



HEALTH CLUSTER SOMALIA



UNICEF and WHO receiving the Oral Cholera Vaccines in Mogadishu

HEALTH CLUSTER BULLETIN April-May 2022

Somalia

Emergency type: Protracted; Covid-19, Drought, Floods, AWD/Cholera, Measles



HIGHLIGHTS

- Failed Gu rains render the country into a pre-famine situation.
- FMoH and partners establish a cholera response taskforce as part of efforts to reduce mortality and morbidity and to reduce occurrence of outbreaks.
- Approximately one million doses of oral cholera vaccines arrive in Somalia.

HEALTH CLUSTER

137 HEALTH CLUSTER PARTNERS
4 UN; 33 INGOS; 88 NNGOS AND 5 OBSERVERS, 6 DONORS, 1 NATIONAL AUTHORITY

4.7 M TARGETED POPULATION

HEALTH ACTION



CONSULTATIONS

423,136 Consultations provided in April and May 2022

1,439,833 Total # of consultations in 2022

FUNDING (US \$) – FTS (FINANCIAL TRACKING SYSTEM)



HRP

Health requested: **108.8M**
Funded: **8.1M(7.4%)**

Drought Update

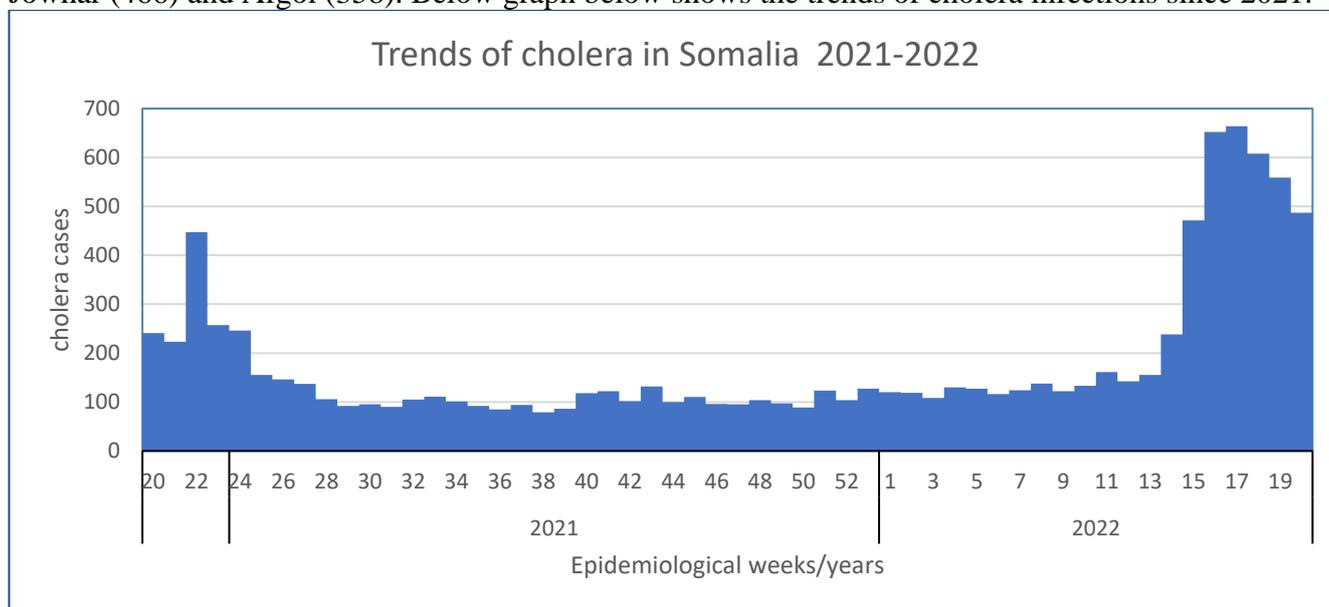
The SWALIM Somalia Rainfall Forecast of May 19th indicates that generally, the seasonal rains have been low in parts of the country, while in other parts localized heavy storms were experienced within a few days, resulting to flash floods. As the season ends with insignificant rains foreseen the existing drought situation may deteriorate further. The current cholera outbreaks in Somalia are attributed to the increasing number of people who have no access to safe water and proper sanitation due to drought. The emergency health situation is further deteriorated by the continuation of widespread occurrence of measles cases. The food insecurity, cholera and measles all contribute to high cases of malnutrition especially among children below 5 years. According to UN OCHA in Somalia, 6.1 million people have been affected by drought while an additional 771,400 people have been displaced in their homes since

October 2021. Six areas in Somalia are facing the risk of localized famine in the coming months according to the latest famine risk analysis by the Food Security and Nutrition Analysis Unit and partners.

