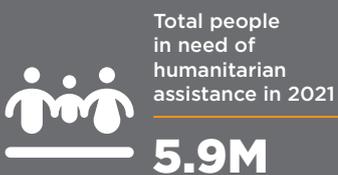




Fast Facts



COVID-19 in Somalia





OVERVIEW & NEEDS

The COVID-19 situation in Somalia has worsened in February 2021. Some 2,542 cases, including 107 deaths, were reported between 4 to 28 February 2021. Most of the cases were reported in Banadir, Somaliland and Puntland. As of 28 February, the total cumulative cases recorded in Somalia reached 7,257, including 3,210 active cases, 3,808 recoveries and 239 fatalities since the outbreak of the pandemic. On 17 February, the Federal Government of Somalia banned all public gatherings citing a spike in COVID-19 cases and deaths in recent weeks. All government employees were instructed to work from home, except for directors and senior government staff.

Somalia faces pre-existing complex humanitarian crises. A total of 5.9 million people are in need of humanitarian assistance in 2021 across Somalia, including 2.6 million Internally Displaced Persons (IDPs). Women and girls face the worst consequences of all. Vulnerable pregnant mothers and women of reproductive age in communities for IDPs and hard-to-reach locations continue to have access problems to Sexual and Reproductive Health (SRH). Loss of livelihoods and food insecurity among female-headed households and other vulnerable women and adolescent girls has worsened the dependency on food aid and humanitarian assistance.

With compliance to COVID-19 requirements, UNFPA Somalia is ensuring that implementing partners (IPs) adhere to precautionary and preventive measures against COVID-19, by using personal protection equipment (PPE), including hand gloves and masks, and ensuring that facilities where services are delivered are properly sanitized. UNFPA continues coordination with the Federal Ministry of Health (MoH) and other key line ministries in Federal Member States, and actively advocates for efforts to provide SRH services during COVID-19 pandemic. UNFPA's response includes provision of sexual and reproductive health services for pregnant and lactating women, support to GBV services and information including one-stop centers, operation of women and girls safe spaces, distribution of SRH and dignity kits, community awareness-raising, capacity strengthening, COVID-19 risk communication and referrals to both RH and GBV services, and provision of PPE. UNFPA also continues to engage young people as partners and



key agents of change and has been working hand-in-hand with IPs to support young people aiming to empower them to play vital roles in their communities during the COVID-19 pandemic.

UNFPA Somalia continues to prioritize the integration of services for sexual and reproductive health and rights, gender-based violence prevention and response, and mental health and psychosocial support response to the many core needs of women and adolescent girls as well as men and adolescent boys affected by crises. The capacity of UNFPA partners is strengthened to support GBV survivors, who, typically contend with both mental and physical repercussions. Responding to these issues requires health facilities and mobile clinics to provide sensitive services to support maternal and newborn health, birth-spacing options and the clinical management of rape. Safe spaces for women, girls and young people, as well as one-stop centres for survivors of GBV, should offer mental health and psychosocial services.

Furthermore, UNFPA Somalia continues to update its continuity plan to address the COVID-19 related restrictions and ensure time-critical activities and functions related to managing the safety and security of staff despite the crisis and restrictions on physical movement in Somalia. The UNFPA country office has established systems and tools, including e-signatures and an e-filing system required to continue signing work plans and disbursing cash in a paperless fashion.

**Summary of UNFPA Response**

UNFPA supports the delivery of life-saving sexual and reproductive health and gender based violence services to vulnerable communities across Somalia. UNFPA Somalia closely works with the Federal Government and the Federal Member States, UN agencies, and other partners to ensure access to and 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 Somalia continues to provide access to life-saving integrated SRH and Gender-Based Violence (GBV) services, including the provision of COVID-19

adapted dignity kits and psychosocial support services, as well as risk communication activities. UNFPA Somalia also used flexible resources to train frontline health care workers, midwives and social workers on Infection Prevention and Control (IPC), Case Management, Minimum Initial Service Package (MISP) for sexual and reproductive health in crisis situations, referral mechanisms, and coordination between different actors involved in the management of SRH and GBV services during crises. The UN agency and its partners also support data in humanitarian action and engagement of youth in the COVID-19 risk communication and community engagement, provides personal protective equipment (PPE) and supports the safety of patients and health workers through strengthening infection, prevention and control.

