



# SAMOFAL

## Solidarity in Crisis

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Somalia Country Office

# UNFPA continues fistula campaign.

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In its global fight to eradicate fistula, UNFPA in collaboration with the Ministry of Health in Somaliland and in Puntland initiated fistula management campaigns in 2007. Fistula management became one of the annual activities in UNFPA programs. The management sites in Somalia are Galkayo Medical Center in Puntland and the National Fistula Hospital in Borama, Somaliland. Cases are reported to those two centers from all parts of Somalia as well as from neighboring Ethiopia.

In November 2011 the Ministry of Health in Somaliland opened a campaign in Borama Fistula Center. Besides the 80 cases operated there already by December, one doctor from Bossaso hospital undergone practical training on fistula management with the technical team in Borama. The same doctor from Bossaso undertook an eight weeks training in Kenya early 2011.

In Puntland 41 cases were operated in Galkayo Medical Center. Almost two thirds of the patients came from South Central Somalia, especially from the Mogadishu region. Cases were identified by NGOs working in those areas and supported by UNFPA to report to Galkayo Medical Center. The costs of the campaign were totally covered by UNFPA.

18 - year old Nimo Mohamoud said she will wait five years with having another baby, just to make sure she is fine again, after having undergone a fistula operation at the National Fistula Hospital in Borama.

Obstetric fistula, one of the most devastating childbirth injuries, is caused by the lack of skilled birth attendant and access to emergency care during delivery. It is a highly stigmatizing, though in most cases treatable condition that results from prolonged, obstetric labor and cases chronic incontinence.

The Somaliland campaign which is part of a larger global campaign, addresses all aspects of obstetric fistula, from prevention and treatment to social reintegration of woman recovering from treatment.

UNFPA together with Direct Relief International and The Fistula Foundation launched in February the first ever global map of available services for woman living with obstetric fistula. The release of the Global Fistula Map is a major step forward in understanding the landscape of worldwide treatment capacity for obstetric fistula and will help streamline the allocation of resources and raise awareness of the condition.

Link to the Global Fistula Map can be found on our website, <http://somalia.unfpa.org>.

Read more on page 6.

# Accelerating change

- It is a great honor to welcome you, said UNFPA Deputy Representative Rogaia Abdelrahim when she opened one of the four conferences held on the 6 of February to commemorate the International Day of Zero Tolerance of Female Genital Mutilation/Cutting.

- Every year over three million girls and women - or some 8000 girls each day - face the risk of genital mutilation and cutting. Worldwide 100 to 140 millions have already undergone female genital mutilation /cutting. It has become a global problem requiring immediate and targeted solutions. Somalia is no exceptions, said Abdelrahim.

While Somalia still has one of the highest prevalence of FGM/C in the world, an estimated proportion of people that are now aware of the harmful effects through awareness campaigns is higher than ever. The issue of abandonment has expanded and become integrated into reproductive health policies, planning and programming during the last year. Two decrees outlawing all form of FGM/C in Puntland and Somaliland has been developed. In Puntland the decree was approved by the Cabinet but still awaits approval from the parliamentarians.

- Consultations are in progress with professional Nurses, Midwives and Doctors Associations to come up with a policy banning all forms of FGM/C among the members, said Abdelrahim.

In Somaliland the draft policy on eradicating FGM/C was presented during an event held in Hargeisa that same evening. A group of Ministers, women organizations, youth organizations, FGM/C exercisers, poets, religious leaders, media and NGO's attended the ceremony where the policy was presented in Somali and English language.

- Many people justify FGM/C with Islamic religion, but it has no religious grounds and should be abandoned. I promise that in collaboration with my government and the local community I will dare to stop FGM/C in Somaliland while I am in office, said the Minister of Religion Sheikh Khalil Abdi.

Somaliland Y-PEER network performed acrobatics play and drama for entertainment and awareness rising. Apart from that, each of the 250 participants received a well designed bag containing a T-shirt and Posters with marks of the event- Zero tolerance for FGM/C.

