

April 2022

Health Emergency Programme Update – Somalia



Health workers prepare vaccines for communities and house-to-house visits at a mobile clinic a drought-affected IDP camp in Kismayo. © WHO/Arete/Ismail Taxta

KEY HEALTH INDICATORS – April 2022

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

HEALTH NEEDS AND PROVISION

- 7 million people in need of humanitarian assistance in Somalia
- 6.1 million people in 74 districts are affected by severe drought; 759 400 have been displaced from their homes
- Fewer than 1 consultation per person per year reported during the month (as compared to the OCHA standard of 1 new visit/person/year)

HIGHLIGHTS

- 2163 community health workers (CHWs) deployed in 79 districts, including 74 drought-affected districts.
- 1 227 953 people reached with key messages for disease prevention.
- 1880 alerts of epidemic-prone diseases notified by CHWs, of which 1038 (55%) were verified as true after an investigation.
- 1957 cases of severe acute malnutrition with complications treated in stabilization centres supported by the World Health Organization (WHO).
- 4382 cases of trauma treated.
- WHO essential medical supplies, including Interagency Emergency Health Kits (IEHK), delivered to the state-based ministries of health in Galmudug and Hirshabelle states. The supplies are enough to serve an estimated 316 800 beneficiaries for a period of three months.
- WHO donated two standard kits for the management of severe cases of malnutrition with medical complications and medical equipment to Beletweyne Hospital in Hirshabelle state. The kits are estimated to treat 100 severe cases of malnutrition with medical complications for a period of months.

Coordination meetings

- WHO convened planning meetings to prepare for the Somalia research prioritization workshop which will be held in May 2022 to develop a research agenda for Somalia. A survey questionnaire was sent to multi-sectoral researchers within Somalia to identify priority areas for discussion during the workshop.
- The National Institute of Health (NIH) deployed 25 mentees for the Field Epidemiology Training Program (FETP) in different states to support the implementation of disease surveillance and response, data quality audits and outbreak investigations focusing on drought-affected districts of Somalia. Biweekly technical and strategic meetings were conducted between the Federal Ministry of Health (FMOH), NIH, Centers for Disease Control and Prevention (CDC), African Field Epidemiology Network (AFENET) and WHO to discuss the progress and institutionalization of Somalia's FETP.
- Health cluster partners convened coordination meetings in Puntland, Hirshabelle and Galmudug states to review the implementation of drought response activities and response to measles outbreaks. Participants resolved to mobilize additional resources to scale up emergency operations, and strengthen coordination of response with the state-based ministries of health and other clusters. In Hirshabelle state, partners resolved to strengthen coordination with the water, sanitation and hygiene (WASH) cluster to scale up implementation of WASH activities relevant for the control of the ongoing cholera outbreak in Jowhar town.



WHO offers essential health services to mothers, children and vulnerable populations during the ongoing drought, alongside the Government and partners. © WHO/Arete/Ismaïl Taxta

Implementation of community-based surveillance

In response to the drought, WHO deployed 2163 CHWs in 66 of the 74 affected districts and conducted the following activities:

- A total of 2163 CHWs were deployed to conduct community-based surveillance for COVID-19 and other epidemic-prone diseases, risk communication and home-based management of childhood illness in 66 drought-affected districts.
- CHWs visited 312 785 households and reached 1 227 953 persons with disease preventive messages.
- CHWs reported 1880 COVID-19 alerts to district rapid response teams (RRTs), of which 1038 (55%) alerts were investigated and 268 (7%) confirmed as true.
- CHWs identified 4247 cases of acute diarrhoea among children aged below 5 years and treated them with oral rehydration salts and zinc. Of the 4247 cases, 967 (23%) had severe diarrhoea and were referred to the nearest health facility for further management.
- CHWs screened 27 215 children under the age of 5 for nutritional status using mid-upper arm circumference (MUAC) tape. Of this number, 4182 (15%) were referred to outpatient therapeutic programmes (OTP) for further treatment and care.
- For maternal and child health services, CHWs provided iron and folic acid to 1167 pregnant women, Vitamin A supplementation to 11 585 children under 5 years (6-59 months) and offered counselling on infant and young child feeding (IYCF), including exclusive breastfeeding, to 4019 mothers.
- District-based RRTs conducted supportive supervision and monitoring of activities conducted by CHWs in drought-affected districts. The teams found: (i) 100% of the 9211 homes visited by the CHWs were validated; (ii) 62% of the teams could correctly demonstrate how to conduct active case search; (iii) 55% of the teams were engaged in health promotion and risk communication and community engagement (RCCE) activities; (iv) 93% of the teams had movement maps; and (v) all CHWs supervised used the open data kit (ODK) tool to report disease alerts correctly.

