



Forced evictions of displaced communities are concerning in Kismayo and Baidoa © IOM Somalia 2019

SITUATION OVERVIEW

The humanitarian crisis in Somalia, characterized by both natural and man-made factors, is one of the most complex and longstanding emergencies in the world. Due to decades of poverty, marginalization, armed violence, insecurity, political instability, natural hazards and lack of development, the humanitarian situation remains critical in the country. Prolonged drought conditions have been devastating for Somali communities and continue to drive displacement, while ongoing conflict impacts protection and human rights, reduce resilience and hinder access to basic services.

To address overall migration challenges in Somalia, IOM works closely with the Federal Government of Somalia, regional

authorities, the UN, donor governments and civil society by implementing programmes through three pillars: (1) Preparedness and humanitarian response; (2) Long term recovery and durable solutions; and, (3) Migration governance and development. Since 2006, IOM has delivered frontline services to crisis-affected populations, while steadily developing models and partnerships for longer term recovery and migration governance. With over 350 staff, IOM Somalia operates from a newly constructed main office in Mogadishu and seven field offices, as well as the Nairobi Support Office in Kenya.

HUMANITARIAN SITUATION

The Deyr rains (September-December) began in some parts of the country, according to the FAO-led Somalia Water and Land Information Management (SWALIM). Parts of the north eastern regions started to receive rains in mid-September and the last week of September also saw moderate rains in parts of the Gedo region in Jubaland. There is high risk of flooding along the Juba and Shabelle rivers given the onset of rains in Somalia and the Ethiopian highlands. Areas to watch along the Shabelle River include Beletweyne town and its environs where the river is currently near bankfull and other riverine towns in the Lower Shabelle region. Areas to watch along the Juba include Luuq and the mid-reaches of the river. The flood risk could be further exacerbated by weak river embankments and open river banks commonly seen in

Somalia. New internal displacements increased from 11,000 families in August to 18,000 in September. (Source: OCHA Humanitarian Dashboard: September 2019)

HIGHLIGHTS (SEPTEMBER 2019)



CAMP COORDINATION AND CAMP MANAGEMENT

- 634 individuals entered into IDP sites in Kismayo, 12 exited
- 220 individuals entered into IDP sites in Doolow, 236 exited
- 2,439 individuals entered into IDP sites in Baidoa, 169 exited



DISPLACEMENT TRACKING MATRIX

- 30,982 movements were observed at flow monitoring points. 12,366 people were recorded entering Somalia, while 18,616 left.



MIGRATION HEALTH DIVISION

- 47 health clinics (28 Primary Health Care Centres, 14 Mobile Medical Teams, 3 Transit Centres, 2 Migration Resource Centre) supported
- 44,364 clinical consultations conducted



RECOVERY AND DURABLE SOLUTIONS

- 40 socio-economic infrastructures completed since January
- 2 ongoing socio-economic infrastructure projects
- 583,339 beneficiaries of completed socio-economic infrastructures



MIGRANT PROTECTION AND ASSISTANCE

- 140 Assisted Spontaneous Returns (ASR) and 32 Spontaneous Returns received from Yemen
- 55 Ethiopian migrants were assisted to return back to Ethiopia



LABOUR AND HUMAN DEVELOPMENT

- 14 medical professionals recruited in 6 regional hospitals
-

CROSS-CUTTING ACTIVITIES

Forced Eviction of Internally Displaced Persons (IDPs)

Many IDPs flee their home areas due to drought, insecurity and or other challenges. However, these difficulties are often replaced by a new fear, the threat of eviction for those who settle in camps located on privately owned land. The eviction of IDPs is not necessarily something new to the displacement reality of Somalia, however, in recent months forced eviction is on the rise, causing a serious protection concern.

Two such communities monitoring forced evictions are Baidoa and Kismayo. In Baidoa, forced evictions are the main cause of new displacement in Baidoa town. In this area most of the newly displaced people are prone to forced eviction because they have either settled on land without the consent of the land owners or there is lack of written tenure documents with witnesses. In September, 510 households (3,060 people) in seven IDP sites were forced to move from their settlement. Forced eviction often results in the loss of land through occupation and destruction of property. Having lost their homes, IDPs subsist in poorer living conditions with risks to their health, safety and exposure to gender-based violence or another forced evictions.