In Galkayo, over 60 persons attended the commemoration with invited guest speakers from Galmudug Authority, Women Focal Point and religious elders. The event was followed by radio debates regarding the consequences of FGM for during and after



Minister of Religion, Sheikh Khalil addressing the FGM/C Commemoration

the practice. The debate was presented with past experiences, and the pushing factors which encourages the practice.

UNFPA Garowe office with UN and NGO partners participated in a video conference with the Reproductive Health working group in Nairobi. The Ministry of Health and the Ministry of Women Development and Social Affairs they presented their activities on FGM/C in Puntland and focused on the FGM/C decree that stills needs the signature of the president.

Despite the challenging security situation in Mogadishu UNFPA managed to commemorate the Zero Tolerance Day by moving the event indoor, instead of marching outside. Around 100 persons attended the event where the Ministry of Women and Family Affairs and Sheikh Sharif Ibrahim was some of the honorable guests. The event was widely covered in Somali radio and television.

-Despite some success, the overall rate of decline in the prevalence of FGM/C has been slow. It is therefore a global imperative to strengthen the work for elimination of this harmful practice, which is essential for reaching many of the Millennium Development Goals, said UNFPA Dep. Rep. Rogaia Abdelrahim at the end of her opening speech.

Seen from a human rights perspective, the practice reflects deep-rooted inequality between the sexes, and constitutes an extreme form of discrimination against women. FGM/C is nearly always carried out on minors and is therefore a violation of the right of child.

## FGM/C Campaign in Sanaag



Forum discussions on Female Genital Mutilation/Cutting were held in Hingalol town in Sanaag region at the 18th November. The reason was to enlighten the community about the risks of FGM/C practices from three different angels. First, FGM/C puts girls and women at risk of life threatening complications at the time of the procedure as well as health problems that remain with them for life. Secondly, FGM/C is wrongly believed to be an Islamic religious requirement. This is not the case. The Quran does not allow it. And at last, FGM/C should be abandoned because it is a violation of fundamental human rights. This will support the community's participation in enhancing practical FGM abandonment in the future. Some participants were selected to be trained as Task force members for FGM/C Abandonment.

## Minimal Initial Service Package training



40 Health workers from Maternal Child Health services (MCH) and hospitals from all over Puntland and South Central zones were trained on the Minimum Initial Service Package (MISP) in two different sessions. One was held in Galkayo from the 12th to the 16th November, and the other one in Bossaso from the 20th to the 24th November. The five days training course covered several components of MISP program in the IDP camps, like antenatal care, care of a newborn, delivery, gender based violence, reducing HIV/AIDS, infection control and problems resulting from rape, fistula, and how improve referral system to qualified medical emergency team during emergency.

## Sexual Transmitted Infection training in Puntland

14 health workers from Puntland were trained in the period from 30th November to 13th December in Syndromic Case Management (SCM) of Sexually Transmitted Infections (STI). The participants were trained on how to offer treatment on the patient's first visit, in order to help prevent the further spread of STIs. It also involved education of the patient about the infection and how STIs are transmitted. There were also a session of risky sexual behavior and how to reduce the risks, partner management and the provision of condoms.



## Annual review of 2011



In the period 21st - 23rd December, UNFPA South Central Sub office organized in Nairobi its Annual Review meeting and 2012 planning with the implementing partners. About 25 implementing partners from the Reproductive Health sub-cluster and 9 partners from the Gender Based Violence sub-cluster. During the meeting, the participants reported on their achievements, challenges and recommendation in implementing the UNFPA projects. Similarly, they agreement was reached on the overall strategy and particular activities for 2012 planning.

## Family planning training in Puntland

From 27th November to 2nd December, UNFPA and the Ministry of Health in Puntland conducted Family Planning counselling and service provision training for 20 health workers in Garowe. The objective was to build the capacity of health workers to provide information counselling and services to their clients. The training improved the understanding of the participants on various family planning methods. Equally, it increased their understanding of other aspects of reproductive health, including safe motherhood, Sexual Transmitted Infections (STI) and Gender Based Violence (GBV).



