

The Somali Health and Demographic Survey 2020

Indicators for the COVID-19 Response



Lower Juba Region | June 2020



Population characteristics

Population under 5: **27.9%**
 School going children (aged 6-17): **37.2%**
 Population aged 60+: **4.3%**
 Population aged 65+: **2.8%**
 Population aged 80+: **0.9%**

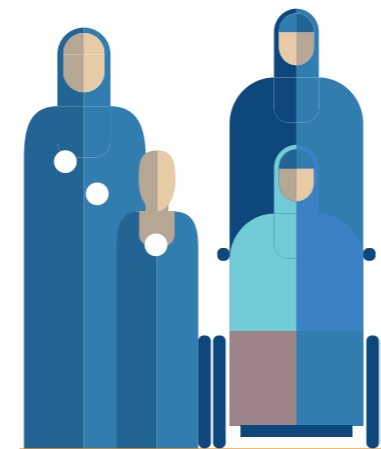
Gender Distribution:

Male: **47.7%** Female: **52.3%**



Access to media

Women aged 15-49 with access to radio: **15.1%**
 Women aged 15-49 with access to television: **11.3%**
 Women aged 15-49 with access to mobile phones: **72.6%**



Chronic diseases, disability and tobacco use

Household members with at least one chronic disease: **2.8%**
 Household members who smoke cigarette or use tobacco: **3.6%**
 Prevalence of disabled persons: **4.0%**



Household characteristics

Households headed by persons aged 60+: **16.3%**
 Households headed by persons aged 65+: **8.9%**
 Households headed by persons aged 80+: **2.9%**
 Households with 1 room for sleeping: **45.1%**
 Households with 6 or more household members: **55.9%**
 Households with children under 5: **25.0%**
 Households with household members aged 65+: **2.8%**
 Households with access to electricity: **34.2%**
 Population with a basic handwashing facility: **5.9%**
 Population with a limited handwashing facility: **18.6%**

Time to obtain drinking water (round trip):

Water on premises: **47.3%** <30 min: **37.7%**
 30+ mins: **15.0%**

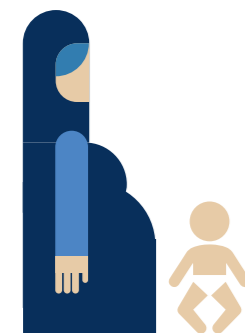
Water not available for at least one full day in the past two weeks:

Not available for at least one full day: **32.4%**
 Available throughout: **60.2%**
 Don't know: **0.0%**



Gender-based violence

Ever married women aged 15-49 who have ever experienced different forms of violence: **25.1%**



Child health and nutrition

Children with stunted growth: **39.8%**
 Wasted children: **15.2%**
 Underweight children: **35.6%**

Maternal health and nutrition

Women aged 15-49 currently pregnant: **16.7%**
 Women aged 15-49 who are obese: **6.7%**



Access to health care

Households with members who have health insurance policy: **1.3%**

Why Risk Factors Matter

People with risk factors may be more likely to need hospitalization or intensive care if they have COVID-19, or they may be more likely to die of the infection.

Composite list of risk factors for COVID-19 mortality

	Elderly pop (%)	4
	Stunted children (%)	28
	Wasted children (%)	15
	Underweight children (%)	36
	Pregnant women (%)	17
	Obese women (%)	7
	Persons with chronic disease (%)	3
	Persons who smoke (%)	4
	Disabled persons (%)	4
	Risk score out of 900	109

COVID-19 Vulnerability Mapping by Risk Factors

Kismayo Town, Lower Juba Region | June 2020



1. Introduction

Kismayo town falls in Lower Juba region and is the commercial capital of Jubaland State of Somalia. The port of Kismayo is classified as a major class port which has a harbour and a pier that juts into the Somali Sea.

Kismayo is sub-divided into four *degmadas*: Central, Dalxiska, Fanole and Galbeet.

2. Risk Factors

A. Household Density

The household density was generated from data on dwelling structures obtained from The Somali Health Demographic Survey (SHDS) by the use of Kernel Density, a spatial analysis tool in ArcGIS. The tool calculates the number of households per unit area (sq. km).

Areas with high household density and limited access to sanitation and health facilities are considered to be more vulnerable to the risk of spread of COVID-19 infections.

