

Somalia Health Cluster Bulletin



The construction of the new Outpatient Department at Bay Regional Hospital in Baidoa has been completed. The OPD will be run by IMC. Renovation of the Operating Theatre and X-ray room will start in August. Rehabilitation of Bay hospital is implemented by UNOPS with support from WHO.

27 July 2007

The Somalia Health Cluster Bulletin aims to provide an overview of the health activities conducted by the health cluster partners active in Central and South Somalia. It compiles health information received from the different organizations working in Somalia, but does not include Somaliland and Puntland.

The Health Cluster Bulletin is issued every two weeks.

Highlights

- Deteriorating security in Mogadishu causes displacement of 21,000 people since beginning of June.
- Acute Watery Diarrhoea (AWD) outbreak ended in Central South Somalia. WHO is emphasizing the importance of continuation of chlorination activities to avoid reoccurrence of AWD cases.
- Health cluster meetings planned for August in Baidoa and Wajid.
- Several rehabilitation projects were finalized: the Outpatient Department (OPD) in Bay regional hospital in Baidoa, 52 flood-affected health posts in Gedo and 9 flood-affected Mother and Child Health Care Centres (MCH) in Lower Shabelle region.

Country statistics¹

Latest IDP figure: **400,000**
 Number of refugees: **464,253**
 (UNHCR, June 2007)
 Total population: **8,22 million**

Situation Overview

- Fighting is continuing in the streets of Mogadishu. Security situation deteriorated in Mogadishu as the *National Reconciliation Conference* started on 15 July. Reportedly, 25 people were killed since then. Fighting in other areas of Somalia, such as Berhani village, west of Kismayo claimed another 20 lives. Another 21 deaths of whom 6 children were reported from Banadir and Galgadud.
- The UNHCR Population Movement Tracking (PMT) indicates over 21,000 people fleeing Mogadishu since the beginning of June, while another 20,000 returned to Mogadishu.
- The Kenya/Somalia border was reopened for transport of humanitarian aid in the first week of July. Although the border has been officially closed since January 2007, humanitarian transport was allowed until one month ago. Furthermore, damaged roads and bridges and the large number of roadblocks are causing increasing delays.
- UN air services to Afmadow and Wajid were resumed on 15 July. Almost all regions in Central South Somalia are now accessible by air with the exception of some airstrips.

¹ Source: 22 June 2007, Internal displacement monitoring centre <http://www.internal-displacement.org/>



Health Response to the Humanitarian Crisis

MOUs

WHO currently has Memoranda of Understanding with **CISP**, **COSV**, **Intersos**, **GHC**, **Caritas**, **World Vision**, and **UNOPS**

1. Assessment and monitoring

- A comprehensive Regional Health Profile assessment is being conducted in Central South Somalia. A team of three international **WHO** consultants visited Beletweyne and Jowhar to continue to Somaliland and Puntland. The assessment is a cluster initiative and aims to get a complete picture of all health related activities and problems in Somalia.
- After conducting several assessment missions, Médecins du Monde (**MDM**) is planning to establish a health centre in Merca town within the coming months, to increase access to primary health care for vulnerable (mainly young women and mothers) and displaced populations.
- The UN Office for Project Services (**UNOPS**) completed the assessment for the rehabilitation of Forlanini and Benadir hospitals in Mogadishu, supported by **WHO**.

2. Health coordination

- Health cluster meetings are to take place in Baidoa and Wajid soon, after the arrival of two international **WHO** consultants. WHO will be supporting the Ministry of Health of Central South Somalia with the reconstruction of its premises in Mogadishu.

3. Communicable diseases and Environmental health

- **WHO** disseminated a draft proposal for the implementation of the Early Warning and Response System (**EWARS**) prepared by the senior medical epidemiologist. EWARS aims for early detection and response to public health threats such as Acute Watery Diarrhoea (AWD), Bloody diarrhoea, Acute Respiratory Infection (ARI), measles, meningitis, Acute Jaundice Syndrome (AJS), Neonatal tetanus, malaria, severe malnutrition, and injuries. **EWARS** collects data on diseases reported from all hospitals, health units, and mobile units, including NGOs providing health care in Somalia. Data are entered in a computerized system based on EPIINFO 604 and EPIDATA 3.1 software, developed specifically for the Somalia situation.
- Between 19-25 May 2007, 15 suspected **malaria** cases were reported from Eldere district hospital in Galgadud region. Eldere district is historically known to have a low prevalence of malaria. Although laboratory tests done at the hospital confirmed presence of malaria *P. falciparum*, 16 positive samples were sent to the AMREF public health laboratory in Nairobi as a quality control procedure. None of the samples tested positive for malaria. To increase the reliability of laboratory tests done in the field, WHO recommends rapid onsite laboratory refresher training on malaria parasites microscopy.