## Extensive training of Midwives

On the 21st January UNFPA started training of 13 midwives from South Central Zone at Galkayo Medical Center. The training focuses on Basic Emergency Obstetric Care (Bemoc). The aim of the training was to strengthen the capacity of the midwives in South Central Zone and this was the third type of Bemoc training that has been conducted last year.

The Bemoc training ended with a graduation ceremony on the 2nd of February. The midwives received seven days of extensive practical theory lessons, and the later seven days was reserved to put into practice the lessons they've learned during the week.

The midwives were given the chance to do deliveries, and see the cesarean-section, and other complicated deliveries in the maternity ward. Shifts were allocated to be able to give chance to each and every midwife.

- The training was very good refresher training, and we attended fistula operations with the doctor, and had ample opportunity to interact with the doctor and get help with some problems I came across with, said Cibaado who is an experience midwife, trained by the former Ministry of Health back in 1984.

- The doctor has promised to be in touch all the time, and we'll still keep him in touch and consult with him though we are a bit far away, she said. Then, she thanked UNFPA for giving her this opportunity.

UNFPA Somalia Office is planning to capacitate the midwives through training, forums for discussing the challenges they face, and the way forward. Every quarter, UNFPA arranges a follow up meeting with the trained midwives and doctors to report on the achievements and challenges faced by them during the interval. Then the hospitals and midwives are given Reproductive Health kits based according to the need and the population of that particular area.



Practical and Theoretical training during Basic Emergency Obstetric Care course at Galkayo medical center.

## Commemoration of the World Aids Day



The UNFPA Youth program commemorated the World Aids Day in Somaliland. Approximately 100 members of the Y-Peer network with T-shirts and banners marched through the streets of Hargeisa that day. A HIV/AIDS club created by Y-Peer, arranged awareness campaign in Gandhi secondary schools in Hargeisa and Ardaale secondary School in Borama.

## Handed over ambulance to the **government**

**U**NFPA Somalia donated one hard top land cruiser ambulance to the Ministry of Health in Somaliland as part of its efforts to improve maternal health.

- UNFPA will continue working with the Ministry of Health towards achieving MDGs 4 and 5 and we hope that this donation of ambulances will go a long way in reducing the second delay to maternal health in the remote districts, said Salada Robleh, Officer-in-charge at the Hargeisa sub-office.



*Officer-in-charge, Salada Robleh handed over the keys to the minister of health, Dr. Hussein Muhumed Mohamed.*

The minister of health, Dr. Hussein Muhumed Mohamed welcomed the donation saying that many hospitals are facing transport challenges. He highlighted the criticality of transport in reducing maternal mortality.

- The challenges in transporting pregnant women to district or central hospitals in emergency cases have contributed to high maternal deaths as well as fistula cases. He continued saying that the percentage of deliveries attended by trained birth attendants are very low and because of this appalling state of maternal health services, obstetric fistula is common in Somaliland.

In his speech Dr. Hussein narrated the work of UNFPA starting from the Community Midwife training and post basic midwife trainings, the procurement and distribution of Reproductive Health kits, the training of the doctors and he praised the partnership and long standing relationship between UNFPA and the Ministry of Health, in particular towards addressing millennium development goals 4 and 5.

-The partnership and consultative nature of the relationship ensures that UNFPA's support addresses the actual and critical needs within the Ministry, he said.

## **Y-Peer Training of Trainers in Hargeisa.**

UNFPA Somalia Country Office together with the Arab State Regional Office organized a Training of Trainers workshop of Peer Educators on Youth Sexual and Reproductive Health in Humanitarian Setting. The training benefitted 17 young people, 7 females and 10 males, from Hargeisa, Puntland and the South Central Zone.

The training tackled youth relevant issues such as youth participation, self esteem, female genital mutilation/cutting, gender based violence, HIV/AIDS and family planning. The training aimed at the capacity building of the selected participants to develop and deliver peer education programs addressing the needs of young internally displaced people (IDP). The trainers are expected to start the roll out of the peer education training in five IDP camps in the beginning of 2012.

