

Somalia Health Cluster Bulletin # 3

5 September 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.



World Vision Mother and Child Health Care centre (MCH) in Baidoa, Bay region

Highlights

- Nearly 18,000 people have fled Mogadishu in August due to violence, bringing the total to over 50,000 since June.¹
- Ongoing fighting in Bakara market in Mogadishu is impeding access to hospitals and overwhelming other hospitals with large number of injured.
- Food Security Analysis Unit for Somalia warns for rapid deteriorating of already alarming nutrition situation in Shabelle regions: Global Acute Malnutrition rates are 17% and Severe Acute Malnutrition 4.8%.²

Post Gu 07 assessment

1.5 million in need of humanitarian assistance; 50% of 725,000 IDPs (Internally Displaced People) in Lower and Middle Shabelle regions: 400,000 IDPs + 325,000 newly displaced from Moqadishu

Situation Overview

- The National Reconciliation Conference (NRC) has ended in Mogadishu on 30 August, with approximately 2000 participants representing different clans discussing the country's future during 45 days. Although recommendations from the conference include democratic elections before 2009 and an appeal to all clans for a cease-fire and disarmament, the number of violent attacks has increased significantly in August when compared with previous months.
- In Middle Shabelle's Jilib district tension remains high, while in Buurgaabo (Badade district), 350 km from Kismayo, fighting has been ongoing for two weeks, with a death toll of 15.
- Consolidated Appeal Process (CAP) workshop Somalia 2008 was held on 3-4 September concluding health and nutrition indicators need drastic improvement in Somalia. Common commitment from all participating humanitarian agencies is to adapt strategies towards more effective action.

¹ UNHCR Population Tracking Movement (PMT)

² Food Security Analysis Unit (FAO/FSAU) and FEWS NET: Special Brief Post Gu 2007 analysis <http://www.fsasomali.org/fileadmin/uploads/1154.pdf>

Health Response to the Humanitarian Crisis

1. Assessment and monitoring

- Rapid assessments using MUAC measurements (Mid-upper-arm circumference) carried out last week in Middle Shabelle by nutrition analysts from the Food Security Analysis Unit (**FSAU**) confirm the alarming nutrition status among IDPs and host communities: 24% of the total 1887 children assessed are moderately malnourished and 7% are severely malnourished. The assessment was done as a follow up to the Post Gu 2007 nutrition assessment conducted in May 2007 by **FSAU**, which indicated critical rates of Global Acute Malnutrition at 17% and Severe Acute Malnutrition at 4.8% in Lower and Middle Shabelle.

2. Health coordination

- Health cluster coordination meetings were held in Mogadishu and Beletweyne (Hiiran) for the first time on 3 and 4 September. The second health cluster meeting was held in Baidoa on 2 September.
- Somalia Red Crescent Society (**SRCS**) with support from the International Federation of the Red Cross (**IFRC**) and the International Committee of the Red Cross (**ICRC**) conducted a one-week training workshop on Public Health Emergencies in Borama, Somaliland. A total of 31 disaster managers and health officers from 16 branches of the **SRCS** all over Somalia were trained on health aspects of emergency preparedness and response.



Part of the SRCS Public Health in Emergencies training course in Borama (Somaliland) was a field trip to Boon, a community affected by torrential rains and hard winds.

3. Communicable diseases and Environmental health

Acute Watery Diarrhoea (AWD)

- Rumour investigation was conducted into 10 suspected cases of AWD and 2 related deaths from Toosweyne village in Berdale district, 80 km from Baidoa. The NGO Community Care Centre (**CCC**) and **WHO** officer from Wajid visited the village and provided cholera supplies. Blood samples were sent to **AMREF** public health laboratory in Nairobi and laboratory results are pending.
- Lower and Middle Juba reported 221 AWD cases and 4 related deaths from 4 different districts between 18 and 31 August 2007. The majority of cases was reported from Jilib district (151 cases). There were no cases reported from other regions. The ongoing cases seem a reflection of the endemicity of AWD in Somalia.

Water and sanitation

- **Muslim Aid-UK** finalized the construction of 200 latrines in different IDP camps in Kismayo, supported by **UNICEF**.
- **UNICEF** also supported the NGO **Juba Shine** in the provision of 200 latrine slabs to 24 villages in Jamame and rehabilitation of 10 hand pumps for shallow wells.
- **Mercy USA** in partnership with **UNICEF** will be rehabilitating and digging new wells in Eldher and Mesegawein districts in Galgadud region in September. This will include training, hygiene and sanitation awareness, distribution of soap, water purification at source and household level, and the construction and distribution of 200 latrine slabs.