Measles and AWD/Cholera Situation Update

AWD/Cholera Situation Update

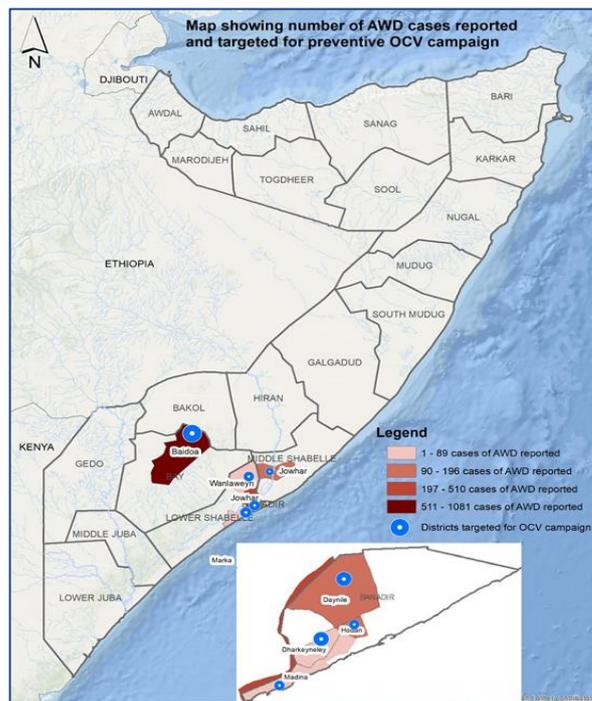
According to the FMoH AWD situation report of week 18, 608 new cholera cases were reported from 19 districts. 181 were severe cases while 3 deaths were reported during the reporting week. 26 stool samples were tested, and 3 of them were confirmed for *Vibrio Cholerae 01 Ogawa* by culture. Since epidemiological week 1/2022, 4328 cases of cholera and 12 deaths (CFR 0.27%) have been reported from 21 of the 74 drought affected districts. Of the 4328 cases 45.7% are children below 2 years. Out of the total number of cases reported, 49% are women and 23.0% are severe cases. All reported cases did not receive Oral Cholera Vaccine that were administered in cholera risk districts in 2017, 2018 and 2019. The number of cases reported have decreased by 56 (8%) in the past two weeks of May. Since January 2022, the districts reporting the highest number of cases include Baidoa (1442), Daynile (487), Jowhar (466) and Afgoi (358). Below graph below shows the trends of cholera infections since 2021.



A cholera response taskforce has been initiated with the leadership of FMoH, WHO and UNICEF. The objective of this taskforce is to reduce mortality and morbidity related to WASH-related diseases by identifying risk factors for their transmission and preventive measures to reduce occurrence of outbreaks. The first TWG meeting was held on the 5th of May 2022. The meeting action points included: Increase WASH activities in the districts; increase hygiene and sanitation messages; ensure safe drinking water is available to the IDPs and the districts mostly affected; case management capacity be increased; avail Cholera lab supplies and reagents; sample collection and testing for confirmation; encourage timely reporting and follow up of cases using standard Cholera line lists and COP; agree on a realistic and manageable frequency of the sitrep, preferably released after the TWG meeting so as to add information from the group; partners managing the CTC/CTU or Oral Rehydration Therapy points(ORT) need to have access and training to on the Cholera Treatment Center/unit(COP) Portal. MSF on the other hand is collaborating with MoH to step up response with 15 CTC sites within the IDP community through the decentralized model of care. Additional 10 bed capacity CTU has also been established at the referral hospital in Baidoa following increased mortality.

OCV Campaign

The MoH has received 934,512 doses of Oral Cholera Vaccines with the support of WHO and UNICEF, donated by GAVI for the 1st phase of the OCV campaign. These vaccines are planned to target 9 hotspot districts in Southwest State, Benadir and Hirshabelle. One key challenge anticipated is the high demand for vaccines against the supply. The map illustration displays the areas targeted by the campaign



