

PILOT FEEDBACK: SOMALIA

EXECUTIVE SUMMARY

This report provides an in depth summary of the first pilot shipment of Clean Birthing Kits to Somalia. It will begin by providing a description of the political and social context of Somalia, outlining the numerous challenges that the Somali health care system faces in providing good quality maternal and child health care. It will then outline the health strategies and goals of World Vision Somalia and how Birthing Kits help to achieve these goals.

The report also contains a detailed summary of the two projects that the Clean Birthing Kits have been integrated into called “Health, WASH, and Protection Engagement in Baidoa” and “Wash, Health, Agriculture, and Economic Recovery Intervention in Somalia” or “WHAERIS”. These project descriptions also outline the indicators that will be used to measure the impact of the Clean Birthing Kits. Lastly, the report will illustrate the positive feedback that has been received about the pilot shipment of Birthing Kits. These results illustrate that the delivery of CBKs to Southern Somalia will be highly impactful in an area marred by political instability and fighting. The feedback from the pilot shipment shows that the Birthing Kits have primarily been used in home births as the region is often under curfew, making it impossible for women to travel to health centres. While the pilot shipment was only conducted in two of the four areas where CBKs will be sent after the pilot phase, it is expected that the positive results will be extrapolated and that Clean Birthing Kits will be highly impactful in the Somali context.

“These birthing kits are an integral part of the ongoing projects in Somalia aimed at strengthening the health system, and community knowledge into the future. They provide a critical link between the clinic and the mother, allowing her to feel valued with tangible benefits, and therefore more likely to attend the clinic for antenatal check-ups, birth registration, vaccinations and assistance when her baby is sick.”

-Feedback from World Vision Somalia



SOMALIA OVERVIEW

Somalia is located in the horn of Africa with a population of 9.8 million. Considered a fragile state, Somalia is divided up into four main parts: Somaliland, Puntland, central Somalia, and Southern Somalia. Southern Somalia is home to a majority of the fighting and instability and is where the Clean Birthing Kits have been distributed. Cyclical climatic extremes coupled with political instability and human rights violation have depleted the ability of the country's most vulnerable to cope.

Somalia has remained in conflict for 25 years, which has, coupled with recurrent droughts. Over 1.1 million people are internally displaced; the majority of these are settled in, or around the main urban centres in Somalia. Over 4.7 million people in Somalia are in need of humanitarian assistance. IDPs are the single largest population group in crisis in Somalia.

In Southern Somalia, where the CBKs have been distributed, there is currently ongoing waves of displaced people fleeing violence and conflict in regional hubs where the Somali Army is fighting terrorist group Al-Shabaab, this is especially pronounced in Baidoa. In Luuq, sporadic fighting between various parties has at times restricted the flow of food and other basic items, which in turn has increased food prices and the cost of living.

Over 90% of Somali girls undergo Genital Mutilation (FGM). Somali women are most often not accorded fair treatment, have limited access to justice and their rights are often violated. Early marriages and teen pregnancies are common. Women are further placed at risk of violence when trying to gain access to food, water, and sanitation due to widespread impunity of armed groups, insecurity and violence. In addition to the lack of educational opportunities for girls, early marriages are associated physical and psychological damages continue to severely erode girl's rights.

Health Overview

UNDP ranks Somalia at the bottom of countries worldwide in all health indicators except life expectancy (51 years). The maternal mortality rate is one of the highest in the world, with 850 deaths per 100,000 live births. Antepartum and post-partum haemorrhage remain the leading drivers of the high maternal mortality rates witnessed in Somalia with Neonatal infections contributing to >30% of neonatal deaths. 4 visit ANC utilization is at 6% with utilization of skilled midwifery services at 9%