Capacity building for EWARN for health cluster partners

- Technical officers from WHO's emergency programme conducted a virtual orientation for health cluster partners to submit disease alerts using the early warning alert and response network (EWARN) mobile application. Trainers explained the objectives of the EWARN and the need for timely submission of quality reports of disease alerts. After the training, the technical unit from WHO will work with Ministry of Health (MOH) to develop a short video translated in Somali language that will be shared with health cluster partners demonstrating the use of the EWARN mobile application. The MOH will create user details for the health cluster partners who have no access to the EWARN mobile application to ensure coherent use of data collection methods.

Outbreak investigation for acute watery diarrhoea in drought-affected districts

- WHO supported district-based RRTs in Galkayo and Hobyo, in Galmudug and Jowhar, in Hirshabelle state, and Afgoye in South West state to investigate alerts of acute watery diarrhoea in these districts. The teams that were composed of surveillance officer and medical officers recorded all cases in standard line lists, and identified the most-affected population groups by age and location. In Jowhar, the team collected 11 stool samples, of which four were tested positive for *Vibrio cholerae* Ogawa, while in Afgoye, two of the five stool samples tested positive for *Vibrio cholerae* Ogawa in the National Public Health Laboratory. The response teams joined forces with WASH cluster partners to strengthen the implementation of WASH activities in Jowhar, Galkayo and Hobyo districts, to avoid further spread of cholera and waterborne diseases.

Establishment of triage corners for the management of critically ill patients

- WHO supported the establishment of triage corners in two out of the planned 20 health facilities in Galmudug. The triage corners have been equipped with one oxygen concentrator, one monitor, one pulse oximeter, stethoscopes, automated blood pressure machines, oxygen delivery supporting devices (nasal canula and masks), and thermometers, to support patients at their first stage of critical care medical services.

Capacity building for biomedical equipment in Puntland state

- WHO's biomedical engineer visited Puntland and conducted the following activities:
 - (i) fixed all infant incubators in Garowe Regional Hospital
 - (ii) conducted on-the-job trainings to teach the national biomedical engineer and head of the neonatal unit in Garowe Hospital how to maintain and troubleshoot medical equipment. The engineer also assessed the functionality of the newly constructed oxygen plant in Garowe.

Strengthening the laboratory capacity for the diagnosis of pathogens

- WHO established a 'level two' biosafety laboratory in Kismayo district of Jubaland state and installed a real-time Polymerase Chain Reaction (rt-PCR) machine. WHO also distributed reagents for conducting rt-PCR tests for SARS-COV-2 in four state-based laboratories, in Jubaland, Southwest, Galmudug and Hirshabelle states. These laboratories will contribute to detect and confirm COVID-19 and other pathogens in a timely manner in the respective states.
- WHO supported genomic sequencing of 62 SARS COV-2 positive samples from Puntland (36) and Mogadishu (26). Of the 36 samples identified from Puntland, 12 (33%) were confirmed positive for Omicron variant/21K, while one (2.7%) sample represented 20A and 20C clades. The results from the genomic sequencing will be submitted to the Global Initiative on Sharing of Influenza Data (GISAID).

Establishment of solar powered oxygen plants

In Garowe, WHO completed the installation of a containerized oxygen plant that has the capacity to refill 50 cylinders, each able to contain 40 litres a day. WHO also supported the establishment of a solar-powered oxygen delivery system in Bay Regional Hospital (South West state), Kismayo Hospital (Jubaland state) this month. The solar-powered oxygen units will provide oxygen to patients experiencing respiratory distress, thus contributing to a reduction in mortality associated with oxygen shortage.

Nutrition update

- Of the 42 stabilization centres supported by WHO, 33 (79%) submitted monthly reports to WHO and MOH useful for monitoring trends of severe cases of malnutrition with medical complications among children aged below five years in different states.
- WHO supported the FMOH in the management of severe acute malnutrition (SAM) cases with medical complications in the districts affected by drought and the long-term impact of floods and conflict. This support was provided in the form of technical expertise, capacity development, and the provision of supplies to Banadir, Hirshabelle and Jubaland states.
- A total of 2312 new SAM cases with medical complications were admitted to 33 stabilization centres: 3 in Banadir region, 9 in Puntland; 9 in Jubaland; 6 in Galmudug; none in Hirshabelle; and 6 in South West state.
- Overall, there were 1957 (99.2%) recoveries, 52 (2.6%) defaulters, 37 (1.9%) medical referrals, and 40 (2%) deaths reported.
- WHO donated two WHO pediatric severe acute malnutrition (PED-SAM) kits and medical equipment to Hirshabelle for the management of severe cases of malnutrition admitted in the Beletweyne Hospital in Hiran region to cover a period of three months.

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 April 2022, 4382 trauma-related injuries were reported from the health facilities in all states through the District Health Information System (DHIS-2). Of these, the majority (62%) were non-weapon-related injuries, which included burns and road accidents. These injuries represent a 5.4% decrease (237) compared to 4145 injuries reported during the same period in April 2021. The reported cases of injuries were managed in different hospitals in all states. The most affected districts are Dusamareb (230 cases), Kismayo (207 cases) and Wadajir (229 cases).

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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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