



HEALTH CLUSTER BULLETIN August – September 2020



Somalia

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

12.3M POPULATION
 5.2 M P'LE IN NEED
 2.6 M IDPS
 6.3M FOOD INSECURE
 1.03B US\$ REQUESTED

HIGHLIGHTS

- Persistent floods cause displacement of people and increase the risk of increased AWD/Cholera outbreak
- World Humanitarian Day: The Health Cluster celebrates health care workers
- Health Cluster Partners prepare to take part in the 2021 Humanitarian Response Plan

HEALTH CLUSTER

130 HEALTH CLUSTER PARTNERS
5 UN; 32 INGOS; 79 NNGOS AND 5 OBSERVERS
2.5 M TARGETED POPULATION

HEALTH ACTION



CONSULTATIONS
117,046 Consultations provided in Aug
112,879 Consultations provided in Sep
1,476,313 Total # of consultations (Jan – Sep)

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



HRP (Excluding COVID-19)
 Requested: 55.7 M
 funded: 9.7 M (17.5%)
COVID-19
 Requested: 47.6 M
 Funded: 8.9 M (18.6%)
Total
 Requested: 103.4 M
 Funded: 18.6 M (17.9%)

COVID-19 SILENT DISTRICTS

As cases of COVID-19 were on a decline in August, a number of districts remained that had not reported a single case so far, referred to as 'Silent Districts'; 61 districts in total, including those accessible and inaccessible out of 118 districts. Concerns were raised as to whether the so-called districts were in fact without cases. The first and second phase of the sample collection in the districts have been concluded; with 1,082 samples collected in 44 districts. WHO is currently working with health authorities to address the issue of a possible local transmission of the virus in districts with a positivity rate $\geq 5\%$.

FLOODS UPDATE

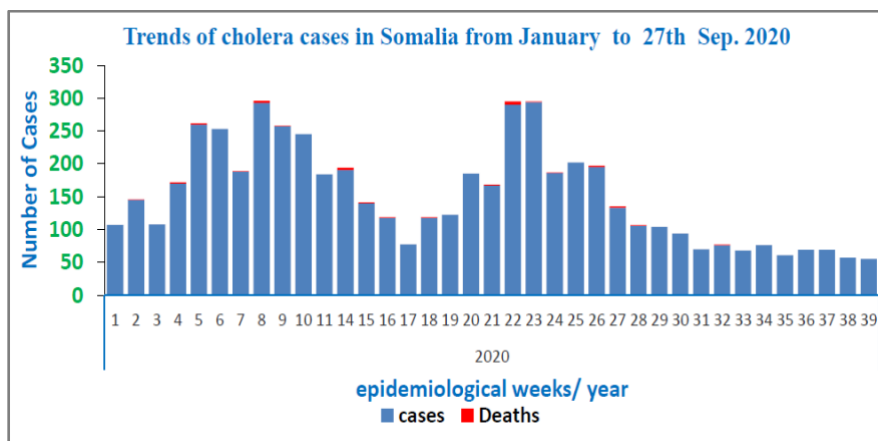
Humanitarian partners are responding to health needs of 107,900 people in flood affected regions, driven by displacement of population in Beletwayne, Jawhar, Balcad, Marka, Afgoye, Wanlawayn, and Baidoa and concerns over water-borne disease and other health threats including increased risk of COVID-19. A number of partners have been able to move services closer to the displaced population, others are facing funding challenges, ending several projects and limiting surge capacity to meet the increased case load.



In August Hagua rain floods led to a new AWD/Cholera outbreak in Afgooye which partners are responding to by carrying out case management, prevention and control activities. WHO also supported through case investigation for confirmatory test in the National Reference laboratory in Mogadishu.

MEASLES UPDATE

The measles outbreak in Kismayo that began in August, with fifty-five (55) patients admitted at the Kismayo General Hospital over the course of 4 weeks, has in September increase to 130 cases and 0 deaths. WHO assessed the situation and with State MOH planned to do measles vaccination campaign integrated with vitamin A supplementation and deworming in October. This campaign will be done in Kismayo district targeting children who are under five years.



AWD/CHOLERA SITUATION

Confirmed Cholera cases as of 27th September were 5,8721 in 2020, with 281 cases in August and 250 in September. 30 deaths were reported with a CFR 0.5%.



Five (5) regions in Somalia reported cases: Banadir, Hiraan (Beletwanye, Buloburte Jalaqsi), Middle Shabelle (Jawhar), Lower Shabelle (Marka) and Bay (Biadoa) with Banadir leading number of infections. A large part of the AWD/Cholera cases are attributed to flooding outside of Banadir.

WORLD HUMANITARIAN DAY: CELEBRATING HEALTH CARE WORKERS IN SOMALIA

During the month of August, the Health Cluster in Somalia joined the rest of the world to celebrate health care workers who dedicate their time to bring healthcare closer to the population. Health care workers in Somalia are especially hailed considering the circumstances in which they provide their services, sometimes even putting their lives at risk in order to reach populations in high insecurity and rough terrain areas where health care access is limited.

Somalia Humanitarian Fund Floods Response Allocation

Health cluster partners benefited from the Somalia Humanitarian Funding (SHF) pool. The fund, totaling to \$1,000,000 for both integrated and health specific response was tailored to respond to the floods situation in the country caused by the Gu seasonal rainfall. Areas targeted included Middle Shabelle and Balcad for health specific response, while Health and Nutrition integrated response targeted the population in Lower and Middle Shabelle regions that were most affected by the floods situation.

Photo Courtesy: NRC



HNO 2021 – Health Cluster

PEOPLE IN NEED AND SEVERITY

CURRENT NUMBER OF PEOPLE IN NEED

Non-IDPs	IDPs	Refugees	Returnees	Total
2.2M	1.6M	28K	42K	3.9M

Trend in PIN by year

2019	2020	2021
3M	3.1M	3.9M

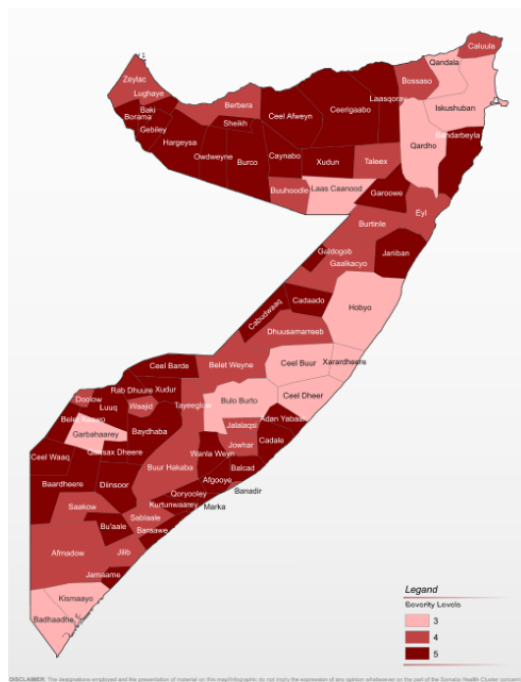
KEY HUMANITARIAN NEEDS

Health protection actions to reduce the burden of crisis driven morbidity and mortality; mitigate COVID-19 spread, environmental and vaccine preventable disease outbreaks

Targeted health services provision to provide equitable access to emergency and essential health care services, including for reproductive health and GBV survivors; and integrated services for people with disabilities

Mental health and psychosocial support services for those affected by the crisis; by acute events; GBV/IPV; and COVID-19

Patient, Health Care Worker and community safety and protection; including specific integrated mechanisms for COVID-19



Relative Severity of Needs by Phase

3	4	5
17%	38%	45%

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