

# Somalia

This document is a compilation of all questions, justifications, and sources used to determine the 2021 Global Health Security Index scores for Somalia. For a category and indicator-level summary, please see the Country Profile for Somalia.

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## Category 1: Preventing the emergence or release of pathogens with potential for international concern

### 1.1 ANTIMICROBIAL RESISTANCE (AMR)

#### 1.1.1 AMR surveillance, detection, and reporting

##### 1.1.1a

**Is there a national AMR plan for the surveillance, detection, and reporting of priority AMR pathogens?**

Yes, there is evidence of an AMR plan, and it covers surveillance, detection, and reporting = 2, Yes, there is evidence of an AMR plan, but there is insufficient evidence that it covers surveillance, detection, and reporting = 1, No evidence of an AMR plan = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has a national Antimicrobial Resistance Plan (AMR). Somalia does not have a national AMR action plan listed on the World Health Organisation (WHO) Library of national action plans. [1] According to the WHO Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, Somalia does not have an AMR action plan in a draft or final form. [2] There is no mention of a national AMR plan on the Ministry of Health of the Republic of Somalia website. [3] There is no relevant information on the Ministry of Agriculture website. [4]

[1] World Health Organisation (WHO). "Library of national action plans." [<https://www.who.int/antimicrobial-resistance/national-action-plans/library/en/>]. Accessed 6 December 2020.

[2] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[3] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed December 2020.

[4] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

##### 1.1.1b

**Is there a national laboratory/laboratory system which tests for priority AMR pathogens?**

All 7 + 1 priority pathogens = 2, Yes, but not all 7+1 pathogens = 1, No = 0

**Current Year Score: 2**

The Republic of Somalia has designated laboratories with the capacity to detect all 7 + 1 priority pathogens. According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE), conducted 17 to 21 October 2016, Somalia has three human laboratories in Mogadishu, Bosaso (Puntland) and Hargeisa (Somaliland), which have the capacity to detect and report all seven priority AMR (antimicrobial resistant) pathogens (*E. coli*, *K. pneumoniae*, *S. aureus*, *S. pneumoniae*, *Salmonella* spp., *Shigella* spp., *N. gonorrhoeae*) and *Mycobacterium tuberculosis*. However, the JEE notes that capacity to detect AMR pathogens at the country level is not developed with the exception of a few larger hospitals, including Mogadishu Turkish Hospital. [1] There is no information available on the Laboratory and Blood Banks page of the Ministry of Health website. [2] There is no relevant information on the Ministry of Agriculture and Irrigation of Somalia website. [3] Somalia does not have a national AMR action plan listed on the WHO library of national action plans. [4]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. "Laboratory and Blood Banks," [<http://moh.gov.so/en/departments/medical-services/laboratory-blood-banks>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of South Sudan. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[4] World Health Organisation (WHO). "Library of national action plans." [<https://www.who.int/antimicrobial-resistance/national-action-plans/library/en/>]. Accessed 6 December 2020.

### 1.1.1c

**Does the government conduct environmental detection or surveillance activities (e.g., in soil, waterways) for antimicrobial residues or AMR organisms?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is no evidence that the government of Somalia conducts detection or surveillance activities (e.g. in soil, waterways, etc.) for antimicrobial residues or AMR (antimicrobial resistant) organisms. The World Health Organisation (WHO), Joint External Evaluation of IHR Core Capacities (JEE), of the Republic of Somalia, conducted 17 to 21 October 2016, makes no mention of any environmental surveillance of AMR residues or organisms by any entity including Somalia's Ministry of Environment. [1] The Ministry of Environment was created in March 2016 but does not appear to have an active website. [2] Neither the Ministry of Health website nor the Ministry of Agriculture website discuss this issue. [3,4] Somalia does not have a national AMR action plan listed on the WHO library of national action plans. [5]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] United Nations Development Programme (UNDP). 1 March 2016. "Federal Government of Somalia Establish Environment Wing in Office of the Prime Minister with the support of UNDP." [<http://www.so.undp.org/content/somalia/en/home/presscenter/articles/2016/03/01/federal-government-of-somalia-establish-environment-wing-in-office-of-the-prime-minister-with-the-support-of-undp.html>]. Accessed 6 December 2020.

[3] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[4] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[5] World Health Organisation (WHO). "Library of national action plans." [<https://www.who.int/antimicrobial-resistance/national-action-plans/library/en/>]. Accessed 6 December 2020.

## 1.1.2 Antimicrobial control

### 1.1.2a

**Is there national legislation or regulation in place requiring prescriptions for antibiotic use for humans?**

Yes = 2 , Yes, but there is evidence of gaps in enforcement = 1 , No = 0

**Current Year Score: 0**

There is no evidence that Somalia has a law requiring a prescription for antibiotics for humans. According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, antibiotics for humans are easy to obtain and there are no laws mandating a prescription. [1] There is no

relevant information on the Ministry of Health or Ministry of Agriculture websites. [2,3] Somalia does not have a national AMR action plan listed on the WHO library of national action plans. [4] There is no evidence of a law relating to antibiotics on the Library of Congress Law Online guide for Somalia. [5]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[4] World Health Organisation (WHO). "Library of national action plans." [<https://www.who.int/antimicrobial-resistance/national-action-plans/library/en/>]. Accessed 6 December 2020.

[5] Library of Congress, Law Online. "Somalia." [<https://www.loc.gov/law/help/guide/nations/somalia.php>] Accessed 6 December 2020.

### 1.1.2b

**Is there national legislation or regulation in place requiring prescriptions for antibiotic use for animals?**

Yes = 2 , Yes, but there is evidence of gaps in enforcement = 1 , No = 0

**Current Year Score: 0**

There is no evidence that Somalia has a law requiring a prescription for antibiotics for animals. According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, antibiotics for animals are easy to obtain and there are no laws mandating a prescription. Additionally, "the types and quantities of antibiotics used in the animal sector are not known." [1] There is no relevant information on the Ministry of Health or Ministry of Agriculture websites. [2,3] Somalia does not have a national AMR action plan listed on the WHO library of national action plans. [4] There is no evidence of a law relating to antibiotics on the Library of Congress Law Online guide for Somalia. [5]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[4] World Health Organisation (WHO). "Library of national action plans." [<https://www.who.int/antimicrobial-resistance/national-action-plans/library/en/>]. Accessed 6 December 2020.

[5] Library of Congress, Law Online. "Somalia." [<https://www.loc.gov/law/help/guide/nations/somalia.php>] Accessed 6 December 2020.

## 1.2 ZOOONOTIC DISEASE

### 1.2.1 National planning for zoonotic diseases/pathogens

#### 1.2.1a

**Is there national legislation, plans, or equivalent strategy documents on zoonotic disease?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has a national law, plan, or equivalent strategy document, on zoonotic disease. According to the World Health Organisation (WHO), Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, Somalia does not yet have any functional plans or laws on zoonotic disease. The JEE describes existing laws for exportation and quarantine of animals, but they do not address zoonotic disease. However, "Somalia has initiated a One Health/Zoonotic Disease Unit as a joint venture between the human and animal health authorities in South Central zone. Under this initiative, a technical working group has been nominated which is drafting a strategic document for One Health." [1] There is no relevant information on the Ministry of Health or the Ministry of Agriculture websites. [2,3] There is no evidence of relevant legislation on the Library of Congress Law Online guide for Somalia. [4]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[4] Library of Congress, Law Online. "Somalia." [<https://www.loc.gov/law/help/guide/nations/somalia.php>] Accessed 6 December 2020.

### 1.2.1b

**Is there national legislation, plans or equivalent strategy document(s) which includes measures for risk identification and reduction for zoonotic disease spillover events from animals to humans?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is no evidence of national legislation, plans or equivalent strategy documents which include measures for risk identification and reduction for zoonotic disease spillover events from animals to humans in Somalia. There is no relevant information on the Ministry of Health or the Ministry of Agriculture websites. [1,2] There is no evidence of relevant legislation on the Library of Congress Law Online guide for Somalia. [3] According to the World Health Organisation's (WHO) Joint External Evaluation of IHR Core Capacities of the Republic of Somalia, conducted in October 2016, Somalia does not yet have any functional plans or laws on zoonotic disease. The JEE describes existing laws for the exportation and quarantine of animals, but none that address zoonotic disease. [4]

[1] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[2] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[3] Library of Congress, Law Online. "Somalia." [<https://www.loc.gov/law/help/guide/nations/somalia.php>] Accessed 6 December 2020.

[4] World Health Organization. "Joint External Evaluation of IHR Core Capabilities of the Republic of Somalia." [<https://www.who.int/ihr/publications/WHO-WHE-CPI-2017.17/en/>] Accessed 26 December 2020.

### 1.2.1c

**Is there national legislation, plans, or guidelines that account for the surveillance and control of multiple zoonotic pathogens of public health concern?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is no evidence that Somalia has national plans, guidelines, or laws that account for the surveillance and control of multiple zoonotic pathogens of public health concern. According to the World Health Organisation (WHO), Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, Somalia does not yet have any functional plans or laws on zoonotic disease. The JEE describes existing laws for exportation and quarantine of animals, but they do not address zoonotic disease. However, "Somalia has initiated a One Health/Zoonotic Disease Unit as a joint venture between the human and animal health authorities in South Central zone. Under this initiative, a technical working group has been nominated which is drafting a strategic document for One Health." A 2019 report on the One Health Policy Context of Ethiopia, Somalia and Kenya states that Somalia "does not have in place a One Health Strategy but there are NGO supported initiatives that are supporting One Health approach." [1] There is evidence of surveillance of two priority zoonotic diseases, brucellosis and River Valley Fever (RVF). The surveillance of RVF is mandatory for the exportation of livestock, but there is not broader law about zoonotic disease surveillance. [2] There is no relevant information on the Ministry of Health or the Ministry of Agriculture websites. [3,4] There is no evidence of relevant legislation on the Library of Congress Law Online guide for Somalia. [5]

[1] One Health Units for Humans, Environment, Animals and Livelihoods (HEAL) Project. December 2019. "One Health Policy Context of Ethiopia, Somalia and Kenya." [<https://cgspace.cgiar.org/rest/bitstreams/183816/retrieve>] Accessed 6 December 2020.

[2] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[3] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[4] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[5] Library of Congress, Law Online. "Somalia." [<https://www.loc.gov/law/help/guide/nations/somalia.php>] Accessed 6 December 2020.

**1.2.1d**

**Is there a department, agency, or similar unit dedicated to zoonotic disease that functions across ministries?**

Yes = 1, No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has a functioning department, agency or similar unit dedicated to zoonotic disease that functions across ministries. According to the World Health Organisation (WHO), Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, "Somalia has initiated a One Health/Zoonotic Disease Unit as a joint venture between the human and animal health authorities in South Central zone. Under this initiative, a technical working group has been nominated which is drafting a strategic document for One Health." [1] There is no more recent information indicating whether or not this Zoonotic Disease Unit has been implemented. A 2019 report on the One Health Policy Context of Ethiopia, Somalia and Kenya states that Somalia "does not have in place a One Health Strategy but there are NGO supported initiatives that are supporting One Health approach." [2] There is no relevant information on the Ministry of Health or the Ministry of Agriculture websites. [3,4]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] One Health Units for Humans, Environment, Animals and Livelihoods (HEAL) Project. December 2019. "One Health Policy

Context of Ethiopia, Somalia and Kenya." [<https://cgspace.cgiar.org/rest/bitstreams/183816/retrieve>] Accessed 6 December 2020.