On Wednesday, 26 September the IOM site management team, in close cooperation with Housing, Land and Property (HLP) partners in Baidoa, conducted eviction monitoring and a mobilisation exercise for the seven IDP sites that were

affected by the eviction. The team provided HLP information to the 510 Households affected by the eviction.

Kismayo IDP sites are another location of concern where IDPs are at risk of eviction. In September, IOM conducted an eviction risk mapping exercise in 14 IDP sites in Kismayo. Through coordination with government agencies, IDP leaders and landowners, the Camp Coordination and Camp Management (CCCM) cluster partners managed to extend existing agreements between IDPs and landowners.



Evicted sites in Baidoa © IOM Somalia 2019



HUMANITARIAN RESPONSE

SAVE LIVES AND ALLEVIATE SUFFERING IN CRISIS-AFFECTED POPULATIONS



CAMP COORDINATION AND CAMP MANAGEMENT (CCCM)

IOM's CCCM teams improve the living conditions and protection of Internally Displaced Persons (IDPs) in sites and settlements and ensure equitable access to services and assistance of all persons in need in the regions of Kismayo, Doolow and Baidoa.

Baidoa

The IOM team continues to monitor movements at IDP sites in Baidoa and registered 2,439 new arrivals and 169 exits in September. The main reasons IDPs gave for entering Baidoa were insecurity and food shortages. In contrast those who left IDP sites sought better services in other locations.

Access to water, health, shelter and food continues to be the main needs for the IDPs in Baidoa. IOM CCCM reported that food insecurity exists in 301 IDP sites hosting 30,243 displaced households. The IDPs have to survive on one meal a day. The CCCM team reported that safe drinking water is beyond reach across 340 IDP sites hosting a total of 29,659 displaced households. Water is often provided by local vendors at prices that are not affordable to most IDPs.

To promote two-way communication with displaced populations in Baidoa, outreach teams go into the communities to inform them about the complaint and feedback mechanism at the community centres. In September, 2,450 were reached with such messages. IOM also conducts regular sensitizations with the community using community notice boards and door-to-door messaging. In addition, IOM works closely with partners to disseminate key messaging. There are eight information centres in place, each of which maintains a complaints and feedback desk to give beneficiaries the opportunity to communicate face-to-face with camp management. In September, 52 complaints cases were opened, while 43 cases were closed.

IOM also held several trainings regarding camp management in September on the roles and responsibilities of camp management and mainstreaming gender based violence in camp management. These trainings benefited 260 leaders from 18 IDP sites in Baidoa.

Coordination mechanisms among service providers to IDP sites in Baidoa is also led by IOM, with two meetings held in September to identify gaps, weaknesses and plans for humanitarian response. IOM also facilitated eight Community High Committee meetings and 16 site leader meetings which brought together camp management and the IDP community to better understand and respond to community needs.

Finally, representatives from the European Union Civil Protection and Humanitarian Aid (ECHO) representatives visited the Barwaqo 2 relocation site and assessed the site and the services provided.



IOM staff providing training in Baidoa © IOM Somalia 2019



Backfilling in Doolow © IOM Somalia 2019

Doolow

The IOM team in Doolow recorded the entry of 220 individuals in September to IDP sites and 236 exits. The majority of new arrivals (68%) came from Ethiopia due to insecurity, whereas those who exited went to Ethiopia. The current total population of the two IDP sites in Doolow is 50,916 individuals.

In order to mitigate potential flooding of IDP sites due to the start of the rainy season; lowland areas were backfilled. Additionally, site maintenance tools including wheelbarrows, rakes and spades were distributed to the IDP communities.

Community outreach activities in September included a clean-up campaign in the Qansaxley IDP site and a community session on hygiene promotion to educate people on the importance of good hygiene, washing hands and drinking clean water. Meanwhile, community members placed 77 complaints through the complaints and feedback mechanism, and 57 cases were closed. Most complaints related to bad conditions at the camps and a lack of shelter.

