

Situation Report

Fast Facts



Confirmed
COVID-19 cases
In Somalia

1,689



Recovered
cases

235



Reported
Fatalities

66

Key Population Groups



Internally
Displaced Persons

2.6M



Women of
Reproductive Age

3.5M



Pregnant
Women

387,450



Adolescents and
Youth (Age 10-24)

2.7M

1. Overview

- Somalia has one of the most complex and protracted humanitarian crises in the world. Prior to the COVID-19 pandemic, an estimated 5.2 million people required humanitarian assistance. Currently, the country is dealing with a triple threat of widespread flooding, locust infestation and COVID-19 crisis. According to OCHA, flash and riverine floods have affected nearly a million people, displaced 412,000 and killed 26 people in 29 districts across Somalia. Large areas of cropland and pasture have been inundated, roads have been damaged and IDP shelters destroyed. The flooding has also increased the risk of Acute Watery Diarrhoea (AWD) and cholera in affected regions, according to the WASH Cluster.
- All federal member states of Somalia and Somaliland have confirmed cases of COVID-19. The numbers continue to rise and as of 25 May 2020 Somalia health officials had reported a total of 1,689 laboratory-confirmed cases, 66 fatalities and 235 recoveries. Somalia now has one of the highest numbers of confirmed COVID-19 cases in the east Africa region. The majority of the cases are in Banadir region, and the number reported in other parts of

the country continues to increase. COVID-19 is also threatening the most vulnerable people including people with disabilities and women of reproductive age representing 3.5 million people of whom 387,450 are pregnant women.

The number of women and girls facing abuse including sexual violence has extremely increased due to the restrictions on movement, as well as economic and social stresses induced by the COVID-19 pandemic. According to the Gender-Based Violence Information Management System (GBVIMS) quarter one report, intimate partner violence (IPV) cases remained the highest GBV type reported across the country. There are also increased numbers of FGM cuts in Somalia, several reports indicate that mothers are taking advantage of the closure of schools, due to COVID-19, to take their daughters to traditional birth attendants and health facilities for cutting.

Funding for the GBV response remains low despite the increased threats to women and girls affected by the current crises in Somalia.



UNFPA Situation Report - Somalia

- UNFPA Somalia supports the government and work with UN agencies and national and international partners to minimize disruption to the lifesaving sexual and reproductive health (SRH) and gender-based violence (GBV) services, supports the COVID-19 risk communication and community engagement, provide protective personal equipment (PPE) and supports safety of patients and health workers through strengthening infection, prevention and control.
- UNFPA Somalia has updated and activated its business continuity plan to ensure time critical activities and functions related to managing staff safety and security despite the COVID-19 crisis and restrictions on physical movement in Somalia. The UNFPA country office has established systems and tools, including e-signatures and e-filing system, required to continue signing work plans and disbursing cash in a paperless fashion.

2. UNFPA Supported Services and Beneficiaries (1– 20 May 2020)

Women benefitting from SRH services (including antenatal and postnatal care, emergency obstetric and newborn care services)	People benefitting from birth spacing services, information, and counseling	People reached with services related to gender-based violence (prevention, risk mitigation, and response)	People benefitting from SRH and GBV awareness-raising and information campaign including coronavirus prevention	Health care providers and midwives benefitting from the training on coronavirus prevention guidelines
13,731 including 1,893 of normal deliveries assisted by Skilled Birth	1,002	2,274	100,608	34

3. UNFPA Response Summary

Coordination

- UNFPA Somalia is working closely with the Federal Government and Federal Member States, UN agencies, and other partners to ensure the continuity of SRH and GBV services. UNFPA is engaged in the various coordination mechanisms including the UN Country Team and Humanitarian Coordination Team, and supports the national COVID-19 Preparedness and Response Plans ensuring integration of SRH and GBV concerns
- UNFPA is leading the national and sub-national GBV sub-cluster under the protection cluster and reproductive health working group under the health cluster
- UNFPA Somalia has issued COVID-19 Vulnerability Mapping by risk factors in Banadir Region. The digitization of structures was carried out by the Federal Ministry of Planning staff with technical support from the GIS team in UNFPA Somalia. All structures on the ground were digitized through the interpretation of up-to-date high resolution satellite imagery and field knowledge.

Continuity of SRH interventions, including protection of health workforce

- UNFPA maintained the continuity of and access to quality life-saving essential SRH information and services for women, adolescents and youth despite COVID-19 pandemic challenges
- UNFPA is supporting De Martino Hospital in Mogadishu which is currently serving as the Government-Designated National Referral Center for COVID-19 case management and Isolation for the entire country



- Providing support to the prevention and mitigation efforts of the spread and transmission of COVID-19 in Emergency Obstetric Care and Neonatal Care (EmONC) facilities across the country and supporting the procurement of Personal Protective Equipment (PPE) for Infection Prevention & Control (IPC) for health care workers, including midwives
- Provided virtual training on Family Planning to 20 tutors from 15 midwifery schools in Somalia, an effort to ensure that unmet needs for birth spacing are continued in the times of COVID-19
- UNFPA Somalia continues to support the training for health care workers including midwives on Infection Prevention and Control and Case Management using WHO guidelines for service providers

Addressing Gender Based Violence

- UNFPA is ensuring the continuity of and access to lifesaving GBV prevention and response services (such as provision of clinical care, psychosocial support and legal aid and material support to survivors of GBV) for women, adolescents and youth
- UNFPA-supported youth center in Bosaso was able to produce face masks which were distributed to Internally Displaced Persons (IDPs) in Bosaso to slow the spread of COVID-19
- A Virtual FGM workshop was conducted and produced a set of harmonized FGM messages intended for women, men, boys and girls
- UNFPA distributed dignity kits to women and girls in response to the emergency flash floods in many regions of the country
- Supporting the training and sensitization of social workers, counsellors and legal aid focal points conducted to put in place measures to curb the spread of COVID-19 during GBV service delivery





Risk communication and community engagement

UNFPA Somalia continues to support and engage in risk communication and community engagement through:

- Communication platforms such as podcasts, and media (videos, radio, web-based) to reach as many people as possible
- Participation in risk communication and community engagement working groups within the COVID-19 taskforce pillars



- Joint awareness raising, education, and activism with wide range of partners, including communities targeting women of reproductive age, youth, elderly men and women, female health workers and Internally Displaced Populations
- UNFPA provided support and guidance for young people's engagement in Somalia and through mobile caravans. Communities were informed on the significance of staying at home and social distancing to prevent the spread of COVID-19

4. Resource Mobilization

- Declining funding for GBV service provision: due to reprioritization and the struggle to get GBV prioritized within contingency plans for COVID-19 at the UN and the national level
- UNFPA's COVID-19 preparedness and response plan is hugely underfunded. Urgent support is required to address critical gaps of GBV and SRHR services



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