## FGM Awareness campaign

- I have experienced a lot of girls and mothers who are victims of female genital mutilation and cutting, says Mrs. Fatuma, a midwife and a circumciser with many years of experience. She was participating in discussion forums about female genital mutilation and cutting (FGM/C) held in camps for internally displaced persons (IDP) in Garowe region. There she shared her knowledge and the difficulties she experienced during her job.

Around 240 IDP's and host population participated in the discussions forums held in Shabelle camp, Silica camp and in Hiraan camp. The goal of the discussion was to obtain relevant and adequate idea on knowledge, attitude, perceptions, beliefs and practices, associated with FGM/C and to spread the information beyond the walls of the classroom and into families, communities, and regions.

- I have benefitted from the discussion forum, but inside me I am mourning. I want to seek forgiveness from the generations I have circumcised because it was out of ignorance. We never heard such helpful information before. I thank those who showed us the light, she said.



# UNFPA continues nation

-I can't control it and I have to go to the toilet all the time. Life has been very difficult, says 25 years old Ajan Jhama from the hospital bed. But at this moment she just feels pain from the operation.

- I hope it was successful and I can go back to normal. She's been operated that morning by Dr. Ibrahim Qaw and his team of doctors and nurses at the National Fistula Hospital in Borama.

### Obstetric labor

-I had no problems when I delivered my first born, says Ajan. But when I was about to deliver my second one I got obstructed labor. I thought the baby was dead she says and looks down at her healthy boy Mohammed who is being nursed by the staff while she is hospitalized. But during her delivery she paid a high price, and developed fistula, which often are the result of trauma during childbirth in situation where there is inadequate health care.

-There is more than fifty percent chance that she will be fully cured, says Dr. Qaw who runs the hospital which was opened in October 2008.

### Teaching hospital

It has 35 beds and a staffing of 13 people, where about a half of them work there as volunteers either as nurses or community midwives. The hospital have four doctors, and two who are there for training.

-During the operations we also act as a teaching hospital, and have medical students and nursing students to attend and learn, said Dr. Qaw. The hospital will now be implementing partner for UNFPA national Fistula Campaign which was officially opened 20th November by the Ministry of Health. UNFPA covers the costs of the operation and the transport to the hospital.



Farhia Mohamoud Wardhere A fistula patient from Mogadishu recuperating in the ward at Galkayo Medical center after surgery.

# nal fistula campaign.



*Dr. Ibrahim Qaw visiting his patient Ajan Jhama at Borama National Fistula Hospital*

## Valuable contribution

-This is a very important hospital for all Somali speaking people. Child bearing health issues are very important for the government. It affects first of all the woman, but also their husband, and the surrounding community like relatives and neighbors. We are very grateful for the valuable contribution from the United Nations Population Fund (UNFPA) to the government. This will assist us in eradicate all cases of fistula. This campaign that UNFPA started will continue until there are more cases, said Director General Abdi Ahmed Nour from the Ministry of Health during the opening ceremony.

## Successful operation

18 years old Nimo Mohamoud has already benefitted from the program and is now recovering on the hospital bed. She travelled from Gargera region to Dr. Qaw and his team of specialists in Borama.

- One and a half months ago I lost my baby more than seven months into the pregnancy, she explains. After that she got fistula.

- I tried to stay far away from people because I could not control urinating. It was difficult because of the smell, she recalls. Her operation was successful.

- Now I can go to the toilet when I feel the need, she says and smiles. She hopes she will be fine in the future also but says she want to wait up to five years having another baby.

-I want to be shore that everything is fine again, she said.

## Working as volunteer

Hibo Noon Sikad got her life changed when she met Dr. Qaw. 18 years ago she came to this world, born with fistula.

- In my first years I thought that everything was normal because my mother used to care for me, and I thought it



*Meeting Dr. Qaw changed Hibo's life*

was normal. But when I grew older I noticed that something was wrong, she says.

-I have never played with other kids during my childhood. I was always alone and never had the chance to go to any school, she says while felling some tears. Doctor Qaw explains that she was born with fistula, and she was only ten years old when he operated her the first time.