The CCCM cluster also conducted a two day training for 18 CCCM staff members working in Doolow IDP sites. The main aim of the training was to strengthen the capacity of the CCCM practitioners to effectively protect and assist displaced populations temporarily living in IDP camps in Doolow.



Cleaning campaign in Doolow © IOM Somalia 2019

Kismayo

The total number of IDPs in Kismayo as of September is 54,557 persons. Enumerators recorded 634 entries into IDP sites as well as 12 exits. The main reason mentioned for entering Kismayo IDP sites was insecurity and a shortage of food.

To better respond to the needs of residents at IDP sites in Kismayo, IOM mapped the available services in three sections of IDP sites and informed 65 households about these services including schools, nutrition centres and health facilities. IOM also distributed wheel barrows, spades, rakes, ladders and other tools to the communities to maintain the sites and improve its hygiene.

In order to enhance the accountability to affected populations, outreach teams reached 129 people and informed them about the help desks at the community information centres. A total of 75 cases were received in September related to CCCM, S-NFI and WASH; with 73 cases closed.

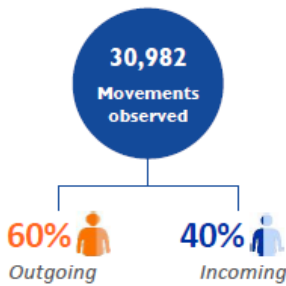


Distributed tools in Kismayo © IOM Somalia 2019



DISPLACEMENT TRACKING MATRIX (DTM)

IOM Somalia's Displacement Tracking Matrix strives to provide localized, up-to-date information on the basic needs of the target population, cross border mobility, displacement figures and trends in drought-affected areas.



In September 12,366 people were recorded entering Somalia, while 18,616 left.

CROSS BORDER MOVEMENTS – SOMALIA
SEPTEMBER 2019 [DOWNLOAD](#)



WATER, SANITATION AND HYGIENE (WASH)

Adequate access to WASH is essential to prevent dehydration and reduce the risk of water-related diseases. Moreover, good hygiene practices reduce the risk of diarrhoea, cholera and other disease outbreaks. The provision of WASH interventions is usually one of the highest priorities following the onset of any crisis, whether sudden or protracted, following a natural disaster or complex situation. IOM Somalia's WASH emergency programmes are focused on the immediate provision of water, sanitation, and hygiene services to affected populations across Somalia.

The WASH team, together with government officials launched the Kismayo and Baidoa Urban Water Supply Project funded by the African Development Bank.



Dyane Epstein @EpsteinDyane · Sep 16

#Ministryofenergyandwater #Jubaland, #SouthwestState, and @IOM_Somalia at the launch of the #AFDB project focusing on water and sanitation. #water is one of the greatest needs in Somalia.





MIGRATION HEALTH DIVISION (MHD)

The Migration Health Division delivers and promotes comprehensive, preventive and curative health programmes which are beneficial, accessible, and equitable for migrants and mobile populations. MHD, in close collaboration with partners, contributes towards the physical, mental and social well-being of migrants, enabling them and host communities to achieve social and economic development. IOM Somalia aims to deliver basic health care services for migrants and mobile populations who face many obstacles in accessing essential health care services due to a number of factors including the reoccurring drought and continuous conflict.

IOM continues to provide emergency primary healthcare and nutrition service across 47 health clinics including: 28 primary health care centres, 14 mobile medical teams, 3 transit centres, 2 migration resource centers and 12 integrated nutrition outpatient therapeutic programmes (OTP) across the country. The facilities are spread across Somaliland, Puntland, Benadir, Lower Shabelle, Lower Juba, and Gedo. In September, a total of 44,364 consultations were conducted reaching 16,806 patients under five years old and 27,558 patients over five years old; while 162 cases of severe acute malnutrition were admitted to nutrition OTPs for treatment.

Health Centres

September was a month for enhancing health centres in Somalia.

