REPORT ON VISIT TO HARGEISA, SOMALILAND, FOR PLANNING THE SECOND PHASE OF THE INITIATIVE
5 – 12 FEBRUARY 2002

Dr Abdullahi M. Ahmed
Coordinator, Horn of Africa Initiative

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A. BACKGROUND

Somaliland has borders with Djibouti and the Somali Region of Ethiopia. In the first phase of the Horn of Africa Initiative (HOAI), Hargeisa district was involved in the cross border collaboration with both countries. Cross-Border Health Committees (CBHCs) were established and joint activities were organized. Capacity building, in terms of provision of equipment and instruments, training in management and control of communicable diseases, were also implemented. The workshops and trainings, organized by the HOAI attended by the health managers and professionals were:

- Management and planning workshop for HOAI Focal Persons and Programme Managers
- Standardisation of treatment protocols of common communicable diseases
- Training in TB management and transfer of patients across the border.
- Training in Malaria management
- Laboratory training in TB and Malaria diagnosis

The current assignment is part of first round of visits to the member countries of the Horn in order to brief the Ministries of Health about the Initiative objectives and to start the planning process of phase two, taking into consideration lessons learned in the first phase of the Initiative.

Moreover, in December 2001, a consultation meeting on health as bridge for peace (HBP) was held in Sharma Sheikh, Egypt. Ministry of Health and WHO Somalia attended the meeting. Delegates from Somalia requested WHO technical assistance regarding strengthening health services and health professionals associations and exchange of information among the regions. It was suggested that WHO Somalia and HOAI could work together and explore areas of intervention. Thus, this assignment was coincided to take place when the Regional Medical Officers (RMOs) and WHO Officers in Charge (OIC) of Somalia were attending a two-days workshop on district health care planning in Hargeisa.

B. OBJECTIVES

The main objective of the assignment was to prepare the ground for the implementation of second phase of the Initiative. The specific tasks conducted were:

- Attending a district health care planning workshop for regional health managers
- Briefing ministry of health officers on the main areas of focus of second phase of the HOAI Initiative.
- Review the cross-border activities and level of implementation of previous plans
- Identification/selection of cross-border districts
- Establishment of cross-border health committees
- Meeting with WHO OIC on fostering collaboration among health professionals in different regions of the country
- Plan future activities at border level
C. ACTIVITIES CONDUCTED DURING THE ASSIGNMENT

During the assignment, Hargeisa and Borama were visited. MOH, UN Agencies and NGOs were briefed about the main objectives of the second phase of the HOAI. The names of the people met are shown in Annex 1. The main findings from the assignment are presented below.

1. District health care planning for regional health managers

During the first two days of the assignment, I attended a workshop on district health care planning for regional health managers and OIC of the five WHO sub-offices in Somalia (Somaliland, Puntland, Mogadishu, Marka and Baidoa).

From the workshop, it was clear that most doctors work in the capital cities and regional headquarters where there are functional health facilities and better living conditions. Thus, it was agreed that the regional medical officers would work with the existing authorities and start strengthening the district. It was also raised the possibility of collaboration between WHO Somalia and HOAI in strengthening border districts.

2. Identification of cross-border sites

The Ministry of Health and Labour (MOH&L) of Somaliland acknowledged that they are very interested in participating in the second phase of the HOAI and would like to extend it to all border districts with Djibouti and Ethiopia.

In the first phase of the Initiative, Somaliland participated in one cross-border site with Ethiopia at Jigjiga. Now, the MOH&L suggested including all border districts with Djibouti and Ethiopia. In this way, Somaliland will have the following two cross-border sites:

- **Somaliland – Ethiopia** (Somali Region), at 7 districts (Borama, Gebiley, Hargeisa, Odweyne, Buro, Buhodle, Las Anod and Balli Gubadle)
- **Somaliland – Djibouti** at Awdal Region with the 2 districts of Zeila and Borama

Table 1 summarizes existing health facilities of the selected districts that will collaborate with the neighboring countries. Zeila, Buhodle and Odweyne have only health posts, while the other districts have hospitals. Medical doctors run all hospitals, except Balli Gubadle.
Table 1: Border districts of Somaliland with Ethiopia and existing health facilities