[3] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[4] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

## 1.2.2 Surveillance systems for zoonotic diseases/pathogens

### 1.2.2a

**Does the country have a national mechanism (either voluntary or mandatory) for owners of livestock to conduct and report on disease surveillance to a central government agency?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has a established voluntary or mandatory national mechanism for owners of livestock to conduct and report on disease surveillance to a central government agency. The Veterinary Law Code of 2016 of the Ministry of Livestock, Forestry and Range of the Republic of Somalia describes the functions of the Veterinary Service of Somalia including, but not limited to disease investigation, diagnosis, reporting and notification, control of zoonoses, food hygiene and meat inspection. Section 3.3 Internal Disease Notification states "Any veterinarian, animal health assistant, zoo technician, pharmacist or other professional category (such as researchers), or person having in possession or charge of an animal, that have reason to believe or suspect the occurrence of any transmissible disease shall inform the nearest veterinary authority of the district or region where such disease is believed or suspected to have occurred." However, the document does not describe the specific mechanism for notification or describes what constitutes a veterinary authority or how to find them. [1] The Ministry of Agriculture and Livestock does not discuss this issue. [2] The Ministry of Health does not discuss this issue. [3] According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, there is a World Organisation for Animal Health (OIE) operational contact point, but "no mechanism ensures that the IHR NFP and OIE contact points exchange information. The IHR NFP/ OIE contact points have undergone no training for this role, and no guidelines are in place to make decisions on reporting...The system is in need of development both horizontally within the country and vertically for reporting internationally." There is also no mention of internal reporting of Somali officials or civilians to the OIE contact point. [4]

[1] Ministry of Livestock, Forestry and Range of the Republic of Somalia. "Veterinary Law Code --2016." [<http://extwprlegs1.fao.org/docs/pdf/som171698.pdf>]. Accessed 6 December 2020.

[2] Ministry of Agriculture and Immigration of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[3] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[4] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

### 1.2.2b

**Is there legislation and/or regulations that safeguard the confidentiality of information generated through surveillance activities for animals (for owners)?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence of laws or guidelines that safeguard the confidentiality of information generated through surveillance activities for animals (for owners). The Ministry of Health and Ministry of Agriculture and Irrigation websites do not comment on this issue. [1,2] The Veterinary Law Code of 2016 of the Ministry of Livestock, Forestry and Range of the Republic of Somalia does not comment on this issue. [3] There is no website for the Ministry of Livestock, Forestry and Range. The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, does not comment on this issue. [4]

[1] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[2] Ministry of Agriculture and Immigration of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[3] Ministry of Livestock, Forestry and Range of the Republic of Somalia. "Veterinary Law Code --2016."

[<http://extwprlegs1.fao.org/docs/pdf/som171698.pdf>]. Accessed 6 December 2020.

[4] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

### 1.2.2c

**Does the country conduct surveillance of zoonotic disease in wildlife (e.g., wild animals, insects, other disease vectors)?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia conducts surveillance of zoonotic disease in wildlife. The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, mentions surveillance of livestock, but does not discuss wildlife surveillance for zoonotic disease. [1] The Ministry of Agriculture and Irrigation website does not include any information regarding surveillance of wildlife for zoonotic disease. [2] There is no relevant information on the Ministry of Health website. [3] The Veterinary Law Code of 2016 of the Ministry of Livestock, Forestry and Range of the Republic of Somalia, Article 2.1.2 discusses Functions of the Veterinary Service, which includes disease surveillance and monitoring, control of zoonoses, and wildlife disease monitoring. Section 12.4 describes functions of the Ministerial Disease Emergency Task Force, which includes maintaining key data on livestock and wildlife populations.[4]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Agriculture and Immigration of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[3] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[4] Ministry of Livestock, Forestry and Range of the Republic of Somalia. "Veterinary Law Code --2016."

[<http://extwprlegs1.fao.org/docs/pdf/som171698.pdf>]. Accessed 6 December 2020.

## 1.2.3 International reporting of animal disease outbreaks

### 1.2.3a

**Has the country submitted a report to OIE on the incidence of human cases of zoonotic disease for the last calendar year?**

Yes = 1 , No = 0

**Current Year Score: 0**

2019

OIE WAHIS database

## 1.2.4 Animal health workforce

### 1.2.4a

**Number of veterinarians per 100,000 people**

Input number

**Current Year Score: 15.97**

2019

OIE WAHIS database

### 1.2.4b

**Number of veterinary para-professionals per 100,000 people**

Input number

**Current Year Score: 12.26**

2019

OIE WAHIS database

## 1.2.5 Private sector and zoonotic

### 1.2.5a

**Does the national plan on zoonotic disease or other legislation, regulations, or plans include mechanisms for working with the private sector in controlling or responding to zoonoses?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is no evidence Somalia has legislation or regulations that include mechanisms for working with the private sector in controlling or responding to zoonoses. According to the World Health Organisation (WHO), Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, Somalia does not yet have any functional plans or laws on zoonotic disease. The JEE describes existing laws for exportation and quarantine of animals, but they do not address zoonotic disease. There is evidence of surveillance of two priority zoonotic diseases, brucellosis and River Valley Fever (RVF). The surveillance of RVF is mandatory for the exportation of livestock, but there is not broader law about zoonotic disease surveillance.[1] There is no relevant information on the Ministry of Health or the Ministry of Agriculture websites. [2,3]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

## 1.3 BIOSECURITY

### 1.3.1 Whole-of- government biosecurity systems

#### 1.3.1a

**Does the country have in place a record, updated within the past five years, of the facilities in which especially dangerous pathogens and toxins are stored or processed, including details on inventories and inventory management systems of those facilities?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has in place a record, updated within the past 5 years, of the facilities in which especially dangerous pathogens and toxins are stored or processed, including details on inventories and inventory management systems of those facilities. According to the World Health Organisation (WHO), Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, there is almost no infrastructure, guidelines, or policies governing biosecurity or biosafety in the country. There is no mention of facilities and the JEE notes "the lack of biosafety and biosecurity systems has already caused problems since laboratories cannot be sent reference strains due to insufficient biosafety and biosecurity." [1] The Ministry of Health and Ministry of Agriculture and Irrigation do not discuss this issue. [2,3] There is no relevant information on the Ministry of Defence website. [4] Somalia is a state signatory to the Biological Weapons Convention. State parties report to the United Nations Office at Geneva (UNOG) every year for the "Confidence Building Measure Return" (CBM), which is a reporting mechanism set by the Biological Weapons Convention. The reporting includes data on Biosafety Level (BSL) facilities, their level, location, floor area of the laboratory, types of pathogens stored and processed, the organizational structure of the facilities, etc. However, there is no evidence that Somalia has submitted a CBM report in the last two years or at all. [5] There is no website for the Ministry of Research for Somalia. There is no relevant information on the VERTIC database. [6]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[4] Ministry of Defence of the Republic of Somalia. [<http://mod.gov.so/>]. Accessed 6 December 2020.

[5] United Nations Biological Weapons Convention (BWC) Electronic Confidence Building Measures Portal. "Submissions Made by States Parties by Year." [[https://bwc-ecbm.unog.ch/?field\\_form\\_year\\_tid=548](https://bwc-ecbm.unog.ch/?field_form_year_tid=548)]. Accessed 6 December 2020.

[6] VERTIC. "BWC Legislation Database." [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/>] Accessed 6 December 2020.

#### 1.3.1b

**Does the country have in place legislation and/or regulations related to biosecurity which address requirements such as physical containment, operation practices, failure reporting systems, and/or cybersecurity of facilities in which especially dangerous pathogens and toxins are stored or processed?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has in place legislation and/or regulations related to biosecurity which address requirements such as physical containment, operation practices, failure reporting systems and/or cybersecurity of facilities in which especially dangerous pathogens and toxins are stored or processed. According to the World Health Organisation (WHO), Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, "there is currently no national biosafety and biosecurity legislation, regulations or guidelines." The JEE also notes that the biosafety and biosecurity situation is so undeveloped that, "there was no opportunity to visit laboratories during the assessment. There was no biosafety and biosecurity related documentation available." [1] The Ministry of Health and Ministry of Agriculture and Irrigation do not discuss this issue. [2,3] There is no relevant information on the Ministry of Defence website. [4] Somalia is a state signatory to the Biological Weapons Convention. State parties report to the United Nations Office at Geneva (UNOG) every year for the "Confidence Building Measure Return" (CBM), which is a reporting mechanism set by the Biological Weapons Convention. The reporting includes data on Biosafety Level (BSL) facilities, their level, location, floor area of the laboratory, types of pathogens stored and processed, the organizational structure of the facilities, etc. However, there is no evidence that Somalia has submitted a CBM report in the last two years or at all. [5] There are no relevant laws or regulations listed on the VERTIC Biological Weapons Convention Legislation Database. [6] There is not a website for the Ministry of Research for Somalia.

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[4] Ministry of Defence of the Republic of Somalia. [<http://mod.gov.so/>]. Accessed 6 December 2020.

[5] United Nations Biological Weapons Convention (BWC) Electronic Confidence Building Measures Portal. "Submissions Made by States Parties by Year." [[https://bwc-ecbm.unog.ch/?field\\_form\\_year\\_tid=548](https://bwc-ecbm.unog.ch/?field_form_year_tid=548)]. Accessed 6 December 2020.

[6] VERTIC Biological Weapons Convention (BWC) Legislation Database. "Somalia (Signatory)." [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/>]. Accessed 6 December 2020.

**1.3.1c**

**Is there an established agency (or agencies) responsible for the enforcement of biosecurity legislation and regulations?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has an established agency or agencies responsible for the biosecurity enforcement and there is no evidence of existing biosecurity legislation and regulation. The World Health Organisation (WHO), Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, "there is currently no national biosafety and biosecurity legislation, regulations or guidelines." The JEE does not mention any agencies responsible for biosecurity. [1] The Ministry of Health and Ministry of Agriculture and Irrigation do not discuss this issue. [2,3] There is no relevant information on the Ministry of Defence website. [4] Somalia is a state signatory to the Biological Weapons Convention. State parties report to the United Nations Office at Geneva (UNOG) every year for the "Confidence Building Measure Return" (CBM), which is a reporting mechanism set by the Biological Weapons Convention. However, there is no evidence that Somalia has submitted a CBM report in the last two years or at all. [5] There is not a website for the Ministry of Research for Somalia. There are no relevant laws or regulations listed on the VERTIC Biological Weapons

Convention Legislation Database. [6]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[4] Ministry of Defence of the Republic of Somalia. [<http://mod.gov.so/>]. Accessed 6 December 2020.

[5] United Nations Biological Weapons Convention (BWC) Electronic Confidence Building Measures Portal. "Submissions Made by States Parties by Year." [[https://bwc-ecbm.unog.ch/?field\\_form\\_year\\_tid=548](https://bwc-ecbm.unog.ch/?field_form_year_tid=548)]. Accessed 6 December 2020.

[6] VERTIC Biological Weapons Convention (BWC) Legislation Database. "Somalia (Signatory)." [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/>]. Accessed 6 December 2020.

### 1.3.1d

**Is there public evidence that shows that the country has taken action to consolidate its inventories of especially dangerous pathogens and toxins into a minimum number of facilities?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has taken action to consolidate its inventories of especially dangerous pathogens and toxins into a minimum number of facilities. The World Health Organisation (WHO), Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, "there is currently no national biosafety and biosecurity legislation, regulations or guidelines." The JEE does not discuss any inventories or dangerous pathogens and toxins or facilities. [1] The Ministry of Health and Ministry of Agriculture and Irrigation do not discuss this issue. [2,3] There is no relevant information on the Ministry of Defence website. [4] Somalia is a state signatory to the Biological Weapons Convention. State parties report to the United Nations Office at Geneva (UNOG) every year for the "Confidence Building Measure Return" (CBM), which is a reporting mechanism set by the Biological Weapons Convention. The reporting includes data on Biosafety Level (BSL) facilities, their level, location, floor area of the laboratory, types of pathogens stored and processed, the organizational structure of the facilities, etc. However, there is no evidence that Somalia has submitted a CBM report in the last two years or at all. [5] There is not a website for the Ministry of Research for Somalia. There are no relevant laws or regulations listed on the VERTIC Biological Weapons Convention Legislation Database. [6]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[4] Ministry of Defence of the Republic of Somalia. [<http://mod.gov.so/>]. Accessed 6 December 2020.

