



Enhance the Accessibility of Immunizations for Children under Five Years of Age and Livestock in Nomadic Populations of Gedo Region-Somalia

Project Information

- ◆ Department: Public Health Program
- ◆ Unit: Polio & Immunization Department

OBJECTIVES

The project goal is to integrate available information on movements of nomadic populations and enhance the accessibility of public health interventions, particularly immunizations, in Gedo region within the microplanning and delivery of routine immunization and campaigns, especially in cross border areas to prevent international transmission of polio.

REGIONS OF WORK

The project will be implemented in Somalia – Gedo region.

BENEFICIARIES

The targeted beneficiaries are the state and regional EPI staff, in addition to nomadic population at cross-border areas of Gedo region.

PROJECT PHASES

This project involves three phases as follows:

Phase 1- Human Resource Planning: GHD will hire a third party in Somalia to implement the project activities along with consultant with experience in nomadic and cross-border population movement to coordinate and implement the following activities in the selected geographic scope.

Phase 2- Planning: The implementing partner will conduct a desk review, followed by conducting face-to-face meetings with staff from the Ministry of Health and the Ministry of Livestock, WHO, UNICEF, IOM, FAO as well as other partners and local NGOs working in the targeted region.

Phase 3- Implementation: GHD will hire third party to conduct the project implementation activities under monitoring from GHD and CDC.



PROJECT DESCRIPTION

GHD will support conducting a nomadic project in the Gedo region with the goal of improving public health interventions, specifically immunizations, among nomadic populations. GHD will hire implementing partner (IP) and hire a consultant experienced in nomadic and cross-border population movement to coordinate project activities with the IP. The consultant will conduct a desk review, stakeholder engagement with various organizations. The IP will conduct data collection and analysis. GHD and CDC will provide technical support for data collection tools. Data collection will occur simultaneously with the provision of healthcare services to children under five and livestock. Collected data will be visualized in a dashboard, and follow-up calls will be made to the nomadic group to ensure their ongoing healthcare needs are met. This project combines data-driven approaches with healthcare delivery to improve public health in nomadic communities.



Project Start and End Date	08/1/2023 – 07/31/2024
Funded by	Centers for Disease Control and Prevention (CDC)
Collaborators	Ministry of Health and Human Services at the Federal Republic of Somalia and Visioning Corps Initiative VCI

Currently . . .

Somalia is globally recognized for its persistent transmission of circulating vaccine-derived poliovirus type 2 (cVDPV2), making it one of the most challenging polio epidemiological situations. Close to 60% of the population are nomadic and many these children under 5, remain inaccessible in conflict ridden areas, depriving large populations of vaccination opportunities. This has resulted in low routine immunization (RI) coverage with OPV/IPV and other RI antigens in general. Nomadic pastoralist groups, often face challenges in accessing healthcare that is mostly tailored for settled populations, also nomadic children have lower vaccination coverage compared to the wider society. Therefore, these mobile populations face an elevated risk of contracting vaccine-preventable diseases compared to non-nomadic populations.

What's next . . .

This project will contribute to enhancing the accessibility of public health interventions, particularly immunizations, to effectively reach and provide coverage for children under 5 years old and livestock belonging to nomadic populations. Additionally, this project will ensure a comprehensive coverage of all nomadic camps in Gedo by incorporating them into microplans, and documentation of nomadic movement routes to inform deployment of vaccination posts at key strategic points.

Outcomes

Polio surveillance data generated during data collection phase

Frequented nomadic routes to inform placements of vaccination teams