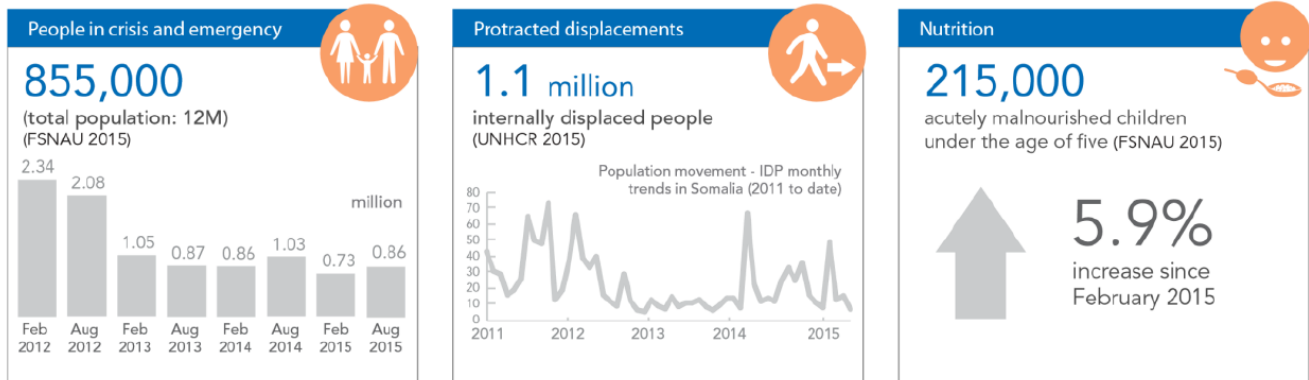
Prematurity and neonatal infections contribute towards 10% and 4% respectively of Under 5 mortalities. Somalia faces a critical shortage of health work force capacity; a Somalia Health Workforce assessment in South and Central Somalia reported that there are 6,300 doctors, nurses and qualified midwives for a population of over 5 million in the South Central Zone, which is well below the WHO recommended patient /health worker ratio of 23 doctors, nurses and midwives per 10 000 people.

Across South Central Region, the gap in health and nutrition services remains large due to prolonged conflict and a very weak central government. Surveys show that the main reasons for low access to basic health services include insecurity and the long distances that must be travelled to reach health posts.

Access to basic healthcare in South Central Somalia worsened following the withdrawal of Medicins San Frontieres from Somalia in September 2013 and the subsequent closing of all of its clinics and hospitals in the impoverished country. The health cluster estimates that the withdrawal of Medicins San Frontieres from Somalia affected the health services of one million people across nine regions. Additionally, the ban on humanitarian agencies by has in 2010 resulted in the closure of many health posts as agencies were forced to withdraw their health activities.

Since this time, there have been significant stock outs of essential supplies at most of the health facilities thereby limiting their ability to respond timely, to provide the necessary medical care thereby unable to prevent further loss of lives due to manageable diseases.

The 2016 Humanitarian Needs overview raised concern over the lack of access to emergency health support with reproductive health being at significant threat due to the high fertility rates observed (6.6 per woman), with the limited funding stream for the health sector a worrying trend.



WORLD VISION SOMALIA HEALTH STRATEGY

World Vision has worked in Somalia since 1993. The primary aim of the WV Somalia office is to increase access to quality and affordable primary health care with an emphasis on children, women and other vulnerable community members, as well as reduce malnutrition among children under the age of five and women of childbearing age. World Vision Somalia's primary goal for the FY 2016- FY 2020 is to contribute to the enhancement, resilience and well-being of 2 million children and their communities through "Peace, Opportunity and Protection". Key sectors in the strategy include health, nutrition and WASH; livelihoods and food security, education and child protection

In response to the increasing humanitarian needs of the Somali people, World Vision designs and delivers programs coordinated at regional and country levels by dedicated staff that provides strategic and operational support. Our program offices are located close to communities so that our teams can be responsive to the needs of children and their families. World Vision is committed to working with communities from emergency through to rehabilitative programming in order to bring about sustainable and long-term change over the coming years.

Specific Health Objectives in Somalia related to Maternal Health:

- To increase access to quality and affordable primary healthcare with emphasis being put on children, women and other vulnerable community members
- To increase child survival and healthy development of children to adulthood
- To reduce levels of severe and moderate malnutrition among children under age five and women of childbearing age

Key Program Interventions

- Maternal health care services (Prenatal and postnatal care, clean delivery and referral of complicated cases)
- Preventing and combating specific, communicable, non-communicable and avoidable childhood illnesses through child, women and general immunization campaigns, health education and administration of essential micro-nutrients

- Promote and provide early child development and nutritional services
- Strengthen support for parents and caregivers
- Works with other partners to improve access to high-quality primary health care, nutrition and social services for children, young people, women and men.
- Outpatient consultations
- Strengthening health care systems and infrastructure
- Screening and treatment of malnourished children



LONG TERM STRATEGIC GOALS

World Vision is committed to the world's most vulnerable people in remote and fragile settings like Somalia. The communities World Vision work with often lack access to the most basic health resources. It is in these contexts where Clean Birthing Kits have the highest impact. Miles away from electricity, clean water and trained doctors, our partnership combines essential resources and World Vision's network of trained community health workers to ensure that education and opportunity for a safe birth is available.