Acute Watery Diarrhoea (AWD)

- Central South Somalia observed a drastic reduction in the number of AWD cases: 415 cases with no related death were reported from Banadir, Middle and Lower Juba during July. No more cases of AWD were reported from other regions. In comparison to June, AWD cases decreased by 59% (415 and 1597 respectively).
- As a follow up of the AWD response, **WHO** will be supporting different health centres, such as Elbon health centre (near Wajid in Bakool region) run by the NGO Gedo Health Consortium (**GHC**), with essentials drugs.
- **MDM's** cholera kit (5000 litres of Ringer Lactate, infusion sets and other medical supplies) donated to the Coordinating Committee of the Organization for Voluntary Service (**COSV**) in Merca hospital was used to treat 748 AWD cases during 4 weeks.

AWD outbreak

37 716 Acute Watery Diarrhoea cases including **1133 deaths** were reported from Central South Somalia up to 29 June 2007

- The International Committee for the Development of Peoples (**CISP**) conducted training for 10 health workers on response to the AWD outbreak in Eldere, Galad and Harardere districts. CISP distributed large amounts of Oral Rehydration Salts (ORS) to the communities and ensured routine chlorination of the wells.
- Action Contre la Faim (**ACF**) treated 457 AWD patients successfully in their Cholera Treatment Centre in Al Hijra, South Mogadishu between 9 April and 4 June 2007; 115 patients were referred from the five Oral Rehydration Treatment (ORT) corners run by the Somali Red Crescent Society (**SRCS**) and the International Committee of the Red Cross (**ICRC**) in Mogadishu. No deaths were reported. Patients stayed on average 2 days in the CTC. **Following WHO recommendations, consumption of IV fluids was drastically reduced from 4.6 litres per patient in 2002 to 1.4 litre this year.** ACF has been running the CTC in South Mogadishu during different outbreak since 1999, but is now considering a change to a safer and more accessible location during times of conflict within the city. The CTC was funded by the European Commission Humanitarian Office (**ECHO**).
- During the AWD outbreak, **ICRC** provided safe drinking water to 60,000 people on a daily basis in Middle and Lower Shabelle and southern Galgadud, mainly IDPs. A total of 10 million litre of water was delivered since 1 April 2007. ICRC is currently renovating 35 hand-dug wells and drilling 8 boreholes, benefiting an estimated 180,000 people. **ICRC** treated 1000 AWD patients in Mogadishu since 15 April and distributed 20,000 ORS sachets.

Water and sanitation

- **ACF** will temporarily discontinue the chlorination of 326 wells in Mogadishu and wells in Wajid until resumption of routine chlorination next October. In its outreach programme, ACF health educators reached over 3400 people with sanitation and hygiene messages. **ACF** started construction of 150 latrines in Wajid district. Already 20 have been completed.
- In Dinsor district (Bay), the Adventist Development and Relief Agency (**ADRA**) completed construction and rehabilitation of 22 water catchments, 20 shallow wells, 272 household latrines, and 52 garbage pits in 8 villages. ADRA also trained 32 community hygiene promoters and 30 water point management committees. Three more waters catchments were completed in Gedo by the NGO **SARDO** with support from UNICEF and an additional 10 in Burhakaba town by **Green Hope**. A large-scale rehabilitation and construction plan of 10 water supply schemes, 4 boreholes, and 34 shallow wells, targeting an estimated 40,000 people will be implemented by Cooperazione Internazionale (**COOPI**) with financial support from the European Commission (**EC**) in Gedo and Lower Juba regions.
- **Muslim Aid-UK** treated 3000 shallow wells and distributed 200 toilet slaps in Kismayo.

Kala Azar (Leishmania)

- **Merlin** coordinates the different Kala Azar (Leishmania) prevention and control programmes between MSF, GHC, IMC, ACF and World Vision in Central South Somalia. Kala Azar is transmitted by sand fly bites. A total of 384 cases have been reported since January 2007, the majority of whom are boys under 5 years of age. The majority of cases are reported from Huddur and Dinsor. **Merlin** focuses on improving laboratory testing for Leishmania, as the commonly used DAT analysis (Direct Agglutination Test) requires samples to be sent to Nairobi, which takes on average 7 days. The newly introduced rapid diagnostic test *Optileish* that is currently being used by **MSF Belgium** in Huddur is more convenient; in 4 months, 230 cases have been diagnosed using *Optileish* while DAT diagnosed 154 cases. Training of health staff in the use of *Optileish* is difficult due to insecurity.
- In June, 77 samples were sent from **MSF Belgium**, **MSF Suisse** and **GHC** to AMREF public health laboratory in Nairobi; 64% (49) were tested positive.

4. Primary and Secondary Health Care

Treatment of war-injured

- **ICRC** and **SRCS** are nearly the only humanitarian organizations operational in the war-affected areas of Somalia. **ICRC** surgical teams performed 92 operations in Mogadishu and Baidoa and provided 30 tonnes of medical supplies, including surgical kits to treat 500 war-wounded patients to 23 **SRCS** clinics and Medina and Keysaney hospitals in Mogadishu. The hospitals are treating dozens of people injured by shrapnel and bullets on a daily basis. ICRC recruited additional health staff for the hospitals, which increased their capacity from 65 to 200 beds by setting up tents. **ICRC** surgical team ran a two-day seminar in Mogadishu on war surgery techniques, attended by 17 surgeons from private and public health facilities in Galkayo, Baidoa, Merka and Mogadishu.
- WHO supplied drugs and dressing materials for victims of ongoing fighting in Berhani.