Map courtesy of WHO

Measles Situation Update

Somalia is experiencing a measles outbreak in all drought affected districts. Measles outbreak is attributed to lower vaccination coverage in all districts due to disruption of routine immunization, attributed to conflict and displacement and weak health system. On the other hand, malnutrition resulting from food shortages contributes to lowered immunity leading to escalation of new measles cases. Currently, 6216 suspected cases have been reported since Jan 2022. 394 cases were reported in week 17 alone. 83% of the suspected cases are children below 5 years. 60% of samples out of the 372 samples collected from all districts have tested positive for Measles IgM. WHO supported integrated 239 outreach sessions in 33 districts (11 districts from Southwest, 4 Districts from Jubaland, 8 in Galmudug and 10 Puntland) in the first week of May. 11,778 children received measles vaccine (18,173 as MCV1 and 11,214 as MCV2) 22,324 eligible children received Vitamin A supplementation. 2163 CHWs were deployed in 66 of the 74 drought affected districts. 1.2M people in 312k households were sensitized with preventive messages for epidemic prone diseases and demand creation for Measles vaccination. WHO is planning to deploy additional vaccination teams and social mobilisers to scale up measles vaccination campaigns in high-risk districts especially Puntland, Galmudug and Benadir regions. A decrease in the cases of measles is reported in Baidoa and Galkayo South, due to immunization efforts. However, in Galkayo North, measles cases continue to appear. There could have been an under-estimation of target population in this area, and this needs to be considered in the next round of immunization.

SUB-NATIONAL UPDATES

Benadir

Health partners have recorded a surge in disease outbreaks, including measles, as new IDPs arrive in the Region. In March, Kahda district authorities and the IDP community reported 30 new suspected measles cases and four deaths in IDP sites. Also, at least 60 unaccompanied children displaced by drought arrived in the region. A drought response coordination meeting was held in Wadjir district to discuss surveillance, alert detection, and community-based response activities. According to the UNHCR population dashboard and the Protection Return Monitoring Network (PRMN), at least 146,000 new IDPs have been displaced to Mogadishu in 2022, including 137,000 due to drought. The IDPs are mainly from Bay, Bakool and Middle Shabelle (4,000), while about 4,500 are from Banadir, Middle and Lower Juba and Hiraaan regions. Accordingly, new IDP settlements have been established, including in the Haydhafin

area, to decongest overcrowded sites in Daynille, Garasbaley and Kahda districts. There are no service centres and facilities yet in the newly established sites. Priority needs include food, safe drinking water, shelter and sanitation services, non-food items (NFIs), protection, health, and nutrition services.

SWS

A general increase in diarrheal cases has been witnessed in SWS, owing to the unmaned movement of people, severe water shortage, lack of proper nutrition and lack of vaccines as 95% of the population in Afgoye, Baidoa and Merka did not receive the cholera vaccine during the 2017 OCV campaign. Specifically, a total of 2,279 cases including 11 deaths (CFR 0.48%) have been reported since January 2022 up to date in Baidoa, Afgoye and Marka. Other locations and districts reporting suspected AWD/Cholera cases but not confirmed, include Wajid, Burhakaba, Qoryoley, Wanlawey, Kunturwarey, Shalanbood and Deynunay. The area also faced limited AWD/Cholera supplies at all CTC facilities due to the higher number of admission cases. Required response efforts include the construction of additional latrines at all CTC facilities for males and females. Provision of critical lifesaving equipment's at all CTC facilities and Construction of standard CTC facility for the AWD/Cholera hotspot areas will also go a long way to support treatment.

Jubaland

Partners and local authorities have reported a series of deaths, including those of children in the Ifitn IDPs site in Baardheere District in March, as well as in Hosqudhun village. The cause of death was attributed to measles and AWD, and the effects of drought. On the other hand, commodity prices continue rising, limiting access to basic needs like food for the most vulnerable people. Malnutrition cases are also on the rise in Gedo region. Since January, more than 45,000 new arrivals (7,000 families) have been received in Afmadow District, Lower Juba Region, while 4,000 people arrived in Doolow in the first half of April. Most new arrivals come from riverine zones in Lower and Middle Juba regions, indicating the drought impact on agro-pastoral communities. Forced evictions remain a major concern; about 4,360 people (726 families) were evicted from their settlements in Kismayo this year – over 60 per cent in the past two months, by private owners, according to NRC's Housing, Land and Property (HLP) project.



SOYDA Community engagement session in Luuq District, Gedo Region

Hirshabelle

Health Cluster partners continue response efforts to the drought and the cholera outbreak. On the other hand, WHO and Hirshabelle state health authorities are preparing to set up the Polymerase Chain Reaction (PCR) machine for COVID 19 testing. From the Hirshabelle ICCG meeting, on 19 April, an AWD emergency task force was established in Jowhar town due to the spike of AWD cases in the district. From the taskforce meeting held on 11 May, 474 cases including two deaths were recorded in the Cholera Treat Centre (CTC) in Jowhar town during the first week of April. The CTC received medical supplies from health partners, but the center faces critical gaps on WASH related intervention due to absence of WASH supplies in Jowhar town. State WASH cluster has made and efforts to secure supplies from Mogadishu. In addition, there is an immediate need to further advocate for WASH supplies to the Cholera Treatment Center in Jowhar to assist the center to contain the situation.

