The humanitarian crisis in Somalia, characterized by both natural and man-made factors, is one of the most complex and longstanding emergencies in the world. Somalia is currently facing Locust crisis, whilst simultaneously entered the Gu rainy season, with many areas recording more than twice their average rainfall, causing floods across Somalia and displacing over 400,000 people. With 2.6 million displaced persons, COVID-19 poses an additional challenge in already fragile context where it may further hinder access to basic services, leaving the population highly vulnerable.

As a key source, transit and, to some extent, destination country for migratory flows, Somalia continues to have an influx of migrants from neighboring countries through irregular migration routes, especially from Ethiopia. Hundreds of migrants are stranded in Bossaso as a result of border and sea-crossing closures brought on by the COVID-19 pandemic. IOM data show that migration in the Eastern route is still taking place despite the new border restrictions in the region. In comparison to data collected in the first half of April in 2019, there have been 501 more arrivals in Bossaso, but departures have fallen, with 8,261 less migrants trying to cross the Gulf of Aden during the same dates. While more people continue to arrive in Bossaso, higher number of Ethiopian migrants are stranded in the city. IOM estimates that nearly 400 migrants are currently hosted by members of the Ethiopian community living in informal settlements around the city. Recognizing that mobility is a determinant of health and risk exposure, there is a need to urgently adopt innovative, systematic, multisectoral and inclusive responses to mitigate, prepare for and respond to COVID-19 amongst the migrant population.

The number of COVID-19 cases in Somalia is increasing rapidly. As of 16 May, Somalia has confirmed 1,357 COVID-19 cases in the country, 55 reported fatalities and 152 recovered cases. The majority of the new cases are through community transmission and are reported from several regions of Somalia.

SITUATION OVERVIEW

1,357 confirmed cases

2.6 million displaced persons

400,000 newly displaced during Gu rainy season

11 March 2020
WHO declared COVID-19 a pandemic

16 March 2020
First confirmed case in Somalia and suspension of all international flights

8 April 2020
First reported fatality

16 May 2020
1,357 cases confirmed

*This is in line with IOM Somalia’s Preparedness and Response Plan

1 As of 16 May 2020.
MISSION UPDATE
10 May - 16 May 2020

IOM launches #SomaliaResponds campaign

Decades of civil war have devastated Somalia’s health system. In Mogadishu, the De Martino Hospital, the country’s main public hospital designated for treating COVID-19 patients, does not have the necessary equipment and supplies to treat patients and keep healthcare workers safe.

IOM in partnership with Somalia’s Ministry of Health and Human Services, launched #SomaliaResponds, an individual giving campaign to raise funds for needed supplies to save lives and curb the spread of COVID-19 in Somalia.

All proceeds will support the De Martino Hospital and other health facilities responding to COVID-19 in Somalia with the following items:
- Medicines
- Laboratory equipment
- COVID-19 testing equipment and accessories
- Personal Protective Equipment
- Biomedical Equipment for COVID-19 Case Management (ventilators, oxygen concentrators and others)
- Human resources
- Ambulances

Visit the following website to join the #SomaliaResponds campaign:
As of 10 May 2020

For more information contact Programme Support Unit: iomsomaliapsu@iom.int

Not to be disseminated further without prior IOM approval. iom.int/countries/somalia

* For the purpose of reporting, Elayo and Bossaso are considered as one FMP. In total, IOM supports 7 flow monitoring points.
PROGRAMME UPDATES

In coordination and partnership with relevant actors at the national, regional and global levels, IOM will contribute to the overall objective of the National Preparedness and Response Plan for COVID-19, UN COVID-19 Country Preparedness and Response Plan (CPRP), as well as the IOM and WHO Global Strategic Preparedness and Response Plans to halt further transmission of COVID-19, and mitigate the impact of the outbreak, including the socio-economic impact. To ensure that IDPs, migrants, communities in hard to reach locations, returnees and vulnerable populations are assisted, IOM will build its response on existing partnerships with relevant actors at global, regional, national and sub-national levels. IOM will address cross-cutting humanitarian and development needs through expansion of its programmes designed to engage directly with communities.

During this reporting period, IOM handed over Personal Protection Equipment, including thermometers, gloves, face masks, gowns and disinfectants, to the Ministry of Health in South West State, to be used by staff screening at PoEs, while oxygen concentrators were delivered to be used at a referral isolation unit. IOM continued its awareness-raising activities among IDPs and migrant communities. Support at Points of Entry (PoEs) continued in Doloow, Dhobley and Hudur. Furthermore, at seven Flow Monitoring Points across the border, IOM reached 1,671 people entering and exiting Somalia with COVID-19 awareness information.

