

December 2021

Health Emergency Programme Update – Somalia



Communities queue to receive medical face masks, donated by the Federal Government of Germany, to Somalia through WHO, Garowe @WHO

KEY HEALTH INDICATORS – DECEMBER 2021

130 Health cluster partners
6.5 million People in need of health care

HEALTH NEEDS AND PROVISION

- **2.4 million** people internally displaced of which 1.8 million require humanitarian assistance
- OCHA says **3.2M** people are affected by drought in **66** of the **74** districts of Somalia as of Dec 2021
- **1** consultation per person per year (as compared to OCHA standard of 1 new visit/person per year)

DISEASE BURDEN INDICATORS

- MCV1 coverage rate of **72%** (37 29 out of 51 688 infants under the age of 1) as of December 2020
- OPV-3 coverage rate of **77%** (39 843 out of 51 688 infants under the age of 1 year) as of December 2020

FUNDING (US\$)

8.3 million Required for WHO's health emergency programme in 2021

HIGHLIGHTS

- 1833 community health workers deployed in 71 districts which also includes 66 drought-affected districts
- 92 566 people reached with key messages for disease prevention
- 248 alerts of epidemic-prone diseases were detected. Of which, 39% (97) alerts were investigated and verified to be true
- 1023 cases of severe acute malnutrition with complications treated in stabilization centres supported by WHO
- 4366 cases of trauma treated
- 304 boxes of essential medical supplies distributed to drought-affected districts; enough to provide essential health care for 11 900 patients over a three-month period

Coordination meetings

- The World Health Organization (WHO) convened health cluster coordination meetings with partners in Banadir region to discuss the implementation of response activities to coronavirus disease 2019 (COVID-19) and other epidemic-prone diseases. The action points during the meeting included scaling up testing for suspected cases of COVID-19; risk communication and community engagement activities; and response to outbreaks of acute watery diarrhoea and measles amongst the internally displaced communities in Deynile and Kahda districts. State-based workplans for the implementation of activities related to trauma and emergency care were also developed.
- WHO and the Federal Ministry of Health organized a workshop in Nairobi, Kenya, to develop the technical skills of 38 technical staff on coordination and response in the Public Health Emergency Operations Centres at national and state level. Participants gained skills in (i) incident management systems (ii) functioning of the PHEOCs (iii) risk assessment and classification for all hazards and (iv) management of public health incidents. In addition, a draft implementation plan for the PHEOCs was developed.
- WHO convened a meeting with the Federal Ministry of Health, Infectious Hazard Preparedness Unit of WHO Eastern Mediterranean Regional Office and the National Institute of Health in Somalia to discuss a plan to establish an Eastern Mediterranean Flu (EMFLU) online reporting portal for Somalia. It will be used to report epidemiological and virological data for influenza surveillance from sentinel sites and the National Influenza Centre (NIC). Participants developed a training and mentorship plan for frontline health workers, laboratory managers and data managers on the EMFLU online reporting platform and mobile application for influenza surveillance.

Emergency response operations

Community-based surveillance

- In December 2021, 953 of the 1833 community health workers (CHWs) submitted reports for community event-based surveillance in 71 districts. CHWs visited 27 701 households and 92 556 people received health messages related to COVID-19 and other priority diseases in their localities. Overall, 248 alerts were reported, of which 97 (39%) were investigated by the district rapid response teams (RRTs) and were verified as true alerts. During the same period, the CHWs reported to district-based RRTs, 40 cases of Acute Flaccid Paralysis (AFP), 240 cases of acute watery diarrhoea (AWD), 141 cases of acute febrile illness, 210 cases of fever with rash, 413 cases of cough or with difficult breathing, 337 cases of severe acute malnutrition. In addition, 64 unusual health events were also reported. However, the implementation of community-based surveillance activities was negatively affected by limited funding to deploy community health workers in 71 districts.

Investigation and response to alerts of epidemic-prone diseases

- WHO supported the Ministry of Health in Southwest and Hirshabelle states to investigate and validate alerts for acute watery diarrhoea in drought-affected districts. District rapid response teams visited Marka, Baidoa, Afgoye and Qoryooley. In Baidoa, 104 cases of acute watery diarrhoea were identified, with another 97 in Afgoye in Southwest state and 200 in Jowhar, Hirshabelle state. The National Public Health Laboratory in Mogadishu tested 48 stool samples, of which 43 tested positive for *Vibrio cholerae* serotype Ogawa. WHO would be providing provide cholera kits to support the management of cholera and other acute diarrhoeal disease cases.