Allanley Health Centre in Kismayo was thoroughly rehabilitated and expanded, including the addition of a maternity unit. Following the renovation, the clinic was provided with maternity equipment and two additional midwives were recruited and provided on-job training on basic and emergency obstetric care. For the first time ever, the large IDP settlement in Allanley now has direct access to maternity and delivery services, which is anticipated to reduce maternal mortality from complicated cases and increase the number of facility-based deliveries (reducing risky home-based deliveries without health professionals).

Meanwhile the Waberi Health Centre in Dhobley was rehabilitated and expanded, adding additional rooms as well as a maternity unit for deliveries. The expansion of rooms enables separation of different services preventing cross-infection of patients and health workers. A drug dispensing room is now properly ventilated and will protect against the heat, maintaining the correct temperatures for drug storage. The facility also has new delivery rooms, drainage systems, handwashing facilities, and personal protective equipment (PPE) for health workers for infection prevention control. To support these improvements additional clinical staff (nurse and midwife) were recruited and trained to enable the provision of maternity and delivery services, and also an increased weekly mobile outreach to the displaced population communities.

In Hargeisa, the IOM-supported Ayah 4 health facility was damaged by heavy rains in September which prompted IOM to immediately repair and renovate the clinic ensuring that vital services will continue uninterrupted.

Mobile Medical Teams

In Lower Shabelle mobile medical teams provided medical services to recently liberated areas in Afgooye district, in coordination with IOM stabilization activities. The teams also conducted three successful emergency deliveries i.e. as a result of complications, there was no time for referral to Afgooye Hospital and the midwives had to conduct deliveries at the mobile team locations.

Collaboration with the Ministry of Health

Importantly, the Ministry of Health and IOM responded to a measles outbreak in Sabiid area of Lower Shabelle (23 cases, causing 11 deaths), effectively containing the outbreak and preventing a widespread epidemic.

Ready-to-use therapeutic food (RUTF) and integrated treatment of acute malnutrition into the mobile medical teams providing primary healthcare in Afgooye district was sourced by the Ministry of Health and IOM to allow for the treatment of severe acute malnutrition cases. This came after a community screening for malnutrition found over 60 per cent of screened children under five years old being acutely malnourished.

Global Fund Steering Committee

IOM hosts the Global Fund Steering Committee that brings together representatives from all regions for quarterly meetings. IOM facilitated a two-day meeting in mid-September for the steering committee. The meeting focused on a review of the Global Fund performance from January to June 2019 and the development of roadmap for the review of the Somali National Strategic Plan for HIV, TB and Malaria; and planning for the application process for the next round of Global Fund disbursements beginning in 2020.



Doolow Kabasa IDP site outreach team © IOM Somalia 2019



SHELTER AND NON-FOOD ITEM (S-NFI)

The Shelter team continues to consult with internally displaced people and local authorities on the provision of shelter and non-food items (NFI) to vulnerable populations. Depending on the affected community's vulnerabilities, assets, capacities, and preferences, identified populations are either provided with transitional shelters or more permanent structures where appropriate.

IOM is currently conducting assessments in Bay and Gedo regions for drought and flood responses. The S-NFI department is expanding its geographical response area from Doolow and Baidoa by adding other small towns in Gedo region such as Bardhere and Garbaharey.

Additionally, the team conducted several assessments in September including an updated shelter assessment in Baidoa targeting 4,000 households. While in Doolow an assessment was completed for cash-based intervention (CBI) and in-kind support targeting 500 households.



Needs assessment in Bardhere © IOM Somalia 2019



STABILIZATION & TRANSITION

ESTABLISH FOUNDATIONS FOR LONG-TERM RECOVERY AND DURABLE SOLUTIONS



DISARMAMENT, DEMOBILIZATION AND REINTEGRATION (DDR)

The DDR Unit works with marginalized youth at risk in Countering/Preventing Violent Extremism (C/PVE) and social cohesion, and supports the Federal Government of Somalia's National Programme for the Treatment and Handling of Disengaged Combatants.