-Since then we have done three more surgeries, and now she is fine. But after a lost childhood she has a lot to catch up on, so now she stays here at the hospital, working as a volunteer, helping me with the operation of the hospital, says Qaw.

- I hope I can go to school and do the midwife training with a UNFPA scholarship, says Hiba when asked about her future aspirations.

## Distributed Clean Delivery Kits

In mid-January, one of the UNFPA partners in South Central Zone, the Somali Birth Attendance Cooperative Organization (SBACO) implemented the distribution of Clean Delivery Kits to pregnant women in several camps for Internally Displaced Persons (IDP's) in areas around the city of Galkayo.

In all, 283 clean delivery kits were delivered to 283 pregnant women, all ranging from six to nine months pregnancy, in 14 different IDP camps.

In addition, according to SBACO, they have documented 154 cases of deliveries. Eight cases of complicated deliveries were referred to Galkayo Medical Center for further medical support. Antenatal care for were given for 862 mothers.



*Internally Displaced People (IDP) in Galkayo received Clean Delivery Kits from UNFPA.*

## Pregnancy risk training in Puntland

With the support of UNFPA, the Ministry of Health in Puntland, organised from the 7th to 12th November a pregnancy risk training. 25 female health workers participated in the workshop which focused on birth planning and good health seeking behaviour and also normal and abnormal signs and symptoms of pregnancy. The training took place in Garowe and covered key components of basic communication skills, counselling and negotiations on maternal and newborn health behaviour.



## Making obstetric care available

In mid-November UNFPA Galkayo office arranged two weeks with Basic Emergency Obstetric Care (BEMOC) training for 14 midwives from South Central Zone. An emphasis on making emergency obstetric care available to all women who develop complications is central to UNFPA's efforts to reduce maternal mortality. This is because all five of the major causes of maternal mortality, hemorrhage, sepsis, unsafe abortions, hypertensive disorders and obstructed labor, can be treated at a well-staffed and well-equipped health facility. In such settings, many newborns can also be saved. Another group of 14 midwives did the same training the following week.

UNFPA Galkayo office also conducted a three days training on Minimal Initial Service Package (MISP) in humanitarian setting in Garowe from 24th to 26th November. This was the second out of three such trainings held in Galkayo in 2011.



Group of midwives at the training

## Linking Sexual Reproductive Health and HIV/AIDS



A five day training workshop on UNFPA and WHO guidelines on linking Sexual Reproductive Health (SRH) and HIV/AIDS was conducted for 30 participants from IPTCS partners in Hargeisa between the 19th and the 23rd November. These were mainly program managers. The training intended to improve the comprehensive response to SRH and HIV/AIDS with better understanding of the bidirectional linkage between SRH and HIV/AIDS.

## Bemoc Garowe November

With the support of UNFPA, the Ministry of Health in Garowe organized a two weeks Basic emergency obstetric care training (BEMOC) for five health workers from the 12th - 26th November. Two nurses and three midwives from Maternal Child Health (MCH) services and hospitals were given a five days classroom sessions, and nine days practical training in Garowe hospital, Waberi and Gambol MCHs. The objective of the training was to build the capacity of the health care providers, and to improve quality of care for the mother and the child during pregnancy, labor and postpartum.



# Supporting displaced mothers

As part of the emergency response, UNFPA Somalia in partnership with two local NGOs, Somalia Birth Attendants Cooperative Organisation (SBACO), and Hadia Hospital, established 13 Maternity Waiting Homes (MWH) in settlements for Internally Displaced People (IDP) in Mudug and Galgadud regions. Each maternity waiting home is located at IDP settlement and equipped with the necessary equipment for normal delivery.

The MWH is run by one trained skilled midwife who received two Basic Emergency Obstetric Care (BEMOC) trainings before starting the work, and she is assisted by a Traditional Birth Attendant (TBA), whose role is to mobilize and register pregnant women at the IDP camps and refer them to the MWH. Importantly, three doctors, trained for one month on Comprehensive Emergency Obstetric Care (CEMOC) supervise the work of the midwives, and refer the complicated cases to the referral hospitals. As per December, a total of 665 women delivered safely, 611 benefitted from antenatal care and 640 Clean Delivery kits were distributed in Mudug region since the start of the project in September.