B. Sites for Internally Displaced Persons

Data on verified internally displaced persons (IDP) sites was obtained from the Camp Coordination and Camp Management (CCCM) Cluster Somalia. The data was collected through a joint verification exercise that was conducted in August 2019, led by CCCM partners. A total of 139 IDP sites were assessed and mapped as listed below. Compared to the data collected in January 2019, there was an increase of eight IDP sites (CCCM 2019).

Degmada	Number of IDP Sites
Galbeet	43
Central	26
Fanole	28
Dalxiska	42

The IDPs in Kismayo are mostly displaced mainly by military operations, seasonal floods and droughts from the Middle and Lower Juba regions. Due to the unavailability of land and urban expansion, most of the IDPs are self-settled in sub-standard, adhoc sites on either former government buildings, government land or privately owned land. They do not possess any formalized land

tenure agreements. This has led to frequent evictions and a very volatile context in the area. Since 2014, the Juba administration has worked closely together with the Somalia Shelter Cluster (SC) and partner organizations in securing longer term land tenure solutions for the IDPs ("Safety Audit Factsheet - Galbedka IDP Sites, Kismayo, July 2019 - Somalia | ReliefWeb," n.d.).

IDP sites are extremely vulnerable to the spread of COVID-19 due to the congested nature of their shelters and limited access to sanitation resources. They also depend on communal, shared facilities in the camps, further increasing the risk of spread of the COVID-19 virus.

C. Bus Stations and Markets

Findings of a study conducted by REACH International in March 2019 showed that 99% of households in Kismayo reported that they bought their basic commodities from markets within Kismayo town. Most of these households reported to be accessing the markets by the use of buses, which are public means of transport. This is an indicator that a significantly large number of households are exposed to the risk of contracting COVID-19 virus.

Markets and bus stations are considered to be high-risk areas due to uncontrolled movements of large numbers of people at any given time. There is a need for stringent regulatory measures in these locations to curb the spread of the COVID-19 virus.

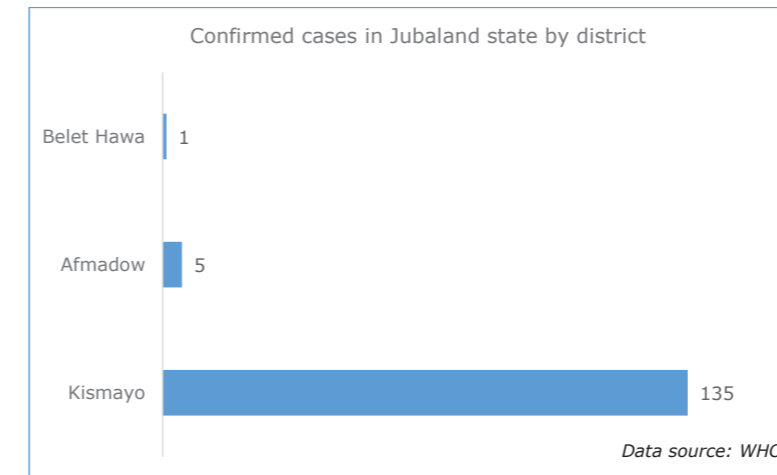
3. Health Facilities

An equitable distribution of well-equipped health facilities is vital for the testing, treatment and control of COVID-19. Kismayo has two COVID-19 isolation sites: The Kismayo General Hospital, with a capacity of 13 beds, and The Maxfalka Isolation Centre, with a capacity of 30 beds.