Muslim Aid constructed 35 latrines at Khalid bin Walid IDP camp in Kismayo with support from UNICEF

Vaccination

- Polio National Immunization Days were held from 27-29 August 2007 in Middle Shabelle, Hiiran, parts of Lower Juba, Puntland and several regions in Somaliland, A total of 218 teams of 2 people each targeted all children under 5 years of age with the Oral Polio Vaccine. The coverage for the NIDs in July was above 90%.
- A ten-day measles catch-up campaign in Wanlaweyn district vaccinated 68,998 children between 9 months and 5 years of age; an Expanded Programme for Immunization (EPI) acceleration campaign was conducted in Bay region from 20-23 August, vaccinating children against 6 diseases: 80% of the vaccinators were **SRCS** volunteers.

Last polio case reported on 25 March 2007 from Hobyo town in Mudug.
Somalia reported **8 confirmed polio cases in 2007** compared to 28 cases in the same period of 2006.

4. Primary and Secondary Health Care

Rehabilitation and support of health facilities

- **WHO** prepositioned 3 Italian Emergency Health Kits to its sub office in Wajid and 3 to Mogadishu, as well as 1 complete New Emergency Health Kit (NEHK) to Mogadishu. One NEHK includes medicines, disposables and instruments, sufficient to support 10,000 people during a three months period. One Italian Emergency Kit contains drugs for the treatment of 100 people affected by trauma.



3 Italian Emergency Kits (A+B) arrive on the UNHAS flight in Wajid

Primary health care and reproductive health

- Mercy USA for Aid and Development (**Mercy USA**) opened 3 new Mother and Child Health (MCH) centers in partnership with **UNICEF** in Gambole/Shimbirole (Jowhar, Middle Shabelle), Halgan (Buloburte) and Bo'o (Beletweyne) in Hiiran. **Mercy USA** continues to run an MCH clinic in Jilib town (Middle Juba) since 1997. Besides its 4 Supplementary Feeding Programme (**SFP**) sites in Jilib town, Osman Mooto, Kaytoy and Helishid villages in Jilib (Middle Juba), **Mercy USA** opened 3 new SFP sites in Buloburte town, Halgan (Buloburte) and Bo'o (Beletweyne) in Hiiran region.
- **UNICEF** and **Mercy USA** conducted training for 18 health workers from its MCH and SFP to enhance management of cases of illness and malnutrition, including EPI.
- Refresher training on reproductive health care was conducted at the **SRCS** training facilities in Baidoa by **WHO** reproductive health expert from Mogadishu. Thirty nurses, midwives and Traditional Birth Attendants working for **World Vision**, Somali Red Crescent, Emirati Red Crescent, the Bay regional hospital and local NGOs came from Baidoa, Mogadishu, Dinsor and Bardera.
- **World Vision** runs one Mother and Child Health Care centre and 26 health posts in Baidoa. In its TB treatment centre, 184 people are following the Directly Observed Treatment Short Course (**DOTS**). **WHO** is supporting **World Vision** in running one mobile clinic consisting of 5 qualified nurses and 3 auxiliary nurses providing basic health care to IDP camps around Baidoa for 5 days a week.
- The TB centre at the **Intersos** regional hospital in Jowhar has 120 TB patients on DOTS treatment. **Intersos** runs 4 MCH centers, one inside the hospital, and the other three in Balad, Hawadlee and Warsheick.
- Twelve **SRCS** volunteers are currently being trained as auxiliary nurses in Bay regional hospital. The training programme takes 6 months. **SRSC** Baidoa has trained a total of 4000 people in first aid and health education since 1992, of whom 500 are currently active volunteers, with 40-50 new volunteers trained every month. Besides their extensive training programme, **SRCS** Baidoa runs 4 MCH centres, 2 in Baidoa town and 2 in the rural areas. **SRSC** Jowhar trained 477 volunteers since 2003, with 170 new volunteers trained since January 2007.

Relevant links

- TB Directly Observed Treatment Short Course (**DOTS**)
<http://www.who.int/tb/dots/en/>
- Contents of Standard Health Kits - New Emergency Health Kit 98
http://www.who.int/hac/techguidance/ems/new_health_kit_content/en/index.html
- Contents of Italian Emergency Kit A, Trauma Profile
http://www.wpro.who.int/NR/rdonlyres/45B0CE8F-E997-49ED-A7F6-7D1BDD858086/0/Trauma_Kit_A.pdf and Kit B (support for Kit A)
http://www.who.int/hac/techguidance/ems/italiankit_b/en/index.html

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