[5] United Nations Biological Weapons Convention (BWC) Electronic Confidence Building Measures Portal. "Submissions Made by States Parties by Year." [[https://bwc-ecbm.unog.ch/?field\\_form\\_year\\_tid=548](https://bwc-ecbm.unog.ch/?field_form_year_tid=548)]. Accessed 6 December 2020.

[6] VERTIC Biological Weapons Convention (BWC) Legislation Database. "Somalia (Signatory)." [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/>]. Accessed 6 December 2020.

### 1.3.1e

**Is there public evidence of in-country capacity to conduct Polymerase Chain Reaction (PCR)–based diagnostic testing for anthrax and/or Ebola, which would preclude culturing a live pathogen?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient public evidence of in-country capacity in Somalia to conduct Polymerase Chain Reaction (PCR)-based diagnostic testing for anthrax or Ebola, which would preclude culturing a live pathogen. According to the World Health Organisation (WHO), Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, anthrax is a country specific priority zoonotic disease for Somalia. However, it does not discuss a Polymerase Chain Reaction (PCR)-based diagnostic testing for anthrax. The JEE also does not discuss PCR testing for Ebola. [1] The Ministry of Health and Ministry of Agriculture and Irrigation do not discuss this issue. [2,3] There is no relevant information on the Ministry of Defence website. [4] There is not a website for the Ministry of Research for Somalia. There are no media or academic articles available on the topic.

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[4] Ministry of Defence of the Republic of Somalia. [<http://mod.gov.so/>]. Accessed 6 December 2020.

## 1.3.2 Biosecurity training and practices

### 1.3.2a

**Does the country require biosecurity training, using a standardized, required approach, such as through a common curriculum or a train-the-trainer program, for personnel working in facilities housing or working with especially dangerous pathogens, toxins, or biological materials with pandemic potential?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia requires biosecurity training, using a standardized, required approach, such as through a common curriculum or a train-the-trainer program, for personnel working in facilities housing or working with especially dangerous pathogens, toxins, or biological materials with pandemic potential. The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, does not note any existing training system. The JEE recommends that Somalia establish a multisectoral biosafety and biosecurity committee to develop legislation, "assess biosafety and biosecurity training needs and develop training material, and increase awareness of biosecurity and biosafety among the laboratory workforce." [1] The Ministry of Health and Ministry of Agriculture and Irrigation do not discuss this issue. [2,3] There is no relevant information on the Ministry of Defence website. [4] Somalia is a state signatory to the Biological Weapons Convention. State parties report to the United Nations Office at Geneva (UNOG) every year for the "Confidence Building Measure Return" (CBM), which is a reporting mechanism set by the Biological Weapons Convention. The reporting includes data on Biosafety Level (BSL) facilities, their level, location, floor area of the laboratory, types of pathogens stored and processed, the organizational structure of the facilities, etc. However, there is no evidence that Somalia has submitted a CBM report in the last two years or at all. [5] There are no relevant laws or regulations listed on the VERTIC Biological Weapons Convention Legislation Database. [6] There is not

a website for the Ministry of Research for Somalia. There are no media or academic articles available on the topic.

- [1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.
- [2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.
- [3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.
- [4] Ministry of Defence of the Republic of Somalia. [<http://mod.gov.so/>]. Accessed 6 December 2020.
- [5] United Nations Biological Weapons Convention (BWC) Electronic Confidence Building Measures Portal. "Submissions Made by States Parties by Year." [[https://bwc-ecbm.unog.ch/?field\\_form\\_year\\_tid=548](https://bwc-ecbm.unog.ch/?field_form_year_tid=548)]. Accessed 6 December 2020.
- [6] VERTIC Biological Weapons Convention (BWC) Legislation Database. "Somalia (Signatory)." [<http://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/s/>]. Accessed 6 December 2020.

### 1.3.3 Personnel vetting: regulating access to sensitive locations

#### 1.3.3a

**Do regulations or licensing conditions specify that security and other personnel with access to especially dangerous pathogens, toxins, or biological materials with pandemic potential are subject to the following checks: drug testing, background checks, and psychological or mental fitness checks?**

Personnel are subject to all three of these checks = 3, Personnel are subject to two of these checks = 2, Personnel are subject to one of these checks = 1, Personnel are not subject to any of these checks = 0

**Current Year Score: 0**

There is no evidence that Somalia has regulations or licensing conditions which specify that security and other personnel with access to especially dangerous pathogens, toxins, or biological materials with pandemic potential are subject to the checks such as drug testing, background checks, and psychological and mental fitness checks. According to the World Health Organisation (WHO), Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, there is almost no infrastructure, guidelines, or policies governing biosecurity or biosafety in the country. There is no mention of any background checks or personnel procedures for working with dangerous pathogens, toxins, or biological materials with pandemic potential. The JEE notes "the lack of biosafety and biosecurity systems has already caused problems since laboratories cannot be sent reference strains due to insufficient biosafety and biosecurity." [1] The Ministry of Health and Ministry of Agriculture and Irrigation do not discuss this issue. [2,3] There is no relevant information on the Ministry of Defence website. [4] Somalia is a state signatory to the Biological Weapons Convention. State parties report to the United Nations Office at Geneva (UNOG) every year for the "Confidence Building Measure Return" (CBM), which is a reporting mechanism set by the Biological Weapons Convention. The reporting includes data on Biosafety Level (BSL) facilities, their level, location, floor area of the laboratory, types of pathogens stored and processed, the organizational structure of the facilities, etc. However, there is no evidence that Somalia has submitted a CBM report in the last two years or at all. [5] There are no relevant laws or regulations listed on the VERTIC Biological Weapons Convention Legislation Database. [6] There is not a website for the Ministry of Research for Somalia.

- [1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.
- [2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.
- [3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[4] Ministry of Defence of the Republic of Somalia. [<http://mod.gov.so/>]. Accessed 6 December 2020.

[5] United Nations Biological Weapons Convention (BWC) Electronic Confidence Building Measures Portal. "Submissions Made by States Parties by Year." [[https://bwc-ecbm.unog.ch/?field\\_form\\_year\\_tid=548](https://bwc-ecbm.unog.ch/?field_form_year_tid=548)]. Accessed 6 December 2020.

[6] VERTIC Biological Weapons Convention (BWC) Legislation Database. "Somalia (Signatory)."

[<http://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/s/>]. Accessed 6 December 2020.

## 1.3.4 Transportation security

### 1.3.4a

**Does the country have publicly available information on national regulations on the safe and secure transport of infectious substances (specifically including Categories A and B)?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has publicly available information on national regulations on the safe and secure transport of infectious substances (Categories A and B). The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE), conducted 17 to 21 October 2016, does not address this topic. [1] The Ministry of Health and Ministry of Agriculture websites do not discuss this issue. [2,3] There is no website for a Ministry of Transportation of Somalia, but there is a website for the Ministry of Transport and Road Development of the Somaliland region. There is no mention of such substances on the Ministry of Transport and Road Development of Somaliland. [4] There is no relevant information on the Ministry of Defence website. [5] Somalia is a state signatory to the Biological Weapons Convention. State parties report to the United Nations Office at Geneva (UNOG) every year for the "Confidence Building Measure Return" (CBM), which is a reporting mechanism set by the Biological Weapons Convention. The reporting includes data on Biosafety Level (BSL) facilities, their level, location, floor area of the laboratory, types of pathogens stored and processed, the organizational structure of the facilities, etc. However, there is no evidence that Somalia has submitted a CBM report in the last two years or at all. [6] The VERTIC Biological Weapons Convention Legislation Database includes both the Somali Maritime Code of 1959 and Law No. 37 of 10 September 1972, on the Somali Territorial Sea Ports. However, neither of these laws address transport of infectious substances. [7,8] There is not a website for the Ministry of Research for Somalia. There are no news or academic articles on the topic.

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[4] Ministry of Transport and Road Development of the Republic of Somaliland. [<https://somalilandtransport.com/>]. Accessed 6 December 2020.

[5] Ministry of Defence of the Republic of Somalia. [<http://mod.gov.so/>]. Accessed 6 December 2020.

[6] United Nations Biological Weapons Convention (BWC) Electronic Confidence Building Measures Portal. "Submissions Made by States Parties by Year." [[https://bwc-ecbm.unog.ch/?field\\_form\\_year\\_tid=548](https://bwc-ecbm.unog.ch/?field_form_year_tid=548)]. Accessed 6 December 2020.

[7] VERTIC Biological Weapons Convention (BWC) Legislation Database. 1959 "Somali Government Maritime Code."

[[http://www.vertic.org/media/National%20Legislation/Somalia/SO\\_Maritime\\_Code\\_1959.pdf](http://www.vertic.org/media/National%20Legislation/Somalia/SO_Maritime_Code_1959.pdf)]. Accessed 6 December 2020.

[8] VERTIC Biological Weapons Convention (BWC) Legislation Database. Law No. 37 of 10 September 1972. "Law on the Somali Territorial Sea and Ports."

[[http://www.vertic.org/media/National%20Legislation/Somalia/SO\\_Territorial\\_Sea\\_and\\_Ports\\_1972.pdf](http://www.vertic.org/media/National%20Legislation/Somalia/SO_Territorial_Sea_and_Ports_1972.pdf)]. Accessed 6

December 2020.

### 1.3.5 Cross-border transfer and end-user screening

#### 1.3.5a

**Is there legislation and/or regulations in place to oversee the cross-border transfer and end-user screening of especially dangerous pathogens, toxins, and pathogens with pandemic potential?**

Yes = 1, No = 0

**Current Year Score: 0**

There is no publicly available evidence that Somalia has national legislation, regulation, or other guidance in place to oversee the cross-border transfer and end-user screening of especially dangerous pathogens, toxins and pathogens with pandemic potential. The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE), conducted 17 to 21 October 2016, does not mention such a legislation, regulation, or other guidance on this topic. The JEE notes "the country has not identified a list of ports authorized to issue ship sanitation certificates, and has no agreements with neighbouring countries on cross-border movements of people." [1] The Ministry of Health and Ministry of Agriculture websites do not discuss this issue. [2,3] There is no website for a Ministry of Transportation of Somalia, but there is a website for the Ministry of Transport and Road Development of the Somaliland region. There is no mention of such substances on the Ministry of Transport and Road Development of Somaliland. [4] There is no relevant information on the Ministry of Defence website. [5] Somalia is a state signatory to the Biological Weapons Convention. State parties report to the United Nations Office at Geneva (UNOG) every year for the "Confidence Building Measure Return" (CBM), which is a reporting mechanism set by the Biological Weapons Convention. The reporting includes data on Biosafety Level (BSL) facilities, their level, location, floor area of the laboratory, types of pathogens stored and processed, the organizational structure of the facilities, etc. However, there is no evidence that Somalia has submitted a CBM report in the last two years or at all. [6] The VERTIC Biological Weapons Convention Legislation Database includes both the Somali Maritime Code of 1959 and Law No. 37 of 10 September 1972, on the Somali Territorial Sea Ports. However, neither of these laws discuss cross-border transfer and end-user screening of especially dangerous pathogens, toxins and pathogens with pandemic potential. [7,8] There is not a website for the Ministry of Research for Somalia. There are no news or academic articles on the topic.