Data from UNFPA supported services (Since January 2021)

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Sexual/Reproductive Health	
# People reached with sexual/reproductive health services	20,521
# People reached with family planning services, information and counseling	2,187
# Normal / assisted deliveries	2,232
# C-Sections assisted	201
# People reached with ante-natal care consultations	10,743
# People reached with post-natal care consultations	2,809
# People reached with SRH information and community awareness activities	35,410
Gender-Based Violence	
# People reached with GBV programming / services	865
# People reached with Dignity Kits	770
# People provided with GBV case management	45
# People reached with GBV information and community awareness activities	27,328
Youth Services	
# Adolescents and young people reached with youth programming	1,367
Capacity Strengthening	
# Personnel trained on SRH, including the Minimum Initial Service Package	65
# Personnel trained on GBV, in areas such as clinical management of rape	30
# Personnel trained on COVID-19 prevention and control	35
# Youth facilitators, peers and volunteers trained on SRH and GBV	756



Services Delivered

29

Health facilities that provide
Emergency Obstetric Care
(EmOC)

26

GBV one-stop centers
supported by UNFPA

7

Women and girls safe
spaces supported by
UNFPA

6

Adolescent and youth-
friendly spaces supported
by UNFPA

8

Mobile clinics supported
by UNFPA

16

Health facilities that provide
specialized GBV services
(including CMR)

Humanitarian Coordination Leadership

- UNFPA continues to co-lead the national and sub-national GBV sub-cluster and the reproductive health working group (RH-WG). Also UNFPA is leading the efforts to ensure that the supply of reproductive health commodities is maintained and that midwives and other health personnel have the personal protective equipment they need to stay safe amidst COVID-19 response and floods situation in Somalia.
- UNFPA Somalia closely works with the Federal Government and the Federal Member States, UN agencies and other partners to ensure access to and continuity of life-saving SRH and GBV services. UNFPA is actively 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.





COVID-19 Prevention and Control Interventions

SRH interventions, including protection of health workforce

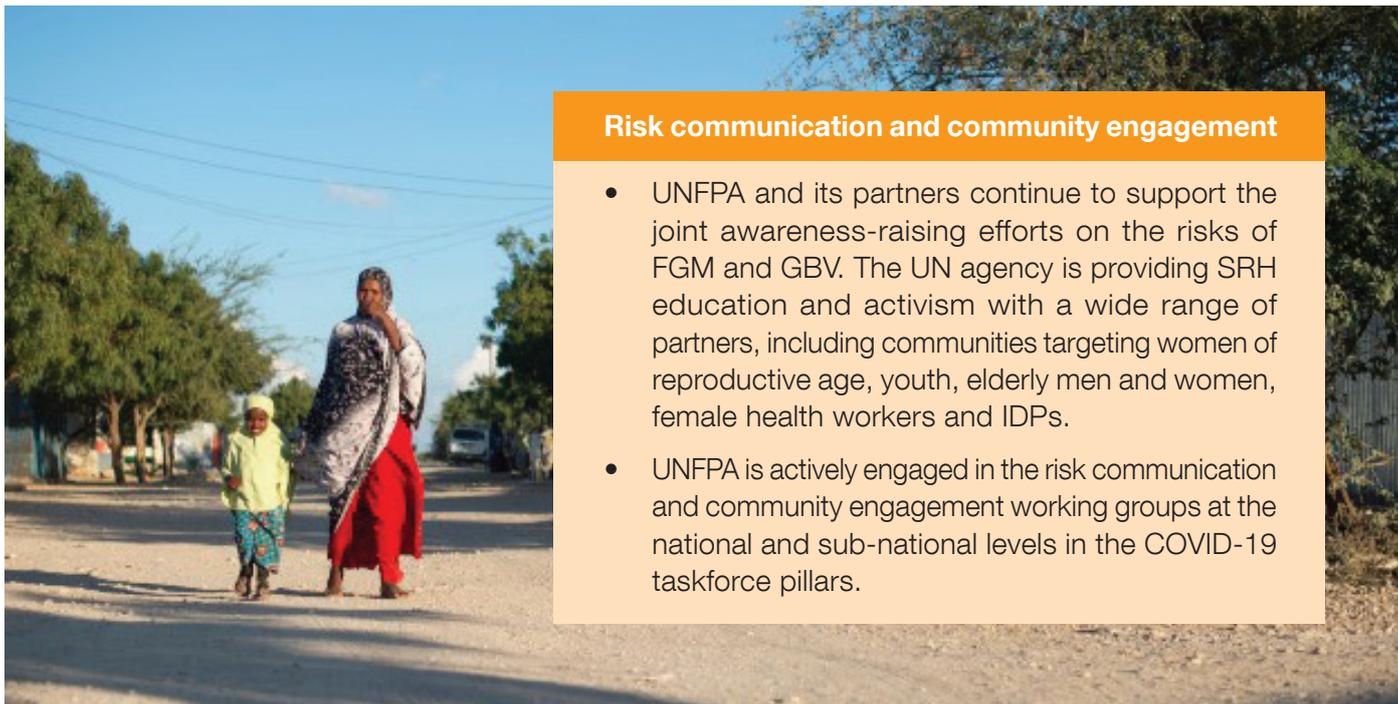
- UNFPA strengthened the continuity of and access to quality lifesaving essentials, SRH information and services for women, adolescents and youth during the COVID-19 pandemic.
- UNFPA continues to provide support to the De Martino Hospital in Mogadishu which is currently serving as the government-designated national referral centre for COVID-19 case management and isolation for the entire country.