Treatment of war-injured

Since 1 January 2007, Medina and Keysaney hospitals in Mogadishu treated **2080 wounded persons**. Other medical facilities supported by **ICRC** in central and southern Somalia, including Mogadishu, treated **3200 wounded persons**.

Primary health care and reproductive health

- **Muslim Aid-UK** conducted 4-day refresher auxiliary training to 34 health workers from Banadir, Hiiran, Middle and Lower Shabelle regions to strengthen reproductive health with support from **UNFPA** and **SOS Kinderdorf International**.
- Two outreach programmes run by **CISP** with support from **WHO** reached a total estimated population of 70,000 people, including IDPs in Eldere (Galgadud region), and Harardere (Mudug region). The outreach teams consist of one clinician, one nurse, and two community volunteers, providing curative and preventive services. **UNFPA** distributed 21 reproductive health kits to **CISP**. **UNFPA** distributed 50 clean delivery kits to pregnant women through two mobile teams in Mogadishu and Afgoye.
- Another three mobile clinics in Kurtunwarey, Merka and Qoryoley (Lower Shabelle region) run by **COSV** with support from **WHO** focus on the prevention of outbreak prone diseases for a total population of 135,000 people.

Rehabilitation and support of health facilities

- The construction of the Outpatient Department (OPD) in Bay Regional hospital in Baidoa has been finalized. The OPD will be run by the International Medical Corps (**IMC**). Renovation of the Operating Theatre and the X-ray room will start in August. Rehabilitation works are coordinated by **UNOPS** with support from **WHO**.
- **World Concern** donated mother and child equipment to Kismayo hospital, such as an incubator, ultra-sound machine, delivery tables and a suction machine.
- A total of 52 health posts damaged or destroyed by the flooding earlier this year in Luuq, Dollow, Belet Xaawo, Burdhubo, and Garbahaarey districts (Gedo region) are currently reconstructed or rehabilitated by **GHC** with support from **WHO**. **GHC** provided construction materials for 23 health posts and WHO for 29 health posts. The community is providing all materials for the walls, sand, and gravel, digging of the latrines and other labour. **GHC** is supervising the rehabilitation projects in collaboration with the District Health Boards and the Village Health Committees, who will sign an MOU guaranteeing to complete the work.
- **COSV** rehabilitated 9 flood-affected Mother and Child Health Care Centres (MCH) in Kurtunwarey, Qoryoley, Awdhegle, and Sablaale (Lower Shabelle region), reaching a total of 405,000 people. Rehabilitation varies from small reparations to complete reconstruction. Part of the rehabilitation project, supported by **WHO**, was the rehabilitation of the waste drainage at Merca hospital, also damaged by recent rains.
- WHO will be upgrading 2 referent public health laboratories and 6 regional laboratories in Central South Somalia. Besides the Forlanini hospital in Mogadishu, Merka, Jowhar, Luuq, South Galkayo, Burao Hospital and Huddur hospitals will all be able to provide laboratory tests otherwise only feasible in Nairobi within six months.

HIV/AIDS

- **UNAIDS** trained more than 1400 Somalis in Central South on integrated prevention, treatment, care and support services for HIV/AIDS. This is the number required to ensure skilled delivery of HIV intervention services.

Trainees were selected from hospitals, MCH centres, and private health facilities, in collaboration with Ministry of Health and AIDS commission secretariats.

GFATM, DFID, and UN funded the training.

- Training on the use of Anti-retroviral Treatment (ART) against HIV/AIDS has been conducted in Baidoa for health workers of different agencies. **UNICEF** donated HIV/AIDS drugs and test kits to **IMC** in Beletweyne.

	CSZ	Puntland	Somaliland	All
HIV prevalence ¹	0.6%	1%	1.4%	0.9%
Number of people with advanced HIV infection receiving combination ART ²	1	2	102	111
Number of health facilities capable to deliver appropriate VCT service ²	3	2	2	7
Number of health facilities capable to deliver ART to people living with HIV ²	1	1	1	3
Somalis trained on integrated prevention, treatment, care, support ²	30%	41%	29%	4850

¹ 2004 HIV sentinel surveillance survey report

² Global Fund Update, December 2006

Relevant links

- Somalia Support Secretariat <http://www.somalisupportsecretariat.info>
- Population Movement Tracking (PMT) <http://www.internal-displacement.org>
- Health Millennium Development Goals <http://www.who.int/mdg/en/>
- Millennium Development Goals Report 2007 <http://www.un.org/millenniumgoals/pdf/mdg2007.pdf>
- Millennium Development Goals Indicators <http://millenniumindicators.un.org>

Please send all your contributions to cluster@nbo.emro.who.int