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[4] Ministry of Transport and Road Development of the Republic of Somaliland. [<https://somalilandtransport.com/>]. Accessed 6 December 2020.

[5] Ministry of Defence of the Republic of Somalia. [<http://mod.gov.so/>]. Accessed 6 December 2020.

[6] United Nations Biological Weapons Convention (BWC) Electronic Confidence Building Measures Portal. "Submissions Made by States Parties by Year." [[https://bwc-ecbm.unog.ch/?field\\_form\\_year\\_tid=548](https://bwc-ecbm.unog.ch/?field_form_year_tid=548)]. Accessed 6 December 2020.

[7] VERTIC Biological Weapons Convention (BWC) Legislation Database. 1959 "Somali Government Maritime Code." [[http://www.vertic.org/media/National%20Legislation/Somalia/SO\\_Maritime\\_Code\\_1959.pdf](http://www.vertic.org/media/National%20Legislation/Somalia/SO_Maritime_Code_1959.pdf)]. Accessed 6 December 2020.

[8] VERTIC Biological Weapons Convention (BWC) Legislation Database. Law No. 37 of 10 September 1972. "Law on the Somali Territorial Sea and Ports."

[[http://www.vertic.org/media/National%20Legislation/Somalia/SO\\_Territorial\\_Sea\\_and\\_Ports\\_1972.pdf](http://www.vertic.org/media/National%20Legislation/Somalia/SO_Territorial_Sea_and_Ports_1972.pdf)]. Accessed 6 December 2020.

## 1.4 BIOSAFETY

### 1.4.1 Whole-of-government biosafety systems

#### 1.4.1a

Does the country have in place national biosafety legislation and/or regulations?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that Somalia has in place national biosafety legislation and/or regulations. According to the World Health Organisation (WHO), Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, "there is currently no national biosafety and biosecurity legislation, regulations or guidelines." The JEE also notes that the biosafety and biosecurity situation is so undeveloped that, "there was no opportunity to visit laboratories during the assessment. There was no biosafety and biosecurity related documentation available." [1] The Ministry of Health and Ministry of Agriculture and Irrigation do not discuss this issue. [2,3] There is no relevant information on the Ministry of Defence website. [4] Somalia is a state signatory to the Biological Weapons Convention. State parties report to the United Nations Office at Geneva (UNOG) every year for the "Confidence Building Measure Return" (CBM), which is a reporting mechanism set by the Biological Weapons Convention. The reporting includes data on Biosafety Level (BSL) facilities, their level, location, floor area of the laboratory, types of pathogens stored and processed, the organizational structure of the facilities, etc. However, there is no evidence that Somalia has submitted a CBM report in the last two years or at all. [5] There are no relevant laws or regulations listed on the VERTIC Biological Weapons Convention Legislation Database. [6] There is not a website for the Ministry of Research for Somalia.

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[4] Ministry of Transport and Road Development of the Republic of Somaliland. [<https://somalilandtransport.com/>]. Accessed 6 December 2020.

[5] Ministry of Defence of the Republic of Somalia. [<http://mod.gov.so/>]. Accessed 6 December 2020.

[6] United Nations Biological Weapons Convention (BWC) Electronic Confidence Building Measures Portal. "Submissions Made by States Parties by Year." [[https://bwc-ecbm.unog.ch/?field\\_form\\_year\\_tid=548](https://bwc-ecbm.unog.ch/?field_form_year_tid=548)]. Accessed 6 December 2020.

[7] VERTIC Biological Weapons Convention (BWC) Legislation Database. 1959 "Somali Government Maritime Code." [[http://www.vertic.org/media/National%20Legislation/Somalia/SO\\_Maritime\\_Code\\_1959.pdf](http://www.vertic.org/media/National%20Legislation/Somalia/SO_Maritime_Code_1959.pdf)]. Accessed 6 December 2020.

[8] VERTIC Biological Weapons Convention (BWC) Legislation Database. 1972 "Law on the Somali Territorial Sea and Ports." [[http://www.vertic.org/media/National%20Legislation/Somalia/SO\\_Territorial\\_Sea\\_and\\_Ports\\_1972.pdf](http://www.vertic.org/media/National%20Legislation/Somalia/SO_Territorial_Sea_and_Ports_1972.pdf)]. Accessed 6 December 2020.

[9] VERTIC Biological Weapons Convention (BWC) Legislation Database. 1972 "Law on the Somali Territorial Sea and Ports." [[http://www.vertic.org/media/National%20Legislation/Somalia/SO\\_Territorial\\_Sea\\_and\\_Ports\\_1972.pdf](http://www.vertic.org/media/National%20Legislation/Somalia/SO_Territorial_Sea_and_Ports_1972.pdf)]. Accessed 6 December 2020.

[10] VERTIC Biological Weapons Convention (BWC) Legislation Database. 1972 "Law on the Somali Territorial Sea and Ports." [[http://www.vertic.org/media/National%20Legislation/Somalia/SO\\_Territorial\\_Sea\\_and\\_Ports\\_1972.pdf](http://www.vertic.org/media/National%20Legislation/Somalia/SO_Territorial_Sea_and_Ports_1972.pdf)]. Accessed 6 December 2020.

#### 1.4.1b

Is there an established agency responsible for the enforcement of biosafety legislation and regulations?

Yes = 1 , No = 0

Current Year Score: 0

There is insufficient evidence that Somalia has an established agency responsible for the biosafety enforcement and there is no evidence of existing biosafety legislation and regulation. The World Health Organisation (WHO), Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, "there is currently no national biosafety and biosecurity legislation, regulations or guidelines." The JEE does not note any agencies responsible for biosafety. [1] The Ministry of Health and Ministry of Agriculture and Irrigation do not discuss this issue. [2,3] There is no relevant information on the Ministry of Defence website. [4] Somalia is a state signatory to the Biological Weapons Convention. State parties report to the United Nations Office at Geneva (UNOG) every year for the "Confidence Building Measure Return" (CBM), which is a reporting mechanism set by the Biological Weapons Convention. The reporting includes data on Biosafety Level (BSL) facilities, their level, location, floor area of the laboratory, types of pathogens stored and processed, the organizational structure of the facilities, etc. However, there is no evidence that Somalia has submitted a CBM report in the last two years or at all. [5] There are no relevant laws or regulations listed on the VERTIC Biological Weapons Convention Legislation Database. [6] There is not a website for the Ministry of Research for Somalia.

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[4] Ministry of Transport and Road Development of the Republic of Somaliland. [<https://somalilandtransport.com/>]. Accessed 6 December 2020.

[5] Ministry of Defence of the Republic of Somalia. [<http://mod.gov.so/>]. Accessed 6 December 2020.

[6] United Nations Biological Weapons Convention (BWC) Electronic Confidence Building Measures Portal. "Submissions Made by States Parties by Year." [[https://bwc-ecbm.unog.ch/?field\\_form\\_year\\_tid=548](https://bwc-ecbm.unog.ch/?field_form_year_tid=548)]. Accessed 6 December 2020.

[7] VERTIC Biological Weapons Convention (BWC) Legislation Database. 1959 "Somali Government Maritime Code." [[http://www.vertic.org/media/National%20Legislation/Somalia/SO\\_Maritime\\_Code\\_1959.pdf](http://www.vertic.org/media/National%20Legislation/Somalia/SO_Maritime_Code_1959.pdf)]. Accessed 6 December 2020.

[8] VERTIC Biological Weapons Convention (BWC) Legislation Database. Law No. 37 of 10 September 1972. "Law on the Somali Territorial Sea and Ports."

[[http://www.vertic.org/media/National%20Legislation/Somalia/SO\\_Territorial\\_Sea\\_and\\_Ports\\_1972.pdf](http://www.vertic.org/media/National%20Legislation/Somalia/SO_Territorial_Sea_and_Ports_1972.pdf)]. Accessed 6 December 2020.

## 1.4.2 Biosafety training and practices

### 1.4.2a

**Does the country require biosafety training, using a standardized, required approach, such as through a common curriculum or a train-the-trainer program, for personnel working in facilities housing or working with especially dangerous pathogens, toxins, or biological materials with pandemic potential?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is no evidence that Somalia requires biosafety training, using a standardized, required approach, such as through a common curriculum or a train-the-trainer program, for personnel working in facilities housing or working with especially dangerous pathogens, toxins, or biological materials with pandemic potential. The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, does not note any existing training system. The JEE recommends that Somalia establish a multisectoral biosafety and biosecurity committee to develop legislation, "assess biosafety and biosecurity training needs and develop training material, and increase awareness of biosecurity and biosafety among the laboratory workforce." [1] The Ministry of Health and Ministry of Agriculture and

Irrigation do not discuss this issue. [2,3] There is no relevant information on the Ministry of Defence website. [4] Somalia is a state signatory to the Biological Weapons Convention. State parties report to the United Nations Office at Geneva (UNOG) every year for the "Confidence Building Measure Return" (CBM), which is a reporting mechanism set by the Biological Weapons Convention. The reporting includes data on Biosafety Level (BSL) facilities, their level, location, floor area of the laboratory, types of pathogens stored and processed, the organizational structure of the facilities, etc. However, there is no evidence that Somalia has submitted a CBM report in the last two years or at all. [5] There are no relevant laws or regulations listed on the VERTIC Biological Weapons Convention Legislation Database. [6] There is not a website for the Ministry of Research for Somalia. There are no media or academic articles available on the topic.

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [http://moh.gov.so/en/]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [http://moa.gov.so/]. Accessed 6 December 2020.

[4] Ministry of Defence of the Republic of Somalia. [http://mod.gov.so/]. Accessed 6 December 2020.

[5] United Nations Biological Weapons Convention (BWC) Electronic Confidence Building Measures Portal. "Submissions Made by States Parties by Year." [https://bwc-ecbm.unog.ch/?field\_form\_year\_tid=548]. Accessed 6 December 2020.

[6] VERTIC Biological Weapons Convention (BWC) Legislation Database. "Somalia (Signatory)." [http://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/s/]. Accessed 6 December 2020.

## 1.5 DUAL-USE RESEARCH AND CULTURE OF RESPONSIBLE SCIENCE

### 1.5.1 Oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research

#### 1.5.1a

**Is there publicly available evidence that the country has conducted an assessment to determine whether ongoing research is occurring on especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research?**

Yes = 1, No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has conducted an assessment to determine whether ongoing research is occurring on especially dangerous pathogens, toxins, pathogens with pandemic potential, and/or other dual use research. The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, does not discuss any dual use research. [1] The Ministry of Health and Ministry of Agriculture and Irrigation do not discuss this issue. [2,3] There is no relevant information on the Ministry of Defence website. [4] Somalia is a state signatory to the Biological Weapons Convention. State parties report to the United Nations Office at Geneva (UNOG) every year for the "Confidence Building Measure Return" (CBM), which is a reporting mechanism set by the Biological Weapons Convention. The reporting includes data on Biosafety Level (BSL) facilities, their level, location, floor area of the laboratory, types of pathogens stored and processed, the organizational structure of the facilities, etc. However, there is no evidence that Somalia has submitted a CBM report in the last two years or at all. [5] There is not a website for the Ministry of Research for Somalia. There are no media or academic articles available on the topic. There is no evidence of relevant legislation in the VERTIC database. [6]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[4] Ministry of Defence of the Republic of Somalia. [<http://mod.gov.so/>]. Accessed 6 December 2020.

[5] United Nations Biological Weapons Convention (BWC) Electronic Confidence Building Measures Portal. "Submissions Made by States Parties by Year." [[https://bwc-ecbm.unog.ch/?field\\_form\\_year\\_tid=548](https://bwc-ecbm.unog.ch/?field_form_year_tid=548)]. Accessed 6 December 2020.