- UNFPA supports 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 supports the procurement of PPE for Infection Prevention and Control (IPC) for health care workers, including midwives.
- UNFPA continues to strengthen the knowledge and skills of health care workers including midwives on IPC and case management using WHO guidelines for service providers.
- UNFPA and its partners concluded training on the provision of family planning services for 65 health workers including male doctors in Galmudug State. Male participation is crucial for family planning service provision.

Gender Based Violence

- UNFPA remains committed to ensuring the continuity of and access to life-saving GBV prevention and response services such as the provision of clinical care, psychosocial support, legal aid and material support to survivors of GBV for women, adolescents and youth.
- UNFPA Somalia continues to strengthen GBV one stop centres across the country which integrate care for survivors of GBV with reproductive health services
- UNFPA and partners is implementing a socio-economic initiative to empower Somalia youth with life-skills, mentorship and resources to unlock their full potentials.
- The EndFGM campaign continues as the country office responds to the COVID-19 pandemic. UNFPA Somalia is supporting Bahnano midwifery-led center to carry out community outreach campaigns to raise awareness on the life-long health consequences and complications of female genital mutilation.



Risk communication and community engagement

- UNFPA and its partners continue to support the joint awareness-raising efforts on the risks of FGM and GBV. The UN agency is providing SRH education and activism with a wide range of partners, including communities targeting women of reproductive age, youth, elderly men and women, female health workers and IDPs.
- UNFPA is actively engaged in the risk communication and community engagement working groups at the national and sub-national levels in the COVID-19 taskforce pillars.

Funding and Partnership

- With the current COVID-19 situation in Somalia plus the existing humanitarian crises, UNFPA Somalia will require more resources and funding to continue supporting the life-saving sexual and reproductive health and gender-based violence services in Somalia. With the humanitarian crises in the country expected to worsen in 2021, women and girls will face the direct and worst consequences of this situation. UNFPA Somalia and its partners continue to advocate for sustained resources to address the needs of vulnerable women and girls. In addition, 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 Somalia has Implementing Partner Agreements with approximately 50 partners which provide a broad geographic coverage for programme implementation, including in hard-to-reach and insecure areas. Over half of the partnerships are with local (national) NGOs that have access to communities in need, including provision of much needed health care and GBV services in some conflict-prone areas. The agency is represented in the humanitarian coordination forums such as the Humanitarian Country Team (HCT) and the UN Country Team (UNCT) and other cluster-based forums (health and protection) which support the identification of needs and response coordination.



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