Recently the DDR unit restructured case management services provided at the rehabilitation centres in Baidoa and Kismayo. At the beginning of 2019, the IOM-DDR unit hired local social workers for the purpose of improving and expanding psychosocial therapy and case management services provided at the centre level. The DDR unit also on-boarded a psychologist (case management coordinator) to train the social workers and provide therapy at the centre. Furthermore, assessment tools to assess beneficiary needs were developed and social workers were trained. The case management coordinator also rolled out a mental health assessment of all beneficiaries in Baidoa Centres to assess each beneficiary's wellbeing and develop an individualized case management plan for the purpose of enhancing the graduation readiness of each student.

A market activity overview was conducted in Baidoa and Kismayo to identify potential business opportunities for beneficiaries enrolled in the Start and Improve Your Business course and opportunities for innovative market-based vocational training in the DDR centres. IOM mapped a total of 323 businesses across 17 markets in Baidoa and Kismayo, annotating business category and product sold/service provided to understand market saturation and market gaps. IOM also conducted interviews with 144 business owners in Kismayo and Baidoa on business size, age of business, and expenditure/

revenue to inform beneficiaries about market opportunities. Finally, IOM interviewed 162 consumers in Kismayo and Baidoa to understand market demand. The results identified five unique vocational training opportunities in Baidoa (shoe repair, motorcycle/tuk-tuk repair, furniture-making, honey production, and dairy processing) and three in Kismayo (mobile repair, outboard boat engine repair, honey production) as well as numerous business opportunities for beneficiaries.

Project activities for the project 'Leveraging the Strength of Women in Peace Building and Promoting Gender Sensitivity in the National Programme on Disengaged Combatants' continued in September in Mogadishu, Kismayo and Baidoa. The 150 beneficiaries are receiving community-based rehabilitation and reintegration services including case management, religious and psychosocial counselling, literacy and numeracy education, and access to livelihoods initiatives.

Outreach activities also started in September. A radio panel discussion on women's perspectives on prevention and countering violent extremism were aired by a Mogadishu-based radio station on 16 September 2019. The discussion covered key points and debated during a community consultation engaging government representatives, community women, college students and 50 beneficiaries.



RETURN, RECOVERY AND DURABLE SOLUTIONS (RDS)

The IOM RDS Unit works to bridge humanitarian, development and peace/state building efforts and operationalize a paradigm shift from aid-agency driven modalities to one where the government and community co-design and lead their nationally aligned and owned programming. The RDS Unit activities promote: durable solutions for returnees and IDPs; increased social cohesion; improved government capacities to lead on durable solutions at Federal Member States and district levels in urban and peri-urban areas. Currently, IOM RDS programming is operational in Jubaland, South West State, and Hirshabelle.

IOM officially launched the Community Action Plan in Beledweyne, with the presence of the mayor Safiya and community consultants. This will pave the way for future community driven activities.



CAP launch in Beledweyne © IOM Somalia 2019

In Adale, the construction of the women's centre and rehabilitation of Sheikh Ahmed Gabyow primary school was completed and handed over as part of a ceremony led by vice president Ali Gudlawe and other ministers. In addition, the vice president laid the foundations for rehabilitation of Adale police station.

The Midnimo 1 project (Support for the Attainment of Durable Solutions in Areas Impacted by Displacement and Returns, in Jubaland, South West, and Hirshabelle States) official closing event was attended by members of core facilitation team, UNHABITAT and IOM staff, UN Peace Building Fund staff, the director general of Kismayo, and Mayor of Baidoa. The closing

event included presentations followed by plenary discussions on, inter alia, the catalytic effects of community action planning with experiences from Hudur, Balad, and Kismayo; the impact of spatial and social integration, the government's role in leading community driven projects; lessons learned from Midnimo 1 for upcoming durable solution projects.

Benadir Region Durable Solution Unit, government and community leadership representatives were trained on inclusive community planning, along the lines of the Wadajir Community Consensus process. As a result, BRA is mobilizing displacement affected communities (with support of relevant partners) to facilitate inclusive processes for community-based planning, targeting Heliwa resettlement site. This is envisaged to enhance government ownership of a key process for durable solutions. Meanwhile in BRA cash for work activities under the government 'Mogadishu Stabilization Plan' ended and reached 1,274 individuals in districts that are vulnerable to extremist recruitment.