[6] Verification Research, Training and Information Centre (VERTIC) Database. "Biological Weapons and Materials. BWC Legislation Database." [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/s/>]. Accessed 26 December 2020.

### 1.5.1b

**Is there legislation and/or regulation requiring oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is no publicly available information that Somalia has a national policy requiring oversight of dual use research, such as research with especially dangerous pathogens, toxins, and/or pathogens with pandemic potential. The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, does not discuss any dual use research. [1] The Ministry of Health and Ministry of Agriculture and Irrigation do not discuss this issue. [2,3] There is no relevant information on the Ministry of Defence website. [4] Somalia is a state signatory to the Biological Weapons Convention. State parties report to the United Nations Office at Geneva (UNOG) every year for the "Confidence Building Measure Return" (CBM), which is a reporting mechanism set by the Biological Weapons Convention. The reporting includes data on Biosafety Level (BSL) facilities, their level, location, floor area of the laboratory, types of pathogens stored and processed, the organizational structure of the facilities, etc. However, there is no evidence that Somalia has submitted a CBM report in the last two years or at all. [5] There is not a website for the Ministry of Research for Somalia. There are no media or academic articles available on the topic. There is no evidence of relevant legislation in the VERTIC database. [6]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[4] Ministry of Defence of the Republic of Somalia. [<http://mod.gov.so/>]. Accessed 6 December 2020.

[5] United Nations Biological Weapons Convention (BWC) Electronic Confidence Building Measures Portal. "Submissions Made by States Parties by Year." [[https://bwc-ecbm.unog.ch/?field\\_form\\_year\\_tid=548](https://bwc-ecbm.unog.ch/?field_form_year_tid=548)]. Accessed 6 December 2020.

[6] Verification Research, Training and Information Centre (VERTIC) Database. "Biological Weapons and Materials. BWC Legislation Database." [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/s/>]. Accessed 26 December 2020.

### 1.5.1c

**Is there an agency responsible for oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is no publicly available evidence that Somalia has an agency responsible for oversight of research with especially dangerous pathogens, pathogens with pandemic potential, and/or other dual use research. The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, does not discuss any dual use research. [1] The Ministry of Health and Ministry of Agriculture and Irrigation do not discuss this issue. [2,3] There is no relevant information on the Ministry of Defence website. [4] Somalia is a state signatory to the Biological Weapons Convention. State parties report to the United Nations Office at Geneva (UNOG) every year for the "Confidence Building Measure Return" (CBM), which is a reporting mechanism set by the Biological Weapons Convention. The reporting includes data on Biosafety Level (BSL) facilities, their level, location, floor area of the laboratory, types of pathogens stored and processed, the organizational structure of the facilities, etc. However, there is no evidence that Somalia has submitted a CBM report in the last two years or at all. [5] There is not a website for the Ministry of Research for Somalia. There are no media or academic articles available on the topic. There is no evidence of relevant legislation on the VERTIC database. [6]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[4] Ministry of Defence of the Republic of Somalia. [<http://mod.gov.so/>]. Accessed 6 December 2020.

[5] United Nations Biological Weapons Convention (BWC) Electronic Confidence Building Measures Portal. "Submissions Made by States Parties by Year." [[https://bwc-ecbm.unog.ch/?field\\_form\\_year\\_tid=548](https://bwc-ecbm.unog.ch/?field_form_year_tid=548)]. Accessed 6 December 2020.

[6] Verification Research, Training and Information Centre (VERTIC) Database. "Biological Weapons and Materials. BWC Legislation Database." [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/s/>]. Accessed 26 December 2020.

## 1.5.2 Screening guidance for providers of genetic material

### 1.5.2a

**Is there legislation and/or regulation requiring the screening of synthesized DNA (deoxyribonucleic acid) against lists of known pathogens and toxins before it is sold?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is no publicly available information indicating that Somalia has a national legislation, regulation, policy, or other guidance, requiring the screening of synthesized DNA before it is sold. The World Health Organisation (WHO), Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, does not discuss synthesized DNA. It also notes that "there is currently no national biosafety and biosecurity legislation, regulations or guidelines." [1] The Ministry of Health and Ministry of Agriculture and Irrigation do not discuss this issue. [2,3] There is no relevant information on the Ministry of Defence website. [4] Somalia is a state signatory to the Biological Weapons Convention. State parties report to the United Nations Office at Geneva (UNOG) every year for the "Confidence Building

Measure Return" (CBM), which is a reporting mechanism set by the Biological Weapons Convention. The reporting includes data on Biosafety Level (BSL) facilities, their level, location, floor area of the laboratory, types of pathogens stored and processed, the organizational structure of the facilities, etc. However, there is no evidence that Somalia has submitted a CBM report in the last two years or at all. [5] There is not a website for the Ministry of Research for Somalia. There is no website for a Ministry of Transportation of Somalia, but there is a website for the Ministry of Transport and Road Development of the Somaliland region. There is no mention of such a law on the Ministry of Transport and Road Development of Somaliland. [6] There are no news or academic articles available on this topic specific to Somalia. There is no relevant legislation on the VERTIC database. [7]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[4] Ministry of Defence of the Republic of Somalia. [<http://mod.gov.so/>]. Accessed 6 December 2020.

[5] United Nations Biological Weapons Convention (BWC) Electronic Confidence Building Measures Portal. "Submissions Made by States Parties by Year." [[https://bwc-ecbm.unog.ch/?field\\_form\\_year\\_tid=548](https://bwc-ecbm.unog.ch/?field_form_year_tid=548)]. Accessed 6 December 2020.

[6] Ministry of Transport and Road Development of the Republic of Somaliland. [<https://somalilandtransport.com/>]. Accessed 6 December 2020.

[7] Verification Research, Training and Information Centre (VERTIC) Database. "Biological Weapons and Materials. BWC Legislation Database." [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/s/>]. Accessed 26 December 2020.

## 1.6 IMMUNIZATION

### 1.6.1 Vaccination rates

#### 1.6.1a

##### Immunization rate (measles/MCV2)

Immunization rate (measles/MCV2), 95% or greater = 2, 80-94.9% = 1, Less than 80%, or no data = 0

**Current Year Score: 0**

2019

World Health Organization

#### 1.6.1b

##### Are official foot-and-mouth disease (FMD) vaccination figures for livestock publicly available through the OIE database?

Yes = 1, No = 0

**Current Year Score: 1**

2020

OIE WAHIS database

## Category 2: Early detection and reporting for epidemics of potential international concern

### 2.1 LABORATORY SYSTEMS STRENGTH AND QUALITY

#### 2.1.1 Laboratory testing for detection of priority diseases

##### 2.1.1a

**Does the national laboratory system have the capacity to conduct diagnostic tests for at least 5 of the 10 WHO-defined core tests?**

Evidence they can conduct 5 of the 10 core tests and these tests are named = 2, Evidence they can conduct 5 of the 10 core tests and the tests are not named = 1, No evidence they can conduct 5 of the 10 core tests = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia's national laboratory system has the capacity to conduct diagnostic tests for at least 5 of the 10 WHO-defined core tests. According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE), of the Republic of Somalia, conducted 17 to 21 October 2016, "the national laboratory system is capable of conducting [4] core tests...Reference laboratories can conduct four core tests identified by the IHR: serology for HIV, microscopy for M. tuberculosis, rapid diagnostic testing for Plasmodium and bacterial culture for Salmonella enteritidis serotype Typhi." The JEE also notes, "Somaliland, Puntland, and South Central have identified priority pathogens," but it does not mention what they are. It does not describe four country tests. [1] There is no relevant information on the Ministry of Health (MoH) website. [2]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

##### 2.1.1b

**Is there a national plan, strategy or similar document for conducting testing during a public health emergency, which includes considerations for testing for novel pathogens, scaling capacity, and defining goals for testing?**

Yes, there is evidence of a plan, and it includes considerations for testing for novel pathogens, scaling capacity, and defining goals for testing = 2, Yes, there is evidence of a plan, but there is insufficient evidence that it includes considerations for testing for novel pathogens, scaling capacity, and defining goals for testing = 1, No evidence of a plan = 0

**Current Year Score: 0**

There is insufficient evidence of a national plan for conducting testing during a public health emergency in Somalia. Somalia has a plan designed only in response to potential outbreaks of Acute Watery Diarrhoea or Cholera. It is not clear whether the plan moved beyond the draft stage, but the plan does outline in some detail how testing would be conducted and expanded. [1] There is no other relevant information on the Ministry of Health (MoH) website or the Somali Institute for Health Research. Somalia's National Public Health Reference Laboratory does not appear to have its own website. [2,3]

[1] Somali Federal Republic, Ministry of Health and Human Services. "Draft AWD/Cholera Preparedness and Response Plan 2017-2022." [<https://moh.gov.so/en/wp-content/uploads/2020/12/Cholera-Preparedness-and-Response-Plan-for-Somalia1->

Final.pdf]. Accessed 6 December 2020.

[2] Ministry of Health. [<https://moh.gov.so/>] Accessed 6 December 2020.

[3] Somali Institute for Health Research. [<https://www.sihr.institute/>] Accessed 6 December 2020.

## 2.1.2 Laboratory quality systems

### 2.1.2a

**Is there a national laboratory that serves as a reference facility which is accredited (e.g., International Organization for Standardization [ISO] 15189:2003, U.S. Clinical Laboratory Improvement Amendments [CLIA])?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that the Republic of Somalia has an accredited national reference facility. There is no relevant information on the Ministry of Health website. [1] There is no relevant information on the Ministry of Agriculture and Irrigation website. [2] According to the WHO Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, there are three reference laboratories in the Mogadishu, Hargeisa, and Bosaso regions of Somalia and the National Public Health Reference Laboratory (NPHRL). There is no discussion of accreditation in the JEE. [3] There is no website for the national reference laboratory.

[1] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[2] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[3] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

### 2.1.2b

**Is there a national laboratory that serves as a reference facility which is subject to external quality assurance review?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence indicating there is external review for a national reference facility. According to the World Health Organisation (WHO), Joint External Evaluation of IHR Core Capacities (JEE), conducted 17 to 21 October 2016, there are three reference laboratories in the Mogadishu, Hargeisa, and Bosaso regions of Somalia and the National Public Health Reference Laboratory (NPHRL). The JEE describes that there is "in Somaliland, an external quality assurance scheme is established with the regional reference laboratory in Muscat, Oman." However, the JEE also notes that there is a need for a national body for internal and external quality assessment management for each level of public health laboratories. [1] There are no websites for the reference laboratories to corroborate the external quality assurance scheme. There are no additional articles or sources to corroborate the external quality assurance scheme with the laboratory in Muscat, Oman. There is no information regarding external quality assurance review on the Ministry of Health (MoH) website. [2] There is no relevant information on the Ministry of Agriculture and Irrigation website. [3]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

## 2.2 LABORATORY SUPPLY CHAINS

### 2.2.1 Specimen referral and transport system

#### 2.2.1a

**Is there a nationwide specimen transport system?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has an established nationwide specimen transport system. There is evidence of a specimen transport system, but it does not reach the whole country. The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, describes that there is a specimen transport system to national laboratories, but only for less than 50% of intermediate districts for advanced diagnostics, which is further developed in Somaliland and Puntland. "District hospitals refer specimens to reference laboratories through the Communicable Disease Surveillance and Response team," which also collects samples during outbreaks. The JEE recommends that Somalia "improve the laboratory referral system to transport specimens from district/regional laboratories to reference laboratories by developing guidelines and SOPs." [1] There is no relevant information on the Ministry of Health (MoH) website. [2] There is no relevant information on the Ministry of Agriculture and Irrigation website. [3]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

### 2.2.2 Laboratory cooperation and coordination

#### 2.2.2a

**Is there a plan in place to rapidly authorize or license laboratories to supplement the capacity of the national public health laboratory system to scale-up testing during an outbreak?**

Yes = 2 , Yes, but there is evidence of gaps in implementation = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has a plan in place to rapidly authorize or license laboratories to supplement the capacity of the national public health laboratory system to scale-up testing during an outbreak. There is no relevant information on the Ministry of Health (MoH) website. [1] There is no relevant information on the Ministry of Agriculture and Irrigation website. [2] Somalia's national laboratory system does not appear to have its own website.