In Somalia, like all other contexts, Birthing Kits have been integrated into existing Maternal and Child Health Projects called "Wash, Health, Agriculture, and Economic Recovery Intervention in Somalia" or "WHAERIS" and "Health, Wash, and Protection Engagement in Baidoa". This approach reflects our commitment to holistic development, as World Vision view Birthing Kits as part of a solution to a much broader maternal and child health problem, which World Vision aim to address in a multifaceted manner. Rather than simply distributing Clean Birthing Kits to a wide variety of locations, World Vision prefer to take a targeted approach to the most disadvantaged areas.

PILOT RESULTS

120 Clean Birthing Kits have been distributed in Baidoa and Wajid into 2 main WV projects - "Wash, Health, Agriculture, and Economic Recovery Intervention in Somalia" or "WHAERIS" and "Health, Wash, and Protection Engagement in Baidoa", with positive feedback from each location.

- To view these locations please go to this link:

<https://www.google.com/maps/d/u/0/edit?mid=1rTPtRmSccK2DWXqtO-6DJFM3pMg>

Although the Pilot only operated in 2 areas, it extend this to four areas in subsequent shipment and it is expected the similar positive results will be extrapolated.

Baidoa

- World Vision Somalia currently supports four Maternal and Child Health Centres in Baidoa- these centres contain maternity units to facilitate skilled deliveries
- The Clean Birthing Kits, however, have mainly been used for home deliveries. They have been distributed to women who reside in remote locations and are not able to reach the Maternal Child Health Centres for skilled delivery assistance because of security concerns and curfews enforced by the militia or the AMISOM wing of peace keepers.
- In the "Health, WASH, and Protection Engagement in Baidoa" project in Baidoa 200 Kits are distributed on a monthly basis.
- Within this project reporting on Birthing Kits relate directly to the following indicators that are built into the program design:
 - ✓ The proportion of women who are accessing comprehensive antenatal care.
 - ✓ The proportion of pregnant women who receive Clean Birthing Kits.
 - ✓ The proportion of deliveries assisted by a skilled midwife, either at the beneficiary's home or at a clinic.

Wajiid

- In Wajiid the Clean Birthing Kits have been integrated into the WHAERIS project. The kits have been distributed through a maternity unit that has been set up in conjunction with this project along with regular outreaches to remote locations by World Visions Community Health Workers. In the maternity unit, the communities are able to access curative services as well as preventive services like, treatment of communicable diseases, EPI and reproductive health. Health interventions in these facilities are implemented through the MoH and have been linked with community health structures through community health workers/ promoters in order to increase coverage of certain services and to provide health promotion information to communities. WV contributed to this outreach and structure through capacity building which facilitated Integrated Community Case management (ICCM) of common ailments that are easily manageable.
- The Clean Birthing Kits have been primarily be used by women who come from remote locations. These remote parts of Wajiid are still partially under siege with restricted movements and occasional curfews. The kits then enable the women to have a hygienic delivery at home.
- Within this project reporting is based on the following indicators:
 - ✓ The proportion of women who benefit from comprehensive ante natal care.
 - ✓ The proportion of pregnant women that received CBKs.
 - ✓ The proportion of deliveries assisted by skilled midwife, either at the beneficiary's home or at a clinic.

General Feedback

Women are extremely grateful for the Clean Birthing Kits. World Vision Somalia has distributed other Clean Birthing Kits in the past which has meant women have come to understand the importance of the CBK, how to use each item and why each item is important as part of a broader birth preparedness plan. These birthing kits are an integral part of the ongoing projects in Somalia aimed at strengthening the health system, and community knowledge into the future. They provide a critical link between the clinic and the mother, allowing her to feel valued with tangible benefits, and therefore more likely to attend the clinic for antenatal check-ups, birth registration, vaccinations and assistance when her baby is sick.

The locations in Southern Somalia where the Clean Birthing Kits have been distributed are prone to security threats and subsequently curfews. Women are thankful for the Clean Birthing Kits as in times of restricted movements, caused by the militia or the AMISOM wing of peace keepers, they still have an opportunity for a clean birth. Further, the Kits are small enough to conceal making the women feel safer when travelling with them.

ACKNOWLEDGEMENTS

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