<table>
<thead>
<tr>
<th>Districts</th>
<th>Health facilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Zeila</td>
<td>Health post</td>
</tr>
<tr>
<td>Borama</td>
<td>Regional hospital, TB centre and 5 MCH centres</td>
</tr>
<tr>
<td>Gebiley</td>
<td>District hospital, TB center and 1 MCH centre</td>
</tr>
<tr>
<td>Hargeisa</td>
<td>National hospital, TB centre and 6 MCH centres</td>
</tr>
<tr>
<td>Odweyne</td>
<td>Health post</td>
</tr>
<tr>
<td>Buro</td>
<td>Regional hospital and TB Centre and 3 MCH centres</td>
</tr>
<tr>
<td>Buhodle</td>
<td>Health post</td>
</tr>
<tr>
<td>Las Anod</td>
<td>Regional hospital and TB centre</td>
</tr>
<tr>
<td>Balli Gubadle</td>
<td>District hospital and 1 MCH centre</td>
</tr>
</tbody>
</table>

There are many crossing points along the borders used for passage of people, animals, vehicles and goods. The most important ones are:

- Lawya Adde (Border with Djibouti)
- Gees Diir (Border with Djibouti)
- Hariirad (Border with Ethiopia)
- Tog wajaale (Border with Ethiopia)
- Allay Baday (Border with Ethiopia)
- Balli Gubadle (Border with Ethiopia)
- Salahlay (Border with Ethiopia)
- Haji Salah (Border with Ethiopia)
- Duruqsi (Border with Ethiopia)
- Balli Dhiig (Border with Ethiopia)
- Buhodle (Border with Ethiopia)

Lawya Adde (border with Djibouti) and Tog Wajaale (border with Ethiopia) have customs and immigration offices.

Four districts of Puntland have border with Ethiopia. These will be considered later as soon as the security conditions permit. The districts are Garowe, Burtinle, Galkayo and Galdogob.

3. Nomination of National Focal Person for the HOAI

The Director General of the MOH&L nominated Dr Abdurahman Abdullahi, Director of Health Services, to be the Focal Person for the HOAI Initiative.

4. Establishment of Cross-Border Health Committees

According to experiences gained from the first phase of the Initiative, it was considered necessary to broaden the membership of the CBHCs and to include participants from
other institutions that facilitate passage of health personnel and goods across the border during joint health activities.

From table 1, it is clear that several districts have only health posts with few health workers. Furthermore, most of the medical doctors and senior qualified staff are in Hargeisa or in the regional headquarters such as Hargeisa, Borama, Buro and Las Anod.

In this situation, the Regional and District staff could form the CBHCs. The HOAI Focal Person and Regional Medical Officers will form committees based at regional/district levels as deemed appropriate. Nevertheless, the composition of each CBHC should include the following members:

- Health (district medical officer, malaria, TB, HIV/AIDS, and EPI)
- District Administration and community members
- Police Officer
- Customs Officer
- Immigration Officer

The nomination of the committees will be finalized by the MOH&L Focal person and submitted to the HOAI.

5. Collecting district profile

Meeting was held with WHO/PHC Officer and OIC Hargeisa about collection of data for the border districts profile. It was raised that WHO Somalia has the intention to conduct a survey for collecting data for GIS project for all Somalia. It was suggested to explore the possibility of combining these activities. Nevertheless, WHO Somalia will support the MOH&L to conduct data collection for the selected districts.

6. Meeting with OIC for WHO Sub-Offices in Somalia

The five national OIC, WHO Officer for PHC and WHO Consultant for conducting the district health care planning attended the meeting at WHO Sub-Office in Hargeisa on Friday 8 February 2002. The main points that came out from the discussion are summarised below:

- Since the collapse of the central government in Somalia, training of health professionals stopped. Many health personnel left the country for different reasons. The remaining professionals are congregated in big cities and very few districts have medical officers.