[1] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[2] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

## 2.3 REAL-TIME SURVEILLANCE AND REPORTING

### 2.3.1 Indicator and event-based surveillance and reporting systems

#### 2.3.1a

**Is there evidence that the country is conducting ongoing event-based surveillance and analysis for infectious disease?**

Yes, there is evidence of ongoing event-based surveillance and evidence that the data is being analyzed on a daily basis = 2,  
Yes, there is evidence of ongoing event-based surveillance, but no evidence that the data are being analyzed on a daily basis  
= 1, No = 0

**Current Year Score: 0**

There is insufficient evidence of an event-based surveillance (EBS) system throughout Somalia. While there is some evidence of an EBS system, there is insufficient evidence it occurs all year round and there is no evidence the data from said surveillance is analysed on a daily basis. According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, there is an EBS system in place for all three Somali administrative areas specifically for infectious diseases, but that quality and coverage of such systems are limited. The JEE also notes that there is a lack of a structures system for event-based surveillance. "Rumour and event-based surveillance is not systematic or integrated into regular reporting." It is unclear what exactly is covered in the EBS system from the JEE and there are not other sources on the topic. [1] There is no relevant information on the Ministry of Health website or the Ministry of Agriculture and Irrigation website. [2,3]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

#### 2.3.1b

**Is there publicly available evidence that the country reported a potential public health emergency of international concern (PHEIC) to the WHO within the last two years?**

Yes = 1, No = 0

**Current Year Score: 0**

There is no evidence that Somalia has reported a potential public health emergency of international concern (PHEIC) to the World Health Organisation (WHO) in the last two years.

According to the WHO Disease Outbreak News, on 29 March 2018, Somalia reported a Cholera outbreak to the WHO. "As of 18 March 2018, a total of 1613 cholera cases, including nine deaths (case fatality rate= 0.6%), have been reported from our regions: Hiraan, Banadir, Lower Juba and Middle Shabelle." [1] However, this happened more than two years prior to the time of research. There is no further relevant information on the Ministry of Health website. [2]

[1] World Health Organisation (WHO). 29 March 2018. "Cholera--Somalia, Disease Outbreak News."

[<https://www.who.int/csr/don/29-march-2018-cholera-somalia/en/>]. Accessed 19th April 2021.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 19th April 2021.

## 2.3.2 Interoperable, interconnected, electronic real-time reporting systems

### 2.3.2a

**Does the government operate an electronic reporting surveillance system at both the national and the sub-national level?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has a fully functional electronic reporting surveillance system at both the national and sub-national level. According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, Somalia has SMS and electronic reporting mechanisms that are used in an unplanned and ad hoc basis. The JEE also mentions the need for improving connectivity and amount of electronic reporting "to enable real-time electronic reporting." [1] There is no relevant information on the Ministry of Health website. [2] There is additional evidence of efforts to improve the functionality of electronic reporting on the ground in Somalia. A 19 March 2018 WHO article describes that the "WHO concluded 4-day training workshop today for Somalia's disease surveillance officers on the use of the newly updated electronic platform for disease early warning systems (EWARN), in order to improve the national capacity to detect health threats in real-time, and respond quickly to public health threats across the country." [3] However, there is no evidence that this program has been implemented in a widespread manner.

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] World Health Organisation (WHO). 29 March 2018. "Health workers trained on electronic disease early warning surveillance systems." [<http://www.emro.who.int/pandemic-epidemic-diseases/news/health-workers-trained-on-electronic-disease-early-warning-surveillance-systems.html>]. Accessed 6 December 2020.

### 2.3.2b

**Does the electronic reporting surveillance system collect ongoing or real-time laboratory data?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that the limited electronic reporting surveillance activities in Somalia collect ongoing/real time laboratory data. According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, Somalia has SMS and electronic reporting mechanisms that are used in an unplanned and ad hoc basis. The JEE also mentions the need for improving connectivity and amount of electronic reporting "to enable real-time electronic reporting." [1] There is no relevant information on the Ministry of Health website. [2] There is additional evidence of efforts to improve the functionality of electronic reporting on the ground in Somalia. A 19 March 2018 WHO article describes that the "WHO concluded 4-day training workshop today for Somalia's disease surveillance officers on the use of the newly updated electronic platform for disease early warning systems (EWARN), in order to improve the national capacity to detect health threats in real-time, and respond quickly to public health threats across the country." [3]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] World Health Organisation (WHO). 29 March 2018. "Health workers trained on electronic disease early warning surveillance systems." [<http://www.emro.who.int/pandemic-epidemic-diseases/news/health-workers-trained-on-electronic-disease-early-warning-surveillance-systems.html>]. Accessed 6 December 2020.

## 2.4 SURVEILLANCE DATA ACCESSIBILITY AND TRANSPARENCY

### 2.4.1 Coverage and use of electronic health records

#### 2.4.1a

##### Are electronic health records commonly in use?

Electronic health records are commonly in use = 2, Electronic health records are not commonly in use, but there is evidence they are used = 1, No evidence electronic health records are in use = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has National Electronic Health Records (EHRs). A 2015 World Health Organisation (WHO) Somalia electronic health profile document notes that Somalia does not have a National EHR system. [1] According to the WHO Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, there is a limited-capacity existing electronic real-time reporting system since 2014, but there is no discussion of a national EHR system. [2] There is no relevant information on the Ministry of Health website. [3]

[1] World Health Organisation (WHO). 2015. "Somalia." [<https://www.who.int/goe/publications/atlas/2015/som.pdf>]. Accessed 6 December 2020.

[2] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[3] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

#### 2.4.1b

##### Does the national public health system have access to electronic health records of individuals in their country?

Yes = 1, No = 0

**Current Year Score: 0**

There is insufficient evidence if Somalia's national public health system has access to individuals electronic health records because there is insufficient evidence that Somalia has a National Electronic Health Records (EHRs) system. A 2015 World Health Organisation (WHO) Somalia electronic health profile document notes that Somalia does not have a National EHR system. [1] According to the WHO Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, there is a limited-capacity existing electronic real-time reporting system since 2014, but there is no discussion of a national EHR system. [2] There is no relevant information on the Ministry of Health website. [3]

[1] World Health Organisation (WHO). 2015. "Somalia." [<https://www.who.int/goe/publications/atlas/2015/som.pdf>]. Accessed 6 December 2020.

[2] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[3] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

### 2.4.1c

**Are there data standards to ensure data is comparable (e.g., ISO standards)?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient information available to determine whether Somalia has data standards to ensure data is comparable. The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, does not discuss data standards. [1] The Ministry of Health website does not discuss data standardization. [2]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

## 2.4.2 Data integration between human, animal, and environmental health sectors

### 2.4.2a

**Is there evidence of established mechanisms at the relevant ministries responsible for animal, human, and wildlife surveillance to share data (e.g., through mosquito surveillance, brucellosis surveillance)?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has established mechanisms at the relevant ministries responsible for animal, human and wildlife surveillance to share data. The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, discusses animal surveillance, but there is limited information about the process and information sharing. The JEE notes there is both brucellosis and Rift Valley Fever (RVF) surveillance occurring and that RVF surveillance is regular as it is "sentinel-based and mandated as it is a requirement for exporting livestock." However, the JEE also notes, "there is no formal mechanism for sharing surveillance data across sectors and there are no joint surveillance systems in place." [1] There is no mention of such surveillance on the Ministry of Health website or the Ministry of Agriculture website. [2,3] There is only a website for the Ministry of Environment and Rural Development of the Somaliland region of Somalia. It mentions Geospatial Information System (GIS) database and geospatial data, but not in the context of disease surveillance. [4]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[4] Ministry of Environment and Rural Development of the Republic of Somaliland. "Department of Policy Planning, Research, Monitoring and Evaluation." [<https://somalilandministryofenvironment.com/departments/planning-department/>]. Accessed

6 December 2020.

## 2.4.3 Transparency of surveillance data

### 2.4.3a

**Does the country make de-identified health surveillance data on infectious diseases publicly available via reports (or other format) on government websites (such as the Ministry of Health, Ministry of Agriculture, or similar)?**

Yes = 1, No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia makes de-identified health surveillance data on disease outbreaks publicly available via reports on government websites.

Through Somalia's participation in the World Health Organisation (WHO) Early Warning, Alert, and Response Network (EWARN), Somalia shares de-identified data through the EWARN "Weekly Epidemiological Monitor." [1] According to a 29 March 2018 WHO article the, "EWARN relies on a network of health facilities, and public health professionals who are responsible for the collection, reporting, investigation, analysis and dissemination of information to stakeholders to implement effective public health response measures." [2] However, there is no information indicating this information is shared publicly on the Ministry of Health or any other government websites. [3]

[1] World Health Organisation (WHO) Regional Office for the Eastern Mediterranean. 21 October 2018. "Weekly Epidemiological Monitor." [[https://reliefweb.int/sites/reliefweb.int/files/resources/Epi\\_Monitor\\_2018\\_11\\_42.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/Epi_Monitor_2018_11_42.pdf)]. Accessed 19th April 2021.

[2] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 19th April 2021.

[3] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 19th April 2021.

### 2.4.3b

**Does the country make de-identified COVID-19 surveillance data (including details such as daily case count, mortality rate, etc) available via daily reports (or other formats) on government websites (such as the Ministry of Health, or similar)?**

Yes = 1, No = 0

**Current Year Score: 1**

There is evidence Somalia makes de-identified COVID-19 surveillance data available daily. The Ministry of Health website has a COVID-19 dashboard which frequently updates active cases, recoveries and deaths. [1]

[1] Ministry of Health. "COVID-19 Dashboard, Somalia." [<https://moh.gov.so/en/covid19/>] Accessed 6 December 2020.

## 2.4.4 Ethical considerations during surveillance

### 2.4.4a

**Is there legislation and/or regulations that safeguard the confidentiality of identifiable health information for individuals, such as that generated through health surveillance activities?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient publicly available information indicating whether or not Somalia has laws, regulations, or guidelines that safeguard the confidentiality of identifiable health information for individuals, such as that generated through health surveillance activities. A 2015 World Health Organisation (WHO) electronic policy profile of Somalia, lists an existing law protecting the privacy of individuals' health-related data and personally identifiable data in digital and paper formats. However, this profile does not include additional details or the name of the policy is not available. Furthermore, there are no sources corroborating the details of this law. [1] The Ministry of Health website does not have any information about the confidentiality of identifiable health information. [2] The WHO Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, does not address this subject. [3] There are no law firm websites with relevant information. [4,5] The Data Protection and Privacy Legislation Worldwide database has no data on whether or not Somalia has such legislation on the United Nations Conference on Trade and Development (UNCTAD) website. [6]

[1] World Health Organisation (WHO). 2015. "Somalia." [<https://www.who.int/goe/publications/atlas/2015/som.pdf>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[4] Mogadishu Law Office [<https://www.mogadishulawoffice.com/>]. Accessed 6 December 2020.

[5] Facebook. "Benadir Law Firm." [<https://www.facebook.com/pages/category/Lawyer---Law-Firm/Benadir-Law-Firm-1432990053685485/>]. Accessed 6 December 2020.

