COVID-19 Situation Report

1. Overview

• Somalia’s humanitarian and socioeconomic crises have worsened in the past weeks due to the Coronavirus pandemic. As of 27 July 2020, confirmed COVID-19 cases in Somalia had reached 3,196, with 1,543 recoveries and 93 fatalities. The pandemic has exacerbated pre-existing vulnerabilities of women and girls and affected livelihoods for the poor families and internally displaced persons across the country. The number of women and girls facing abuse including sexual violence has significantly 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 2020 report, intimate partner violence (IPV) cases remained the highest GBV type reported across the country.

• Various rapid assessments indicate that the number of people affected by flash and riverine floods has increased since June 2020. Benadir, Hishabelle, South West and Jubaland reported the impact of Hagaa floods where about 191,800 people were affected with 124,200 people displaced from their homes, and huge needs are reported in those affected communities. Hirshabelle and South West states are the worst affected, accounting for nearly 91 percent of the caseload.

• UNFPA Somalia continues to support the government and work with UN agencies and national and international partners to minimize disruption to lifesaving sexual and reproductive health (SRH) and gender-based violence (GBV) services, supports the COVID-19 risk communication and community engagement, provides protective personal equipment (PPE) and supports the safety of patients and health workers through strengthening infection, prevention and control. Also, UNFPA and its partners are responding to the current floods in the country.
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 (10 June to 20 July 2020)

<table>
<thead>
<tr>
<th>Women benefitting from SRH services (including antenatal and postnatal care, emergency obstetric and newborn care services)</th>
<th>People benefitting from birth spacing services, information, and counseling</th>
<th>People reached with services related to gender-based violence (prevention, risk mitigation, and response)</th>
<th>People benefitting from SRH and GBV awareness-raising and information campaign including coronavirus prevention</th>
<th>Health care providers and midwives benefitting from the training on coronavirus prevention guidelines</th>
</tr>
</thead>
<tbody>
<tr>
<td>10,321 including 1,024 of normal deliveries assisted by Skilled Birth</td>
<td>846</td>
<td>2,510</td>
<td>93,387</td>
<td>35</td>
</tr>
</tbody>
</table>

3. UNFPA Response Summary

**Coordination**

- UNFPA Somalia is working closely with the Federal Government and the 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 continues working 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 the floods situation in Somalia.
- UNFPA Somalia continues to produce COVID-19 vulnerability mapping by risk factor and related indicators from the Somali Health and Demographic Survey for the major towns in the country including Benadir, Baidoa, Garowe, Kismayo and Galkayo. The products are designed to guide the humanitarian partners for targeted COVID-19 Risk Communication & Community Engagement (RCCE) activities.
Continuity of SRH interventions, including protection of health workforce

- Despite the funding challenges this year, UNFPA continues to provide leadership and support for the continuity of and access to quality life-saving essential SRH information and services for women, adolescents, and youth during the COVID-19 pandemic.

- UNFPA continues to support the 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.

- UNFPA and its partners have trained university students to become knowledge-sharing champions on reproductive health issues such as sexually transmitted illnesses and HIV, and family planning in the context of COVID-19.

- UNFPA and its partners continue supporting the provision of family planning services while responding to COVID-19 and floods across Somalia.

- 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 the provision of clinical care, psychosocial support and legal aid and material support to survivors of GBV for women, adolescents, and youth.

- Amidst COVID-19 response, UNFPA and partners continue to conduct capacity strengthening workshops for service providers in providing basic psychosocial support for survivors of gender-based violence.

- UNFPA continues to strengthen the GBV one-stop centers across the country which integrate care for survivors of GBV with reproductive health services.

- Supported the development of GBV COVID-19 messages including guidelines and dissemination using service sites and during the distribution of dignity and hygiene kits.
UNFPA and partners are ensuring the continuous provision of psychosocial support to survivors of gender-based violence amidst COVID-19 response. UNFPA supported the staff training and production of training manuals for psychosocial first aid responders across Somaliland.

UNFPA supported the training and sensitization of social workers, counselors and legal aid focal points conducted to put in place measures to curb the spread of COVID-19 during GBV service delivery.

UNFPA and its partners supported the mobilization of medical doctors, religious leaders and civil society leaders for radio talk shows on #EndFGM campaign to reach out to more people as Somalia sees a rise in Female Genital Mutilation during the COVID-19 lockdowns.

UNFPA and partners are supporting the risk communication and community engagement by all the humanitarian partners, UNFPA Somalia has produced COVID-19 vulnerability mapping by risk factor and related indicators from SHDS for Benadir Region, Baidoa, and Galkayo. The products are specifically useful for proper targeted RCCE activities for the concerned locations.

Communication platforms such as podcasts, and media (videos, radio, web-based) to reach as many people as possible across the country.

Emergency service line: Call 112 for emergency medical care.

A GBV/FGM rapid assessment was organized and undertaken by the GBV Area of Responsibility (GBV AoR) to generate data and information on the impact of COVID-19 on GBV/FGM incidents and GBV service provision - https://somalia.unfpa.org/en/publications/gbvfgm-rapid-assessment-report-context-covid-19-pandemic-somalia. UNFPA leads the GBV AoR. The assessment also interrogated factors around COVID-19 and stigmatization, access to health services for women and adolescent girls and the impact of the pandemic on schooling for adolescents’ boys and girls.

Risk communication and community engagement

UNFPA Somalia continues to support and engage with the Government and partners in the risk communication and community engagement through:

- Supporting the risk communication and community engagement by all the humanitarian partners, UNFPA Somalia has produced COVID-19 vulnerability mapping by risk factor and related indicators from SHDS for Benadir Region, Baidoa, and Galkayo. The products are specifically useful for proper targeted RCCE activities for the concerned locations.
- Communication platforms such as podcasts, and media (videos, radio, web-based) to reach as many people as possible across the country.
4. Resource Mobilization

- More funding is required to support scaling up of the response due to the level of needs. Also, noted is the overall declining trend of funding for GBV service provision in the country. This is due to reprioritization and the struggle to get GBV prioritized within contingency plans for COVID-19 at the UN and the national level.
- The agency is reaching out to bilateral donors to mobilize the required funding for UNFPA Somalia’s COVID-19 response plan for SRH and GBV activities including services, supplies, information and coordination.