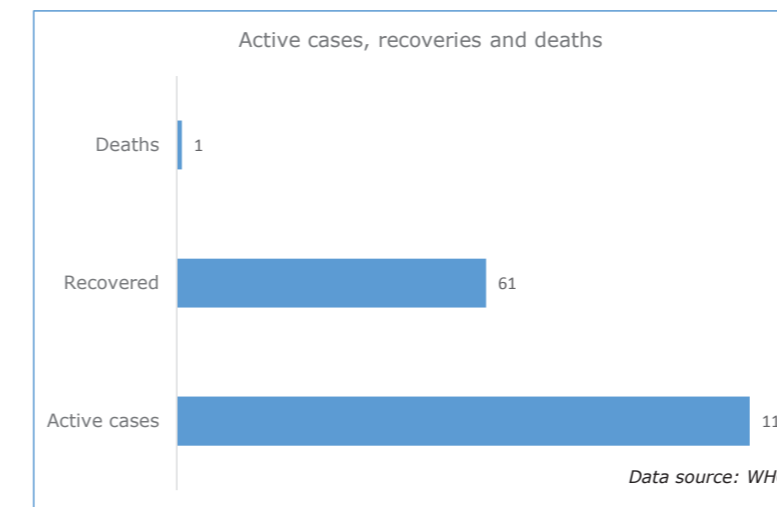
4. COVID-19 Cases

Kismayo district has 135 confirmed cases of COVID-19 as of the third week of June 2020.

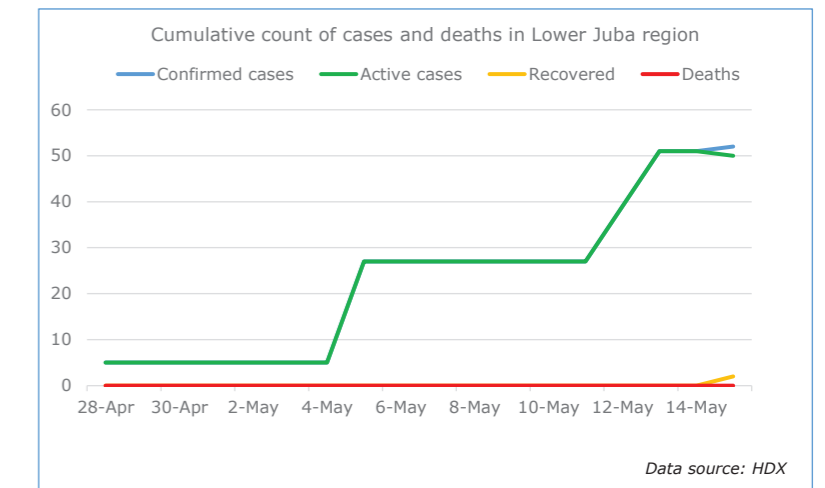
Below is a representation of the number of confirmed cases in Jubaland State of Somalia as of the third week of June:



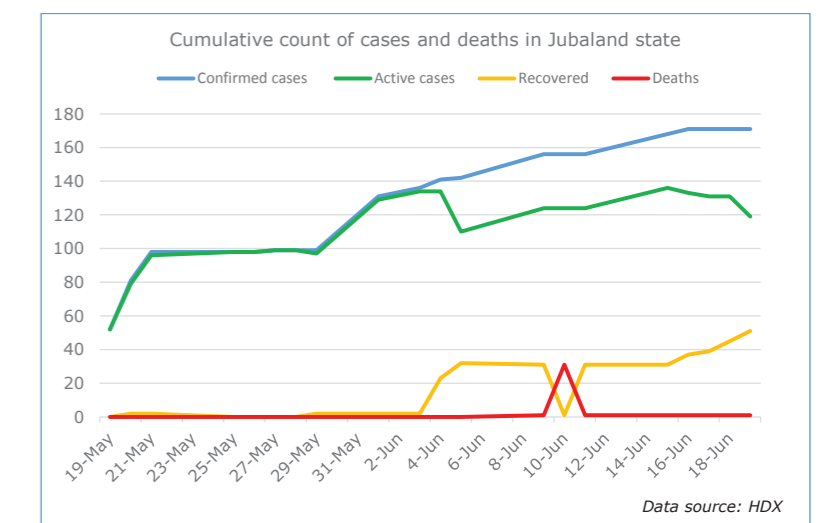
The number of active cases, recoveries and deaths for Jubaland State of Somalia as of the third week of June is as shown below:



The cumulative number of confirmed cases, active cases, recoveries and deaths for Lower Juba region of Somalia as of the second week of May is as shown below:

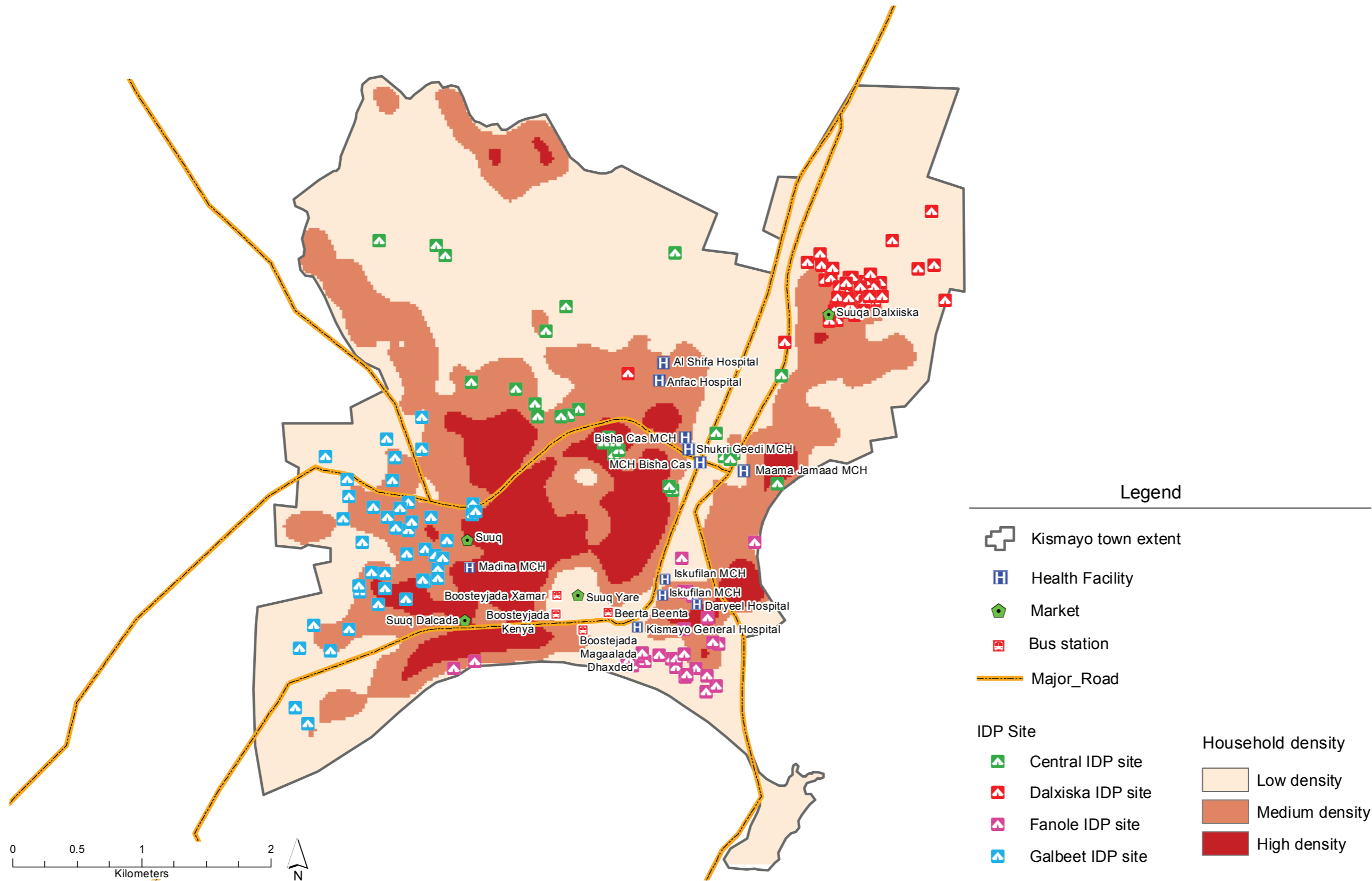


The cumulative number of confirmed cases, active cases, recoveries and deaths for Jubaland State of Somalia as of the third week of June is as shown below:



COVID-19 Vulnerability Mapping by Risk Factors

Kismayo Town, Lower Juba Region | June 2020



Methodology Notes:
The map displays the household density layer overlaid with IDP camps, health facilities, markets, bus stations and roads. Household density was obtained by calculating the number of households per unit area(sq.km).

File Code: UNFPA SO120620A3L911
Data: UNFPA, DNS, CCCM Cluster Somalia
Prepared by: GIS, UNFPA
Date: 23 June 2020

The boundaries and names used on this map do not imply any official endorsement or acceptance by the United Nations Population Fund

