



Pandemic Influenza A (H1N1) 2009 confirmed in Somalia

9 November 2009

Situation Update

Pandemic Influenza A (H1N1) 2009 has been confirmed in Somalia for the first time. Two out of 10 samples tested positive for *novel H1N1 (pandemic strain)* on 3 November 2009 in KEMRI referral laboratory in Nairobi, Kenya.

Somalia is the last country in the Eastern Mediterranean Region (EMRO) to report confirmed cases of H1N1. The neighbouring countries Kenya and Ethiopia, which both are part of WHO's African Region (AFRO) have already confirmed cases of H1N1, including from within refugee camps close to the Somali border.

Preparedness & Response

- WHO conducted training on case management, surveillance, outbreak communication and social mobilization, infection control, and vaccination. Seventy health workers from North West Zone (Somaliland) and North East Zone (Puntland) attended the training in Hargeisa and Garowe.
- An H1N1 committee with members from health authorities and partners has been established in all zones
- Health education messages were translated into Somali, shared with the authorities and aired daily through radio broadcasts by IRIN since May 2009
- A "Call to Action" was prompted by WHO on 13 August 2009 in partnership with IFRC, UNSIC, OCHA and UNICEF in line with the humanitarian imperative to support health authorities and communities to reduce the impact of the pandemic influenza
- WHO provided technical guidelines including for the dissemination of health education messages, disease surveillance, and infection control, etc. to all zones
- A national preparedness plan was developed and is in the process of being updated
- A national plan for H1N1 vaccination was developed and priorities (i.e. for vaccination of health workers and high-risk groups such as pregnant women) were established according to WHO guidelines
- Personal Protection Equipment and laboratory diagnostic kits have been pre-positioned in Somalia for infection control and rapid diagnosis. Antiviral treatment (Oseltamivir) is available and vaccines have been ordered by WHO.

Recommendations

- Integrate H1N1 surveillance (ILI and SARI) in the weekly surveillance system
- Conduct capacity-building activities for health care providers including for surveillance, case detection, laboratory confirmation, clinical/case management, outbreak control measures, outbreak communication strategies, and vaccinations, etc.
- Establish a national influenza centre in Somalia
- Establish strong inter-agency and inter-sectoral collaboration on H1N1 activities
- Disseminate the Health education messages as widely as possible utilizing all available means
- Establish and promote the culture of compliance with infection control measures in all health facilities in Somalia

Constraints

- Detection: Somalia lacks an effective and sensitive disease surveillance system which would enable early detection of cases of influenza-like illnesses (ILI)
- Diagnosis: The absence of appropriate laboratory facilities in Somalia causes delays in the identification and confirmation of H1N1 virus and further delays in response
- Funding: insufficient financial resources limit the implementation of social mobilization and health education activities, as well as training of health workers