Finally, in September the Bulagaduud Health Centre construction was completed, supported by both the IOM RDS and Health teams. The health centre is now operational with 13 clinical staff, and four support staff. To date, the health centre staff has carried out 239 consultations, immunized 46 children, admitted 21 malnourished children to outpatient therapeutic feeding programme (OTP) and the prenatal clinic has provided care for 39 women.



Bulagaduud health centre © IOM Somalia 2019



MIGRATION GOVERNANCE & DEVELOPMENT

ADVANCE THE WELLBEING OF SOCIETY AND MIGRANTS THROUGH STRONGER MIGRATION GOVERNANCE AND DEVELOPMENT



IMMIGRATION AND BORDER MANAGEMENT (IBM)

IOM's Immigration and Border Management programme supports the Government of Somalia in promoting safe and orderly migration, securing borders and building the capacity of immigration officials.

IOM's roving Information Technology officer installed equipment for the Migration Information and Data Analysis System (MIDAS) at the newly constructed land border post in Elbarde. Two MIDAS stations were installed at the departure section and two at the arrival section. These workstations were fully equipped with MIDAS peripherals including Passport Readers, and web cameras; in addition to fully equipping one station for the server room including the installation of the local-area network (LAN). On the job MIDAS training for the three Immigration Officers stationed at the border between Somalia and Ethiopia was also conducted.

Under the RMRP Project, funded by the United States Department of State, IOM in collaboration with the Somaliland Immigration Border Control (SIBC) conducted two simultaneous Humanitarian Border Management (HBM) roll out training in Borama and Berbera. The trainings were conducted by 12 members from Somaliland Immigration and Coastguard who were trained by IOM's African Capacity Building Centre (ACBC) earlier in July. The roll out trainings were attended by 59 participants from Hargeisa, Berbera, Wajale Zeilla, Lawyaddo, Garoyawl, Wajale, Burao, Lasanod, Erigavo and Maydh; and included 5 females and 54 males.

Under the Better Migration Management Programme (BMM), IOM through its Migration for Development in Africa (MIDA)

Law expert hosted a meeting in Mogadishu which brought together 18 Ministries, departments and Agencies involved in Border Management. The purpose of this meeting was to validate the Standard Operation Procedures (SOPs) guidelines to enhance Border Management and to Launch the Mogadishu Integrated Border Management Committee. These SOPs are the tools to formally establish the Inter-Agency Coordination Committee and act as a guide for all institutions involved to cooperate, share information and coordinate their work for border security.



Immigration officers in Elbarde with equipment provided by IOM © IOM Somalia 2019



MIGRANT PROTECTION AND ASSISTANCE (MPA)

IOM MPA division provides technical expertise in areas of migration policy, administrative and operational practices, procedures for countering human trafficking and smuggling, and direct assistance to migrants.

Consular support was provided to 57 migrants (30 male, 1 boy and 26 female) through the issuance of travel documents in Hargeisa and Bossaso. Additionally, vulnerability screening was done by IOM and MRC staff in Hargeisa and Bossaso. In Bossaso, two medical cases were referred while five people (4 male, 1 female) were referred to the TASS Safe House in Bossaso for shelter and food, while awaiting Assisted Voluntary Return.

In September 55 Ethiopian migrants (29 male and 26 female) were assisted to return to Ethiopia. Also, IOM received 140 Assisted Spontaneous Returns (ASR; 74 female and 66 male) and 32 Spontaneous Returns (27 male and 5 female) from Yemen.

As part of the EU-IOM Joint Initiative programme, Project Performance Monitoring Meetings were organized in Mogadishu, Hargeisa and Bossaso, which were attended by returnees, their family members, community representatives and IOM staff. The discussions focused on the direct

assistance and protection of migrants in transit, and the outreach and awareness raising activities. The need to strengthen the psychosocial support to returnees who often feel angry and the stigma of migration was also highlighted. At the same time, the relevance of the program in supporting stranded migrants by providing an opportunity to safely return home, the effectiveness in making feel returning migrants and in addressing the immediate post-arrival needs were celebrated as the main strengths of the programme. Also recommendations were made to enhance the provision of trainings and life-skills opportunities.