IDPs reached:

293 INDIVIDUALS reached in Doolow
including 12 IDP leaders
Indirect beneficiaries: 3,383

79 INDIVIDUALS reached in Kismayo
Indirect beneficiaries: 8,286

330 INDIVIDUALS reached in Baidoa
including 100 IDP leaders
Indirect beneficiaries: 16,578

Joint activities of CCCM, MHD and WASH

CAMP COORDINATION AND CAMP MANAGEMENT CLUSTER (CCCM)

CCCM cluster finalized and presented the Risk Communication and Community Engagement (RCCE) Assessment findings to the Inter-Cluster Coordination Group (ICCG), RCCE Taskforce, Health Cluster and RCCE Roundtable.

IOM team continued to disseminate information to ensure IDPs are aware of the risks, signs and symptoms and mode of transmissions of COVID-19 and know the appropriate mitigation measure to reduce the risks. Awareness raising sessions were conducted at the information centres, marketplaces or during community meetings, with a highlight on how to practice social distancing.

CCCM continues to conduct trainings on COVID-19 prevention to different stakeholders

FRONTLINE STAFF
IDP COMMISSION
LOCAL NGO STAFF
SITE LEADERS

In coordination with:

HEALTH CLUSTER  MINISTRY OF HEALTH
WHO  PARTNERS  IDP LEADERS
IDP COMMISSION OFFICES
IDP GROUPS & COMMITTEES
IOM continued its community mobilization and sensitization sessions on good community hygiene and sanitation practices to IDP community leaders in coordination with MHD and CCCM. At the Point of Entry in Wajale, along the Somali-Ethiopian border, six health professionals were trained on how to conduct COVID-19 awareness campaigns.

**WATER, SANITATION & HYGIENE (WASH)**

IOM continues to provide direct assistance to stranded Ethiopian migrants in in Bossaso and Hargeisa through Migration Response Centers (MRCs). Both centers continued to provide essential services, including health assistance, Psychosocial support and provision of Non Food Items (NFIs).

- **150 HOUSEHOLDS** provided with **HYGIENE KITS AND SOAP** in Dhobley
- **3,052 HOUSEHOLDS** reached with **HYGIENE PROMOTION** activities in Jubaland and South West State
- **2 RADIO STATIONS** in South West State aired on **COVID-19 hygiene information**
- **10 HANDWASHING POINTS** installed in Baidoa

**MIGRATION HEALTH DIVISION (MHD)**

IOM and the Ministry of Health, through 40 health facilities, continued to screen patients for COVID-19 symptoms and to conduct awareness sessions about COVID-19 preventive measures. In South West State (SWS), IOM donated Personal Protection Equipment (PPEs) to the South West State Ministry of Health in Baidoa, for staff working at Points of Entries.

- **1,400 PEOPLE** entering Dhobley from Ethiopia were screened at PoEs.
- **914 PEOPLE** entering Doolow from Ethiopia were screened at PoEs.
  - No suspected cases were recorded
  - *IOM also screens at Hudur PoE. No new entries during the reporting period.

- **12 HEALTH WORKERS** were trained on COVID-19 preparedness and prevention in Huluul Health Centre, Sanag

**COVID-19 awareness raising sessions in health facilities and IDP sites reached:**

- **519** through **HUDUR STATIC CLINIC**
- **477** through **HUDUR MOBILE TEAM**
- **860** in **DHOBLEY**
- **437** in **DOOLOW Qansaxley Health Center**
- **362** in **DOOLOW Kabasa Health Centre**
- **20** in **DIGAALE**
- **648** in **BARDHERE**

Activities are closely coordinated with the Ministries of Health at Federal and Member State level and with local authorities.

**MIGRANT PROTECTION AND ASSISTANCE (MPA)**

IOM continues to provide direct assistance to stranded Ethiopian migrants in in Bossaso and Hargeisa through Migration Response Centers (MRCs). Both centers continued to provide essential services, including health assistance, Psychosocial support and provision of Non Food Items (NFIs).