[6] United Nations Conference on Trade and Development (UNCTAD). "Data Protection and Privacy Legislation Worldwide database." [[https://unctad.org/en/Pages/DTL/STI\\_and\\_ICTs/ICT4D-Legislation/eCom-Data-Protection-Laws.aspx](https://unctad.org/en/Pages/DTL/STI_and_ICTs/ICT4D-Legislation/eCom-Data-Protection-Laws.aspx)]. Accessed 6 December 2020.

#### 2.4.4b

**Is there legislation and/or regulations safeguarding the confidentiality of identifiable health information for individuals, such as that generated through health surveillance activities, include mention of protections from cyber attacks (e.g., ransomware)?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is no evidence that Somalia has laws, regulations, or guidelines that safeguard the confidentiality of identifiable health information for individuals from cyberattacks or any other kind of attack. A 2015 World Health Organisation (WHO) electronic policy profile of Somalia, lists an existing law protecting the privacy of individuals' health-related data and personally identifiable data in digital and paper formats. This profile does not include additional details or the name of the policy is not available. This document does not mention cyber attacks. [1] The Ministry of Health website does not have any information about the confidentiality of identifiable health information. [2] The WHO Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, does not address this subject. [3] There are no law firm websites with relevant information. [4,5] The Data Protection and Privacy Legislation Worldwide database has no data on whether or not Somalia has such legislation on the United Nations Conference on Trade and Development (UNCTAD) website. [6]

- [1] World Health Organisation (WHO). 2015. "Somalia." [https://www.who.int/goe/publications/atlas/2015/som.pdf]. Accessed 6 December 2020.
- [2] Ministry of Health of the Republic of Somalia. [http://moh.gov.so/en/]. Accessed 6 December 2020.
- [3] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1]. Accessed 6 December 2020.
- [4] Mogadishu Law Office [https://www.mogadishulawoffice.com/]. Accessed 6 December 2020.
- [5] Facebook. "Benadir Law Firm." [https://www.facebook.com/pages/category/Lawyer---Law-Firm/Benadir-Law-Firm-1432990053685485/]. Accessed 6 December 2020.
- [6] United Nations Conference on Trade and Development (UNCTAD). "Data Protection and Privacy Legislation Worldwide database." [https://unctad.org/en/Pages/DTL/STI\_and\_ICTs/ICT4D-Legislation/eCom-Data-Protection-Laws.aspx]. Accessed 6 December 2020.

## 2.4.5 International data sharing

### 2.4.5a

**Has the government made a commitment via public statements, legislation and/or a cooperative agreement to share surveillance data during a public health emergency with other countries in the region?**

Yes, commitments have been made to share data for more than one disease = 2, Yes, commitments have been made to share data only for one disease = 1, No = 0

**Current Year Score: 2**

There is evidence that the Somali government has made a commitment via cooperative agreement to share surveillance data for more than one disease during an active public health emergency specifically with other countries in the region.

There is an agreement for regular surveillance and active public health emergencies through the World Health Organisation (WHO)'s Early Warning, Alert, and Response Network (EWARN). According to a 29 March 2018 WHO article the, "EWARN relies on a network of health facilities, and public health professionals who are responsible for the collection, reporting, investigation, analysis and dissemination of information to stakeholders to implement effective public health response measures." EWARN has been used to share data related to Cholera cases [1]

There is also evidence of an information sharing agreement between Somalia and Kenya in a Joint Cross Border Health Coordination Meeting Report from 4 to 6 April 2018. The document says the two countries, "established coordination and information sharing AFP (acute flaccid paralysis) surveillance data and other diseases conditions/events among border district/ health facilities." This includes active public health emergencies and ongoing surveillance. [2]

There is no discussion of cooperative agreements for information sharing with other countries discussed in the WHO Joint External Evaluation of IHR Core Capacities (JEE), conducted 17 to 21 October 2016. [3] The Ministry of Health website does not discuss this topic. [4]

[1] World Health Organisation (WHO). 29 March 2018. "Health workers trained on electronic disease early warning surveillance systems." [http://www.emro.who.int/pandemic-epidemic-diseases/news/health-workers-trained-on-electronic-disease-early-warning-surveillance-systems.html]. Accessed 19th April 2021.

[2] CORE GROUP Polio Project. 4-6 April 2018. "Kenya and Somalia Joint Cross Border Health Coordination Meeting Report." [https://coregroup.org/wp-content/uploads/2018/06/Wajir-Joint-Cross-Border-HC-Meeting-Report.pdf]. Accessed 19th April 2021.

[3] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>].

Accessed 19th April 2021.

[4] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 19th April 2021.

## 2.5 CASE-BASED INVESTIGATION

### 2.5.1 Case investigation and contact tracing

#### 2.5.1a

**Is there a national system in place to provide support at the sub-national level (e.g. training, metrics standardization and/or financial resources) to conduct contact tracing in the event of a public health emergency?**

Yes, there is evidence that the national government supports sub-national systems to prepare for future public health emergencies = 2, Yes, there is evidence that the national government supports sub-national systems, but only in response to active public health emergencies = 1, No = 0

**Current Year Score: 0**

There is insufficient evidence of a national system in place to provide support at the sub-national level (e.g. training, metrics standardization and/or financial resources) to expand contact tracing in the event of a public health emergency in Somalia. The World Health Organization (World Health Organization) has played a major role in helping the Somali government respond to the COVID-19 outbreak. In April 2020, the WHO reported that its support will include setting up 3 testing facilities in the country, additional isolation facilities to cover over 1000 suspected cases and mobilizing over 1200 trained health workforce for contact tracing and contact management. It continued, "WHO's work continues in Somalia to keep the country safe and protect the vulnerable despite the weakened health systems ravaged by years of war and neglect." [1] The Ministry of Health's draft Acute Watery Diarrhoea (AWD) and Cholera Preparedness and Response Plan 2017-2022, mentions contact tracing as part of epidemiology and surveillance activities that would be carried out following a process called Emergency Team activation following a suspected case of AWD or Cholera. It is not clear that this strategy would be applied in the event of another infectious disease outbreak. [2] There is no other relevant information on the Ministry of Health or the Somali Institute for Health Research website. [3,4] Somalia's National Public Health Reference Laboratory (NPHRL) does not appear to have its own website.

[1] World Health Organization. "As cases of COVID-19 increase in Somalia, operational readiness also scaled up to early detect and respond to community transmission." [<http://www.emro.who.int/somalia/news/as-cases-of-covid-19-increase-rapidly-in-somalia-operational-readiness-also-scaled-up-to-early-detect-and-respond-to-community-transmission.html>] Accessed 6 December 2020.

[2] Somali Federal Republic, Ministry of Health and Human Service. "Draft AWD/Cholera Preparedness and Response Plan 2017-2022." [<https://moh.gov.so/en/wp-content/uploads/2020/12/Cholera-Preparedness-and-Response-Plan-for-Somalia1-Final.pdf>] Accessed 6 December 2020.

[3] Ministry of Health. [<https://moh.gov.so/en/>] Accessed 6 December 2020.

[4] Somali Institute for Health Research. [<https://www.sihr.institute/>] Accessed 6 December 2020.

#### 2.5.1b

**Does the country provide wraparound services to enable infected people and their contacts to self-isolate or quarantine as recommended, particularly economic support (paycheck, job security) and medical attention?**

Yes, both economic support and medical attention are provided = 2, Yes, but only economic support or medical attention is provided = 1, No = 0

**Current Year Score: 0**

There is insufficient evidence of any wraparound services to enable infected people and their contacts to self-isolate as recommended, particularly economic support (paycheck, job security) and medical attention in Somalia. The World Health Organization (World Health Organization) has played a major role in helping the Somali government respond to the COVID-19 outbreak. In April 2020, the WHO reported that its support will include setting up 3 testing facilities in the country, additional isolation facilities to cover over 1000 suspected cases and mobilizing over 1200 trained health workforce for contact tracing and contact management. It continued, "WHO's work continues in Somalia to keep the country safe and protect the vulnerable despite the weakened health systems ravaged by years of war and neglect." [1] The Ministry of Health's draft Acute Watery Diarrhoea (AWD) and Cholera Preparedness and Response Plan 2017-2022, mentions the need to establish isolation facilities and reinforce barrier nursing procedures and standard and risk-based precautions in response to potential outbreaks, however it does not mention provision of any services to allow suspected cases to self-isolate. [2] There is no other relevant information on the Ministry of Health, the National Contingency Plan for Preparedness and Response to Coronavirus Disease 2019 or the Somali Institute for Health Research website. [3,4,5] Somalia's National Public Health Reference Laboratory (NPHRL) does not appear to have its own website.

[1] World Health Organization. "As cases of COVID-19 increase in Somalia, operational readiness also scaled up to early detect and respond to community transmission." [<http://www.emro.who.int/somalia/news/as-cases-of-covid-19-increase-rapidly-in-somalia-operational-readiness-also-scaled-up-to-early-detect-and-respond-to-community-transmission.html>] Accessed 19 April 2021.

[2] Somali Federal Republic, Ministry of Health and Human Service. "Draft AWD/Cholera Preparedness and Response Plan 2017-2022." [<https://moh.gov.so/en/wp-content/uploads/2020/12/Cholera-Preparedness-and-Response-Plan-for-Somalia1-Final.pdf>] Accessed 19 April 2021.

[3] Ministry of Health. [<https://moh.gov.so/en/>] Accessed 19 April 2021.

[4] Ministry of Health, National Contingency Plan for Preparedness and Response to Coronavirus Disease 2019, March-June 2020

([https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/national\\_contingency\\_plan\\_for\\_preparedness\\_and\\_response\\_to\\_coronavirus\\_covid-19\\_somalia.pdf](https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/national_contingency_plan_for_preparedness_and_response_to_coronavirus_covid-19_somalia.pdf)) Accessed 19th April 2021

[5] Somali Institute for Health Research. [<https://www.sihr.institute/>] Accessed 19 April 2021.

### 2.5.1c

**Does the country make de-identified data on contact tracing efforts for COVID-19 (including the percentage of new cases from identified contacts) available via daily reports (or other format) on government websites (such as the Ministry of Health, or similar)?**

Yes = 1, No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia makes de-identified data on contact tracing efforts for COVID-19 (including the percentage of new cases from identified contacts) available via daily reports. Somalia's Ministry of Health has a COVID-19 tracker which shares active cases, recoveries and deaths, but it does not show any information related to contact tracing. [1]

[1] Ministry of Health. "COVID-19 Dashboard, Somalia." [<https://moh.gov.so/en/covid19/>] Accessed 6 December 2020.

## 2.5.2 Point of entry management

### 2.5.2a

**Is there a joint plan or cooperative agreement between the public health system and border control authorities to identify suspected and potential cases in international travelers and trace and quarantine their contacts in the event of a public health emergency?**

Yes, plan(s)/agreement(s) are in place to prepare for future public health emergencies = 2, Yes, but plan(s)/agreement(s) are in place only in response to active public health emergencies = 1, No = 0

**Current Year Score: 0**

There is insufficient evidence of a joint plan or cooperative agreement between the public health system and border control authorities to identify suspected and potential cases in international travelers and trace and quarantine their contacts in the event of either an active or future public health emergency. There is no relevant information in National Contingency Plan for Preparedness and Response to Coronavirus, the Ministry of Health website or the Somalia Institute for Health Research. [1,2,3] Somalia's national laboratory does not appear to have its own website. There is no relevant information on the Ministry of Foreign Affairs and International Cooperation website. [3]

[1] Ministry of Health, National Contingency Plan for Preparedness and Response to Coronavirus Disease 2019, March-June 2020

([https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/national\\_contingency\\_plan\\_for\\_preparedness\\_and\\_response\\_to\\_coronavirus\\_covid-19-\\_somalia.pdf](https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/national_contingency_plan_for_preparedness_and_response_to_coronavirus_covid-19-_somalia.pdf)) Accessed 19th April 2021

[2] Ministry of Health. [<https://moh.gov.so/en/>] Accessed 19th April 2021

[3] Somali Institute for Health Research. [<https://www.sihr.institute/>] Accessed 19th April 2021

[4] Ministry of Foreign Affairs and International Cooperation. [<https://www.mfa.gov.so/>] Accessed 19th April 2021.