Drought response activities

- In Southwest state, 3 271 drought-affected families received primary health care services (routine immunization and screening for malnutrition for children below five years, treatment of communicable and non-communicable diseases). A total of 280 811 people were reached with key messages for disease prevention.

- In addition, WHO has scaled up its emergency response operations in the drought-affected states of Somalia (Jubaland, Hirshabelle, Galmudug, Puntland, Somaliland, and Southwest) to provide life-saving primary health care services with support from the Central Emergency Response Fund (CERF). An estimated 280 811 people affected by drought received key health messages on hygiene, disease prevention, and proper healthcare-seeking behaviour practices. A total of 1105 health care workers, gained skills on the management of severe acute malnutrition cases with medical complications, water quality testing, risk communication, and laboratory sample handling.



Programme planning meeting for 2022 with Hirshabelle Ministry of Health on 11 Dec 2021 © WHO

Response to conflicts in Puntland and Hirshabelle state

- An event of armed conflict was reported in Bossaso in November 2021, in which 1261 people were injured, while 1749 people were displaced from their homes. The injured people admitted to the Bossaso hospital. In response to this event, WHO provided essential medical supplies, which were adequate to treat 126 cases currently admitted in the hospital. In Hirshabelle state, 2500 people were displaced from Mahaday district due to armed conflict, in which 27 people were injured currently receiving treatment in Jowhar General Hospital. Cluster partners provided relief items in form of food, shelter and health care services to the communities displaced by conflict.

Supportive supervision and monitoring of emergency health services

- WHO participated in joint supervision visits with the State Ministry of Health to the Jowhar hospital stabilization unit in Hirshabelle state to assess the capacity of the unit to manage severe cases of malnutrition with medical complications. The stabilization unit lacked kits for the management of severe cases of malnutrition. In addition, WHO developed the capacity of frontline health workers (3 male and 2 female) in the management of severe cases of malnutrition with medical complications using standard protocols. WHO and the MOH of the Southwest state conducted supportive supervision to 20 EWARN surveillance sites in Baidoa district. The supervision aimed at improving the reporting timeliness and completeness of the health facilities using mobile applications. During the supervision, several gaps were identified which affected timely reporting of EWARN system, including: (i) lack of skilled health workers to use EWARN application (ii) lack of airtime and internet services to submit reports, and (iii) high turnover of health workers. The action plan to improve the timely detection and reporting of alerts in Baidoa included (i) training the new health care workers to detect and submit reports using EWARN mobile application (ii) providing airtime to the sentinel sites to improve timeliness of reporting.

Capacity building of laboratory technicians on influenza sample testing

- WHO supported capacity building sessions for three laboratory technicians at the National Public Health Reference Laboratory in Mogadishu to test and diagnose clinical samples from suspected cases of influenza using real-time polymerase chain reaction (rt-PCR) technique, subtyping of positive samples of influenza, laboratory data collection, analysis and reporting. WHO will continue to provide on-the-job skills development for laboratory technicians to improve their skills in the diagnosis of influenza and other respiratory pathogens.

Nutrition update

- WHO supports the Ministry of Health in the management of cases of severe acute malnutrition (SAM) with medical complications in the districts affected by drought, floods, and conflict in Somalia. This support is provided through technical support, capacity development, and the provision of supplies to 53 nutritional stabilization centres across the country. These supplies include SAM kits, distributed to the state health ministries on a quarterly basis. A total of 16 (30%) stabilization facilities from all states submitted monthly reports.
- A total of 1023 new SAM cases with medical complications were admitted to 16 stabilization centres in Somalia (three in the Banadir region, seven in Puntland, one in Hirshabelle, and five in the Southwest state). Overall, 666 (90.5%) recoveries, 27 (3.5%) defaulters, 20 (2.7%) medical referrals, and 23 (3.1%) deaths were reported during the month of November.



Ongoing acceleration of EPI outreach response in Baidoa district on 8th December 2021 © WHO

Trauma case monitoring and critical care

- As the country is experiencing different types of emergencies, including conflict, WHO is closely monitoring the number of people affected by these events in the country and responding accordingly. In December 2021, a total of 4366 trauma-related injuries were reported from the health facilities through the District Health Information System (DHIS-2). Of these, the majority (69%) were non-weapon-related injuries, including burns and road accidents. These injuries represent a 13% decrease (570) compared to 4 936 injuries reported during the same period in November 2020. The reported cases were managed in different hospitals in all states.

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Our weekly and monthly information products

Weekly Cholera infographic:

- <http://www.emro.who.int/somalia/information-resources/acute-watery-diarrhoeacholera-situation-reports.html>

Monthly Reports:

- <http://www.emro.who.int/countries/somalia/index.html>
- COVID-19 Dashboard-Somalia



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