Pregnant woman at the Maternity Waiting Home Halabokad IDP settlement in Galkayo.

## Clinical Management of Rape training



Group photo of participants.

23 nurses from MCH's in Banadir region and Mogadishu were given training in Clinical Management of Rape in mid- November, as a response to an increase in Gender Based Violence (GBV) cases in Mogadishu. This was the first time that members from the GBV Working Group in Mogadishu participated on this kind of training. The participants showed low knowledge related to treatment of sexual violence survivors as their understanding of post-exposure prophylaxis, emergency contraceptive pills, care, treatment and prevention of infections are very limited. The participants' average score on the pre-test was 23 % correct answers, while on the post test they scored an average of 83 %.

Similarly, two trainings on Information Management System (IMS) were conducted in November, one in Hargeisa and one in Nairobi. The training aimed to develop the capacity of participants to collect data on GBV through an online system that will provide evidence to inform GBV program planning. The training facilitated by technical staff from Head Quarter and conducted jointly with UNHCR. About 30 participants from civil society NGOs have taken part in these two trainings.

## Annual Review and Planning Meeting in Somaliland

The annual review and planning meeting was held in Hargeisa on the 16th and 17th of January. The agenda was reviewing the UNFPA work plan or 2011 and planning of 2012 with the aim of improving efficiency and maximize found utilization. The meeting was divided into different themes, focusing on Reproductive Health, Gender and Female Genital Mutilation/Cutting, and ended with a section of planning the activities for 2012.



## Certificate of merit

**A**t two days annual review and planning meeting was held in Garowe at the end of January with ministries and NGO's. During the opening speech the minister of Planning and International Cooperation thanked UNFPA for their commitment and support to reproductive health, and especially mentioned the support to the hospitals in Galkayo and Bossaso with medical equipment and training of the staff, and for taking care of mothers and children in Puntland.

Before the meeting, the Ministry of Health showed their appreciation of the many years of UNFPA support and interventions in Puntland. The Minister of Health Dr. Ali Abdullahi handed over a personal certificate of merit to UNFPA's deputy representative Dr. Rogaia Abuelgasim Abdelrahim.



*Minister of Health, Dr. Ali Abdullahi handed over certificate of merit to UNFPA Deputy Representative Dr. Rogaia Abuelgasim Abdelrahim.*

## Minimal Initial Service Package training in Garowe



As part of rolling out the Minimal Initial Service Package (MISP) training inside Somalia, UNFPA Galkayo office organised in the period 27th to 29th December the third MISP training this year in Garowe. This was done to enhance the capacity of health services providers and programme managers who work with providing reproductive health services. The training was held in New Rays Hotel in the centre of the town.

A total number of 20 participants took part in this training. They were from all the three zones of Somalia. The training was facilitated by three certified MISP Training of Trainers (ToT) from the Ministry of Health in Puntland. All the three trainers were among the ToTs which were trained in Nairobi by IPPF.



# SOMALIA

Population	7.9 million
Life expectancy	47 years
Fertility rate	6.8 births per woman
Maternal mortality rate	1,044 deaths per 100,000 live births
Use of modern contraceptives	1.5% of women in fertile age
HIV/AIDS prevalence	0.9%
Female Genital Mutilation/Cutting (estimate, among women aged 15-49)	98% have been circumcised, with 78% having experienced the extreme form of FGM (infibulated or type 3 circumcision).
Estimated number of IDPs	1.3 million

Source: ANC 2004, MICS 2006, UN OCHA 2008 (Map: UN DPKO 2007)

**UNFPA, the United Nations Population Fund, is an international development agency that promotes the right of every woman, man and child to enjoy a life of health and equal opportunity. UNFPA supports countries in using population data for policies and programmes to reduce poverty and to ensure that every pregnancy is wanted, every birth is safe, every young person is free of HIV/AIDS, and every girl and woman is treated with dignity and respect.**

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