In Bossaso, in two informal settlements hosting stranded Ethiopian migrants, MPA has conducted a water distribution reaching 300 migrants in need.
MIDA HEALTH EXPERTS IN SOMALIA

Through IOM’s Migration for Development in Africa (MIDA) programme, health advisors are contributing to the COVID-19 preparedness and response. The Laboratory advisor attached to Hargeisa General Hospital, is working closely with the Ministry of Health Development in the installation of the recent PCR extraction system, a system required to do COVID-19 testing, and training teams on proper COVID-19 testing. The advisor also planned trainings for regional laboratory technicians on how to screen and swab patients for COVID-19.

A health advisor attached to the Ministry of Health Development in Hargeisa, Somaliland and a medical consultant based in Buroa participated in two separate TV programmes organized by Somaliland National Television to discuss COVID-19 risk communication messages and socio-economic impacts.

DISPLACEMENT TRACKING MATRIX (DTM)

IOM continues to raise awareness among migrants crossing the border at seven Flow Monitoring Points (FMPs). During the reporting period, 2,964 people, entering and exiting Somalia, were reached. 61 per cent reported not to be aware of COVID-19.

<table>
<thead>
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<th>FMP</th>
<th>INCOMING</th>
<th>OUTGOING</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bossaso</td>
<td>509</td>
<td>83</td>
<td>592</td>
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<tr>
<td>Buuhoodle</td>
<td>78</td>
<td>16</td>
<td>94</td>
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<tr>
<td>Cabduwaq</td>
<td>707</td>
<td>0</td>
<td>707</td>
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<tr>
<td>Harirad</td>
<td>315</td>
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<tr>
<td>Lowyacado</td>
<td>120</td>
<td>105</td>
<td>225</td>
</tr>
<tr>
<td>Dhobleay</td>
<td>218</td>
<td>203</td>
<td>421</td>
</tr>
<tr>
<td>Doolow</td>
<td>262</td>
<td>123</td>
<td>385</td>
</tr>
<tr>
<td><strong>GRAND TOTAL</strong></td>
<td><strong>2,209</strong></td>
<td><strong>530</strong></td>
<td><strong>2,739</strong></td>
</tr>
</tbody>
</table>

RECOVERY AND DURABLE SOLUTIONS (RDS)

Under Midnimo II project, IOM continued the preparation for the awareness-raising campaign on COVID-19 in Jowhar (Hirshabelle) and Abudwaq (Galmudug). The facilitators of the campaigns are selected and will be trained soon. Furthermore, the rehabilitation of the Cawagale borehole in Abudwaq, which will benefit three IDP sites, is almost finalized. Having access to clean water is crucial to prevent the spread of COVID-19.

In order to mitigate potential conflict and violence associated with the spread of COVID-19 in Somalia, IOM repurposed its EU Peace and Stability (EU IcSP) funds to relevant ‘Strategic Response Areas’ highlighted by the Federal Government of Somalia in the Somalia National COVID-19 Preparedness and Response Plan. The objective is to harness established stabilization networks and operations that are either ongoing or in which IOM has recently intervened, to tackle the spread of the disease in the anticipated urban epicenters of the present target states: Kismayo in Jubaland, Afgoye and Baidoa in South West State. It is critical that the existing health system remains operational and with sufficient capacity to contain COVID-19 to maintain public confidence in the government’s ability to contain the epidemic. Any significant shock in these locations will reverberate outwards and severely deteriorate the stabilization gains made in recent years, allowing al-Shabaab to exploit weaknesses in the most vulnerable areas of Somalia.
A DONATION OF MEDICAL SUPPLIES ARRIVES TO BAIDOA THANKS TO CERF FUNDING

IOM Somalia through CERF funding handed over personal protective equipment (PPEs) and health supplies including oxygen concentrators to the South West State (SWS) Ministry of Health in Baidoa, Somalia. The donation comes at a much needed time as COVID-19 cases are rapidly increasing across the country. They will be used at isolation facilities and Points of Entry (PoEs).

IOM GLOBAL INITIATIVES

The current outbreak of COVID-19 has affected global mobility in the form of various travel disruptions, restrictions and blockages. To better understand how COVID-19 affects global mobility, the International Organization for Migration (IOM) has been working to map the impacts on human mobility, at Global, Regional and Country level. Subsequently, the IOM globally have initiated the following activities:

- COVID 19 Travel Restriction Monitoring;
- COVID 19 Country Points of Entry (POE) Status Baseline Assessment.

The different products (Interactive Dashboards, Reports, Static Maps, Databases), along with the different methodologies can be found here.

The data from Somalia is based on input provided by IOM Somalia’s DTM team.

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Find out latest updates on COVID-19 response through IOM Somalia twitter and facebook