Finally, through funding from KS Relief, the construction of the new NDRA office in Hargeisa has been completed. The construction of the community centre and clinic in Bossaso and the community centre in Burao are almost finalized.



LABOUR AND HUMAN DEVELOPMENT (LHD)

The Labour Mobility and Human Development (LHD) programme focuses its interventions on promoting pathways of labour migration, enhancing coordination for diaspora engagement, strengthening institutional capacity and, mitigating the drivers of irregular migration.

MIDA FINNSOM IV project team and Somaliland Ministry of Health Development (MoHD) has completed the recruitment process for 14 medical professionals who will be deployed to the six main regional hospitals. The newly recruited team will join 29 medical experts who are already engaged in the capacity building of the hospitals. LHD together with Ministry of Health Development conducted an orientation workshop and capacity-building training on 21 September 2019 in Berbera for the new recruits. The overall objective of the workshop was to educate the newly recruited national experts about FINNSOM IV project, reporting responsibilities and other HR-related issues including insurance, leave policies, skill transfer approaches, payments, and other benefits.

The LHD team carried out a mission in preparation for a baseline assessment to targeted public institutions under the FINNSOM project. Specifically, the team visited the Ministry of Health and Human Services (MoHHS) and the newly reestablished public hospitals (De Martino Hospital and Banadir Hospital) to collect benchmark data. IOM is currently recruiting medical practitioners to be placed at the hospitals through the MIDA project. Additionally, De Martino hospital received five new incubators from AISC (the Italian Embassy) with support from technicians brought in from Kenya for their installment. Incubators are crucial in saving the lives of newborns.



LHD team at De Martino Hospital in Mogadishu © IOM Somalia 2019



Mother and Child Clinic in Hargeisa where IOM diaspora experts are working © IOM Somalia 2019

HUMAN INTEREST STORY

MEET ABDULLAHI DHEEROW ISAAQ



Abdullahi Dheerow Isaaq is a sheriff at the Isha Baidoa police station in the Dar-es-salaam district which for a long time has been missing an adequate police station. Abdullahi describes the challenges he and his colleagues have faced before the new police station was constructed. “We had many challenges before the station was built. We had no facility, no holding cells for detained suspects, and we were stationed in an open area whether it was day or night, come rain or shine.” In order to find solutions to the situation, Abdullahi and his community came together and addressed the need by appealing to local authorities and the community through the Community Action Plan (CAP) process.

The CAP is the result of an inclusive consultative process from different groups of the community together with local authorities and government officials. CAPs reflect the community priorities for stabilization and early recovery and reflect the outcome of a five-day inclusive process/workshop with a diverse group of individuals. Projects included in the CAP aimed at government-led inclusive access to essential services, conflict reduction, and peacebuilding.

Without appropriate facilities, the officers struggled to carry out their work efficiently. “We were not able to follow protocol safely because we were not able to hold detainees for the required 24 hours. We were forced to arrange the release of the suspects and coordinate with other busy stations to send police vehicles for arrests.” For Abdullahi and his colleagues, the challenges were not

only related to their daily duties but also their safety as employees of the police force. “After ending their shift, officers had no room to change their uniforms, which put them at risk in terms of their safety as they were forced to return home in their uniforms. They could have been easily targeted by criminal organizations as they were easily identifiable as policemen working for the city.”

After the police post was constructed, the situation started to change rapidly. The officers now have shelter and they are able to better implement due process of the law and securely detain suspected criminals. “There is an increasing amount of cases being reported from within the Dar-es-salaam neighbourhood and I believe that the residents also feel an increased sense of security with the newly constructed police station. I have to give a lot of praise to the state, the municipality, along with the donor organizations involved in covering the gaps and better addressing the challenges the law enforcement faced as part of the community here in Dar-es-salaam.” Abdullahi feels that one of the core issues they were struggling with has now been resolved.

This project is led by the Government of Somalia with support from the UN Peacebuilding Fund and the Government of Japan, and is jointly implemented by IOM and UNHABITAT.

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