday district** (Middle Shabelle) could not be confirmed after active investigation of WHO and partners. However, local NGO SHARDO reported a total of 51 cases, of which 76% (39) children under the age of 5 years, and no deaths, between 25 July and 1 August 2009.
- According to reports from local NGOs **SHORDA** and **WOCCA**, IDPs and host communities in **Warsheikh district** (Middle Shabelle) are facing an outbreak of AWD. **Intersos** who are monitoring the situation, in coordination with **WHO** rumor verification, have confirmed 158 cases of AWD, including 33 deaths of which 67% (22) children under the age of 5 years (CFR 20.89%) since 5 July. Jowhar Regional Hospital has delivered 24 cartons of Ringer Lactate and more will be sent together with medical supplies such as antibiotics and a tent to set up a Cholera Treatment Center. No AWD cases were reported from the hospital as of end of July.
- In the first week of July, a total of 122 cases of Acute Bloody Diarrhoea and 3 related deaths (all of them elderly patients) were reported from 2 villages (namely Qalley and Buulo-Middey) in **Hagar district** (Lower Jubba). Case investigation revealed that most

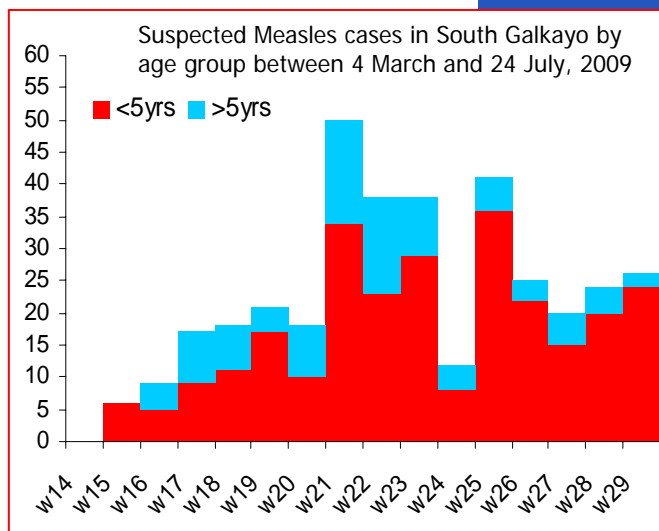
patients had attended a social gathering on 4 July. **SRCS** and **WHO** responded with case management and household level water chlorination. Another 75 cases and 1 related death were reported from several villages (namely Buulo-Abasguul; Qalley; Buulo-Dabadheer; Buulo-Mideey) in the same district between 18 and 21 July. **SRCS** and **WHO** initiated active case investigation. 29% of the cases were children under the age of 5 years. Response interventions included chlorination of local shallow wells; distribution of ORS to affected families; and the situation was brought control immediately.

Water & Sanitation

- Water chlorination and hygiene promotion activities in **Middle** and **Lower Jubba** are ongoing with **Jubba Shine** in Jamaame; **SRCS** in Afmadow, Badhaade, Jamaame, Hagar and Kismaayo; **Mercy USA** in Jilib district; and **Muslim Aid** in Kismaayo.

Vaccine Preventable Diseases (VPD)

- In epidemiological week 26, WHO AFP surveillance and EPI sites reported 45 suspected cases of Measles (increased from 34 in week 25); 64% (29) of all cases from Puntland, 71% in children under the age of 5 years. In week 27, the number of suspected cases increased to 54, with 46% (25) from Puntland and an upsurge in Middle Shabelle (13); 76% of all cases were children under 5 years. Between 20 June and 17 July, the number of suspected cases increased over two-fold. A total of 86 suspected cases were recorded in week 28, 63% (54) in children under 5. 66% (57) of the latest reported cases were from Puntland; and 18 were observed in a sudden upsurge in Sanaag region.
- Between 25 June - 10 July, 45 suspected cases of Measles were reported from **Galkayo South**; 49% (22) of the cases were children aged below 5 years. Overall, since epidemiological week 14, a total of 363 cases, of which 74% (260) children under 5 years, were reported (see graph).
- National Immunization Days (NIDs) were conducted in Jamaame district (Lower Jubba) between 12 and 15 July after 1-day refresher workshop for vaccinators. Since 13 July, also other regions and districts in **Lower and Middle Jubba** were covered, except for Kismaayo due to recurrent disputes.