Puntland

Weekly drought response meetings have been initiated in Puntland to enhance response coordination. Puntland authorities have reported that over 60 per cent of strategic water sources, especially boreholes, are operating more than 12 hours a day to meet the increasing demand for water for humans and livestock and water prices have doubled in many areas. Only five districts in Mudug, Sool and Buhoodle regions received some rain in March. Covid 19 surveillance activities continue, with 132 community health workers having visited 26,804 households and sensitized 119,356 individuals with key messages for COVID-19 and other epidemic-prone diseases.

Somaliland

In April, *Gu* rains were received in Somaliland, although insufficient to reverse impact of the drought. In addition, a measles outbreak was declared by the authorities in Somaliland. Humanitarian response is ongoing on to curb the outbreak and respond to other consequences of the drought, UNICEF “Bridge the Gap programme” funded by the UK is set to provide integrated support for WASH, health, and nutrition to 78 facilities in Awdal, Sahil, Togdheer, Sool and Sanaag including seven mobile teams.

Galmudug

In Galmudug, emergency medical supplies from WHO were donated to Hanano hospital, mobilized by the Ministry of Health. The State Ministry of Health and health partners continue to coordinate health response efforts and share challenges surrounding displacement due to armed conflict where 80% of the inhabitants of Dhusamareb were displaced and 42 individuals severely injured and referred to the Hanano Hospital for treatment. The crossfire in Dhussamareb has claimed the lives of six (6) persons so far.

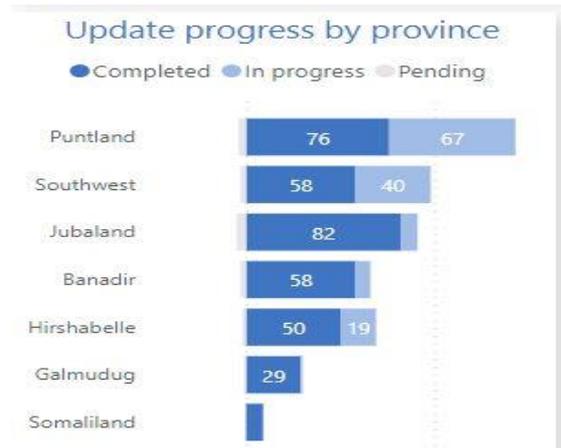
Information Management (IM) Update: HeRAMS.

Health resources and services availability mapping system is a standardized approach supported by a software-based platform that aims to strengthen the collection, collation and analysis of information on the availability of health resources and services in humanitarian emergencies.

In 2022, substantial efforts were made to reinforce, reintroduce and strengthen the capacity of HeRAMS system in Somalia. As of June 8, 2022, 320 (72%) partners updated health facilities in the HeRAMS system out of 446 health facilities. Periodicity of reporting is quarterly for health facilities.

The HeRAMS admin dashboard has been launched on 8th of June, 2022. The dashboard will allow the admin level team to monitor the progress of updating the health facilities in overall and by partner.

HeRAMS Dashboard link [\[Click here\]](#)

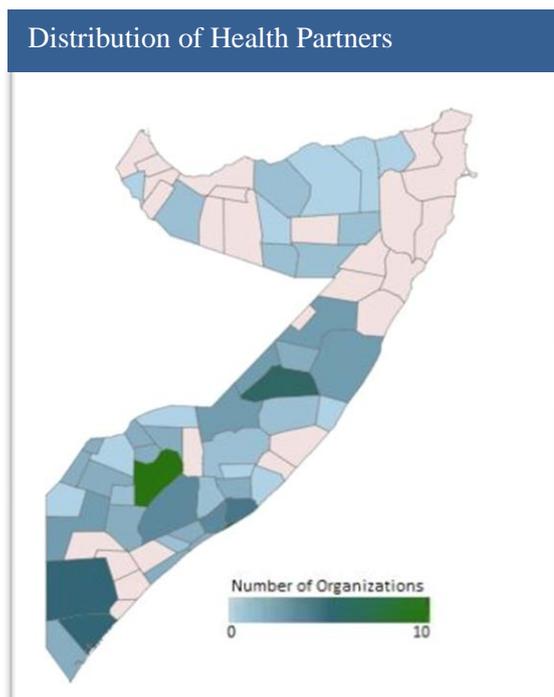


ReportHub.

As of the month of April and May 2022, the 4W report shows that 42 partners reached 465,526 people and provided 423,136 OPD consultations across 53 Districts under 15 regions.

As of June 8, 2022, the Health cluster partners have reached 1,563,285 people and provided 1,439,833 OPD consultations across 57 districts under 16 regions.

4Ws Dashboard link [[Click here](#)]



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