- The health professionals live in isolation within the existing regional governments (Somaliland, Puntland and South & Central) and hardly communicate or exchange information. Recently, each group organised themselves and formed professional associations. Somaliland has established the Somaliland Health Council chaired by Dr Muse Qasim. Puntland formed the Puntland Medical Association, headed by Dr
Mohamed Jama Salad. In Mogadishu, there are the Somali Medical Association, chaired by Dr Ali Bashi and the Somali Health Professionals Association chaired by Mr Yusuf A. Arif. Baidoa has its own association, but has little communication with Mogadishu associations. The organization, regulations, level of functioning of these associations differs. However, they all attempt to gather their categories and protect the profession from quarks and advocate for respecting professional ethics.

- Since the beginning of the civil war in Somalia, very few health professionals received continuing professional development. It was all acknowledged that their performance and professional ethics deteriorated. In the other hand, because of lack of production of new graduates, untrained staff is practicing without regulations and control.

- Regarding training of health professionals, each region opened training programmes, sometimes without coordination with authorities or among themselves. Some of the newly formed training institutions are in Mogadishu, Bosaso and Hargeisa. Amoud University declares to have established a Medical School with the first intake.

In summary, from the discussion some areas where WHO Somalia and the HOAI could collaborate were identified. The collaboration will aim at strengthening health services, mainly at border districts, and strengthening contacts and collaboration among health managers/professionals in the Somali regional authorities.

7. Meeting with UNICEF

The meeting was held at UNICEF Sub-Office in Hargeisa. Present were the Resident Project Officer and the Health Officer.

The HOAI has briefed UNICEF Officers about the activities of the Initiative, which deal with surveillance and communicable disease control, polio eradication and health as bridge for peace. The main strategies of the Initiatives are strengthening health facilities at border districts, networking and exchange of information and capacity building of health workers at border districts.

UNICEF Officers reiterated their support to the Initiative. They said that they already support the MOH&L in the HOAI focus areas and they closely coordinate with WHO. Moreover, there is close communication and coordination with UNICEF emergency office in Jigjiga, Ethiopia.
8. Meeting with NGOs

8.1 Meeting with the Institute for Practical Research and Training

WHO/PHC Officer for Somalia, HOAI Coordinator and the Director of the Institute attended the meeting. The Institute was founded in 1998 and work on several areas such as:

- Initiative on health and education
- Governance
- Humanitarian action and human rights

They organize meetings, seminars and workshops for ministries and NGOs in Somaliland.

The HOAI briefed the Institute Director about its activities. After discussion, main areas of collaboration were identified. The IPRT could participate and contribute in organizing trainings and workshops for health planners and professionals in:

- Humanitarian action and Human rights
- Ethics and professionalism
- Health education aimed at creating awareness of HIV/AIDS

8.2 Meeting with the PENHA

PENHA is regional NGO conducting research and interventions on the pastoralist and environmental issues. It has projects in several countries of the Horn.

The OIC of WHO Sub-Office in Hargeisa, HOAI Coordinator, PENHA Director and several senior researchers, attended the meeting. The main areas of collaboration identified during the meeting could be conducting operational research on:

- Health services seeking behaviour of pastoralists and
- Knowledge and perception of HIV/AIDS

8.3 Meeting with the COOPI

COOPI is an Italian NGO supporting different programmes, including water, agriculture, animal and human health. With reference to health, they support Hargeisa, Berbera and Borama health departments.

The meeting was held with the Coordinator of COOPI in Hargeisa and other professionals in Borama. The main areas of collaboration identified during the meeting would be health services strengthening and human resources development. Both
organizations will discuss with the European Union that funds the ongoing projects to explore future areas of collaboration.

9. Visit to basic development needs sites in Borama district

Basic development needs (BDN) is an integrative approach aimed at empowering communities and ultimately improving their health and economic status. It has been implemented in several districts of Somalia since the 1980s.

The sites visited are at Borama district, which has border with Jigjiga, Ethiopia. The district has 8 villages that are currently implementing BDN programmes, some at initial stage and others almost at self-sufficient stage.

A meeting was held with the BDN Technical Support Team (TST) of Borama district (see annex 1). In the discussion, it was raised the opportunity of implementing BDN at some villages in Jigjiga district facing the BDN villages of Borama district (e.g. El Bahay, Boon and Qunujeed). It was felt that this would generate exchange of experiences by the communities as well as the health professionals along the border districts.

The opportunity of implementing BDN in Jigjiga will be discussed with MOH at Federal and Somali Region levels and WHO.