Primary and Secondary Health Care

- On 3 July, Somali Young Doctors Association (**SOYDA**) visited Ex-Highschool Djibouti in Wadajir district of **Mogadishu** with estimated 370 IDP families. The purpose of the mission was health assessment; consultation and treatment services; data collection; and health education. Major findings included the lack of drinking water and sanitation facilities, combined with poor personal and environmental hygiene; and no access to functional primary health care facilities. In the free health campaign, 289 patients were seen. Major causes of morbidity were Acute Respiratory Infections (44) including Bronchitis, Pneumonia, and common cold; skin infections (36) including Eczema, Scabies, bacterial and fungal infections; intestinal parasites (34); malnutrition (24); Urinary Tract Infections (23); and Anemia (19).
- Action Contre la Faim (**ACF**) manage one OPD/MCH, two EPI centers and different nutritional programmes in **Mogadishu**. In June, the OPD received 1,282 patients; 49% (622) were children under 5 years. 32% (414) of all patients were IDPs. Major causes of morbidity were Lower Respiratory Tract Infections (321); Upper Respiratory Tract Infections (251); intestinal parasites (251); and Urinary Tract Infections (137). 665 patients consulted the MCH, 66% (440) of them were IDPs. The most common ailment was Anemia (341). A total of 193 laboratory tests were done. The two vaccination centers attended 562 children under 5 years, and 477 women of child-bearing age.

- The Somali Schistosomiasis Control Initiative (**SCI-SOM**) carry out urinary Schistosomiasis and de-worming activities in primary schools of **Lower** and **Middle Shabelle**. In June, a total of 1,082 patients, of whom 53% (572) children under the age of 15 years, were treated for Schistosomiasis, and 300 children were covered with de-worming mass treatment. In July, 967 patients, 44% (410) under the age of 15 years, received Schistosomiasis treatment.
- **AFREC** continues to assist IDP families with basic services in **Dhobley**, **Afmadow** and **Kismaayo** (Lower Jubba).



SCI mass treatment for Schistosomiasis in Lower and Middle Shabelle Photo: SCI

Rehabilitation & support to health facilities

- Reconstruction of **Wajid Hospital** (Bakool) by **UNOPS**, with support of **WHO**, has been completed. Health partners interested in managing the facility are invited to contact WHO.
- After completion of phase 1 of **Baidoa hospital** rehabilitation, the WHO surgeon visited the facility between 14 and 16 July. Findings included that no running water was available. UNICEF will address the gap. WHO will support the hospital with emergency health kits; and training of the medical workforce is planned when the security situation allows.
- **WHO** has provided medical supplies including 2,500 liters of Ringer Lactate; 1,000 sachets of ORS; and more than 100 IV giving sets to **Kismaayo General Hospital** (Lower Jubba) this month.
- After the hospital in Hudur and several health facilities in **Bakool region** had to be closed, partners are urged to consider activities in the region.



Vice Minister MoH, Mumin Abdi Duale addresses Nugaal, Cayn and Sool participants during opening of EWARS training Photo: WHO

Training Activities & Health Education

- **WHO** conducted four training sessions on implementation of the Early Warning and Response System (EWARS) between 7 and 20 July, covering the 7 regions of **Puntland** with participation of 123 health workers from 113 different facilities. The training addressed the use of standardized case definitions; utilization of standardized data collection tools and systematic delivery of collected data from health facilities to the regional levels. The system, already functioning in Lower Shabelle, will be rolled out under coordination of Merlin and MoH, and will provide necessary data to timely detect communicable disease outbreaks and enable immediate response action; monitor morbidity and mortality trends of communicable diseases for appropriate preparedness and action; and monitor workload of health facilities to optimize allocation of resources.
- Between 14-16 July, the **WHO** trauma surgeon conducted on-the-job training for two medical doctors and 8 nurses in **Baidoa hospital** (Bay). The health professionals were instructed in emergency surgical operations and patient management.
- **Muslim Aid** conducted Malaria trainings for nurses, community health workers and traditional birth attendants in **Jamaame** district (Lower Jubba). The sessions covered transmission cycle for and prevention of Malaria; rapid diagnostic Malaria testing; new Malaria treatments and dosage; use of LLITNs; and importance of IPT for pregnant women.
- **Mercy USA**, **SRCS**, and the local NGO **AFREC** are conducting community-based awareness raising activities for Malaria prevention, including the enhancement of traditional measures, in **Afmadow** and **Jilib** (Lower Jubba).
- After increasing numbers of conjunctivitis in **Hagar** town and surrounding villages (Lower Jubba) in the last week of July, awareness raising activities for the prevention of transmission have been initiated, and WHO is to distribute tetracycline eye ointment.