D. ISSUES TO BE FOLLOWED UP

The main issues for follow-up are:

Ministry of Health and Labour and WHO Somalia

1. The Focal Person for HOAI will establish the CBHCs, in line with above observations and in consultation with other departments.

2. The Focal Person for the HOAI will conduct/update the baseline survey of selected districts using the EHA checklist for border district profile.

3. WHO Sub-Office in Hargeisa will support the Focal Person for the HOAI in the baseline survey

HOAI Coordinator

4. The HOAI Coordinator will follow with NGOs in Somaliland in preparing joint proposals on strengthening health services, human resources development and operational research.
5. The HOAI Coordinator will discuss with Somali Regional Health Bureau of Ethiopia on promoting basic development needs approach in villages bordering Somaliland to initiate collaboration and exchange of experiences among communities along the borders.

WHO Somalia, EMRO and EHA/HQ

6. WHO Somalia, EMRO and EHA/HQ are requested to recruit two consultants for health as bridge for peace and strengthening health services (broad TORs are given in Annex 2).

7. WHO Somalia and EMRO are requested to continue the district health planning exercise and consider as case study some districts along the border such as Gebiley and Borama.
Annex 1
Officers met during the assignment

Ministry of Health and Labour

H.E. Dr Hassan Ismail Yusuf Minister of Health and Labour
Mr Ahmed Jama Director General
Dr Abdurahman Abdullahi Director of Health Services
Dr Abdurahman Elmi Weyrah Regional Medical Officer, Awdal Regions, Borama

WHO

Dr Daher Daher Aden Medical Officer for PHC
Dr Abdullahi Diria WHO- Somalia
Dr Oluabusola Campell Polio Eradication Focal Persona, Bosaso
Dr Karim Djibaouli Polio Eradication Focal Persona, Hargeysa
Mr Abdi Hassan Duale Officer In-Charge, Hargeisa
Dr Jeylani Abdullahi Mohamud Officer In-Charge, Marka
Dr Ahmed Ismail Jama Officer In-Charge, Bosaso
Dr Nur Hassan Mohamed Officer In-Charge, Baidoa
Dr Abdulkarim Casayr Officer In-Charge, Mogadishu

BASIC DEVELOPMENT NEEDS – TECHNICAL SUPPORT TEAM, BORAMA

Dr Abdurahman Jama Hadi WHO-BDN Field Coordinator
Mr Hassan Omar Holes IGA’s Coordinator
Eng. Mohamed Omar Dhimbil TST Member
Mr Bulbul Mohamed Duale Veterinary Coordinator for BDN
Mr Osman Handule Derie TST Member

UNICEF

Dr Romanos N. S. Mkerenga Resident Project Officer
Mr Awil Haji Ali Health Programme Coordinator

NGOs

Dr Ahmed Haji Esa Institute for Practical Research and Training
Ms Sadia Haji Ahmed PENHA
Dr Vincenzo Mangiarotti COOPI, Programme Coordinator, N.W. Somalia
Ms Giuseppina D’Urso COOPI, Borama
Mr Valerio Pavan COOPI, Borama
Annex 2

Broad terms of reference for proposed consultants

1. Consultant on health as bridge for Somali professionals

The consultant would conduct two assignments. In the first assignment, which can be two weeks, s/he would:

- Assess the situation and training needs of health professionals and planners in the areas of humanitarian action, human rights and professional ethics.

- Identify potential partners in the country (UN, NGOs and others) that could contribute to the trainings

Depending on the security situation at the time of the assignment, the consultant would visit Mogadishu, Hargeisa, Bosaso, Marka and Baidoa.

During the second assignment, which could be two weeks, s/he would conduct the training/workshop activities and prepare a plan for follow-up.

2. Consultant for human resources development and health services strengthening (duration 3-4 weeks)

- The consultant will update the human resources for health inventory, especially at border districts
- Review/document ongoing training programmes for health professionals in the country
- Assess health services at border districts selected for HOAI collaboration and existing staff
- Prepare a proposal and follow-up on the following areas:
  - Harmonisation of training programmes and how WHO could support them
  - Plan on continuing professional development for health workers
  - Strengthening health services at border districts