## 2.6 EPIDEMIOLOGY WORKFORCE

### 2.6.1 Applied epidemiology training program, such as the field epidemiology training program, for public health professionals and veterinarians (e.g., Field Epidemiology Training Program [FETP] and Field Epidemiology Training Program for Veterinarians [FETPV])

#### 2.6.1a

**Does the country meet one of the following criteria?**

- Applied epidemiology training program (such as FETP) is available in country
- Resources are provided by the government to send citizens to another country to participate in applied epidemiology training programs (such as FETP)

Needs to meet at least one of the criteria to be scored a 1 on this measure. , Yes for both = 1 , Yes for one = 1 , No for both = 0

**Current Year Score: 1**

There is evidence that Somalian animal health professionals in Kenya have explicit access to field epidemiology training programs in Kenya. According to the World Health Organisation (WHO), Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, Somalia has access to technical support and training from the United States Centres for Disease Control and Prevention (CDC) and to FETP programs in Kenya. The text explains that this FETP program is available for veterinarians and it is discussed in the context of zoonosis. However, the JEE does not elaborate on the extent of the access to the programmes in Kenya. However, Somalia does not have a field epidemiology

training programme for veterinary professionals (FETPV) in country. [1] Somalia does not currently participate in the WHO Training Programmes in Epidemiology and Public Health Interventions Network (TEPHINET), which was established in 1997, but Ministry of Health officials participated past trainings. Notably, Somalian Ministry of Health officials participated in a TEPHINET and WHO Communicable Disease Programme on Complex Emergencies with WHO Communicable Disease officers in Cairo from 27 April 2002 to 2 May 2002. [2] Somalia is not a member of The Eastern Mediterranean Public Health Network (EMPHNET) and does not have access to their FETP country programmes. [3] Somalia is also not a member country of the African Field Epidemiology Network (AFENET). [4] The Ministry of Health website does not address this issue. [5] The Ministry of Agriculture and Irrigation website does not discuss FETPV training. [6]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1]. Accessed 6 December 2020.

[2] World Health Organisation (WHO). "Field Epidemiology Training."

[https://www.who.int/csr/labepidemiology/projects/epitraining/en/]. Accessed 6 December 2020.

[3] The Eastern Mediterranean Public Health Network. "FETP Country Programs." [http://emphnet.net/?page\_id=491]. Accessed 6 December 2020.

[4] African Field Epidemiology Network (AFENET). [http://www.afenet.net/index.php]. Accessed 6 December 2020.

[5] Ministry of Health of the Republic of Somalia. [http://moh.gov.so/en/]. Accessed 6 December 2020.

[6] Ministry of Agriculture and Irrigation of the Republic of Somalia. [http://moa.gov.so/]. Accessed 6 December 2020.

### 2.6.1b

**Are the available field epidemiology training programs explicitly inclusive of animal health professionals or is there a specific animal health field epidemiology training program offered (such as FETPV)?**

Yes = 1 , No = 0

**Current Year Score: 1**

There is evidence that Somalian animal health professionals in Kenya have explicit access to field epidemiology training programs in Kenya. According to the World Health Organisation (WHO), Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, Somalia has access to technical support and training from the United States Centres for Disease Control and Prevention (CDC) and to FETP programs in Kenya. The text explains that this FETP program is available for veterinarians and it is discussed in the context of zoonosis. However, the JEE does not elaborate on the extent of the access to the programmes in Kenya. However, Somalia does not have a field epidemiology training programme for veterinary professionals (FETPV) in country. [1] Somalia does not currently participate in the WHO Training Programmes in Epidemiology and Public Health Interventions Network (TEPHINET), which was established in 1997, but Ministry of Health officials participated past trainings. Notably, Somalian Ministry of Health officials participated in a TEPHINET and WHO Communicable Disease Programme on Complex Emergencies with WHO Communicable Disease officers in Cairo from 27 April 2002 to 2 May 2002. [2] Somalia is not a member of The Eastern Mediterranean Public Health Network (EMPHNET) and does not have access to their FETP country programmes. [3] Somalia is also not a member country of the African Field Epidemiology Network (AFENET). [4] The Ministry of Health website does not address this issue. [5] The Ministry of Agriculture and Irrigation website does not discuss FETPV training. [6]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1]. Accessed 6 December 2020.

[2] World Health Organisation (WHO). "Field Epidemiology Training."

[https://www.who.int/csr/labepidemiology/projects/epitraining/en/]. Accessed 6 December 2020.

[3] The Eastern Mediterranean Public Health Network. "FETP Country Programs." [[http://emphnet.net/?page\\_id=491](http://emphnet.net/?page_id=491)]. Accessed 6 December 2020.

[4] African Field Epidemiology Network (AFENET). [<http://www.afenet.net/index.php>]. Accessed 6 December 2020.

[5] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[6] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

## 2.6.2 Epidemiology workforce capacity

### 2.6.2a

Is there public evidence that the country has at least 1 trained field epidemiologist per 200,000 people?

Yes = 1, No = 0

Current Year Score: 0

2020

Completed JEE assessments; Economist Impact analyst qualitative assessment based on official national sources, which vary by country

## Category 3: Rapid response to and mitigation of the spread of an epidemic

### 3.1 EMERGENCY PREPAREDNESS AND RESPONSE PLANNING

#### 3.1.1 National public health emergency preparedness and response plan

##### 3.1.1a

Does the country have an overarching national public health emergency response plan in place which addresses planning for multiple communicable diseases with epidemic or pandemic potential?

Evidence that there is a plan in place, and the plan is publicly available = 2, Evidence that the plan is in place, but the plan is not publicly available OR, Disease-specific plans are in place, but there is no evidence of an overarching plan = 1, No evidence that such a plan or plans are in place = 0

Current Year Score: 1

There is no evidence that Somalia has an overarching national public health emergency response plan in place which addresses planning for multiple communicable diseases with epidemic or pandemic potential but it does have a disease-specific plan. According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, "there is no multihazard public health emergency preparedness and response plan. Preparedness activities are seldom in place and response is on individual and ad hoc bases." However, the JEE also notes that the Ministry of Health in Mogadishu developed a Cholera Emergency Preparedness and Response Plan. It is of note that because Somalia is divided into three administrative areas, there are three parallel health systems, each with different capacities and working systems. [1] The Ministry of Health in Mogadishu's Cholera Emergency Preparedness and Response Plan was created in February 2018 and is currently operating with the assistance of the WHO. [2] There is no

discussion of public health emergency response plans on the Ministry of Health website. [3]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>].

Accessed 6 December 2020.

[2] World Health Organisation (WHO). 29 March 2018. "Disease Outbreak News: Cholera-- Somalia."

[<https://www.who.int/csr/don/29-march-2018-cholera-somalia/en/>]. Accessed 6 December 2020.

[3] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

### 3.1.1b

**If an overarching plan is in place, has it been updated in the last 3 years?**

Yes = 1 , No /no plan in place= 0

**Current Year Score: 0**

There is insufficient evidence that Somalia or one of the regions of Somalia has an overarching national public health emergency response plan which has been updated in the last three years. According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, "there is no multihazard public health emergency preparedness and response plan. Preparedness activities are seldom in place and response is on individual and ad hoc bases." However, the JEE also notes that the Ministry of Health in Mogadishu developed a Cholera Emergency Preparedness and Response Plan. It is of note that because Somalia is divided into three administrative areas, which led to three parallel health systems, each with different capacities and working systems. [1] The Ministry of Health in Mogadishu's Cholera Emergency Preparedness and Response Plan was created in the past three years (February 2018) and is currently operating with the assistance of the WHO. [2] There is no discussion of public health emergency response plans on the Ministry of Health website. [3]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>].

Accessed 6 December 2020.

[2] World Health Organisation (WHO). 29 March 2018. "Disease Outbreak News: Cholera-- Somalia."

[<https://www.who.int/csr/don/29-march-2018-cholera-somalia/en/>]. Accessed 6 December 2020.

[3] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

### 3.1.1c

**If an overarching plan is in place, does it include considerations for pediatric and/or other vulnerable populations?**

Yes = 1 , No /no plan in place= 0

**Current Year Score: 0**

There is insufficient evidence that Somalia or one of the regions of Somalia has an overarching national public health emergency response plan that addresses vulnerable populations such as children or the elderly. According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, "there is no multihazard public health emergency preparedness and response plan. Preparedness activities are seldom in place and response is on individual and ad hoc bases." However, the JEE also notes that the Ministry of Health in Mogadishu developed a Cholera Emergency Preparedness and Response Plan. It is of note that because Somalia is divided into three administrative areas, which led to three parallel health systems, each with different capacities and working systems. [1] The Ministry of Health in Mogadishu's Cholera Emergency Preparedness and Response Plan was created in the

past three years (February 2018) and is currently operating with the assistance of the WHO. This does not mention any vulnerable populations. [2] There is no discussion of public health emergency response plans on the Ministry of Health website. [3]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] World Health Organisation (WHO). 29 March 2018. "Disease Outbreak News: Cholera-- Somalia." [<https://www.who.int/csr/don/29-march-2018-cholera-somalia/en/>]. Accessed 6 December 2020.

[3] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

### 3.1.1d

**Does the country have a publicly available plan in place specifically for pandemic influenza preparedness that has been updated since 2009?**

Yes = 1 , No = 0

**Current Year Score: 0**

2020

WHO Strategic Partnership for IHR and Health Security (SPH)

## 3.1.2 Private sector involvement in response planning

### 3.1.2a

**Does the country have a specific mechanism(s) for engaging with the private sector to assist with outbreak emergency preparedness and response?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has a specific mechanism(s) for engaging with the private sector to assist with outbreak emergency preparedness and response. There is no mention of this in the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016. [1] There is no mention of this on the Ministry of Health (MoH) website. [2]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

## 3.1.3 Non-pharmaceutical interventions planning

### 3.1.3a

**Does the country have a policy, plan and/or guidelines in place to implement non-pharmaceutical interventions (NPIs) during an epidemic or pandemic?**

Yes, a policy, plan and/or guidelines are in place for more than one disease= 2, Yes, but the policy, plan and/or guidelines exist only for one disease = 1, No = 0

**Current Year Score: 1**

There is evidence that Somalia has a policy, plan or guidance in place to implement non-pharmaceutical interventions during an epidemic or pandemic. The National Contingency Plan for Preparedness and Response to Coronavirus talks about the need to develop strategy to reduce human to human transmission. [1] To curtail the spread of the pandemic, the government had implemented certain non-pharmaceutical interventions in form of restrictions such as mandatory use of facemasks in public areas, prohibition of mass gatherings and closure of schools, and religious places. [2] Somalia has a draft Acute Watery Diarrhoea and Cholera Preparedness and Response Plan 2017-2022, but it does not address non-pharmaceutical interventions, nor is it clear that the plan could be applied to other disease outbreaks. [3,4]

[1] Ministry of Health, National Contingency Plan for Preparedness and Response to Coronavirus Disease 2019, March-June 2020

([https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/national\\_contingency\\_plan\\_for\\_preparedness\\_and\\_response\\_to\\_coronavirus\\_covid-19\\_somalia.pdf](https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/national_contingency_plan_for_preparedness_and_response_to_coronavirus_covid-19_somalia.pdf)) Accessed 19th April 2021

[2] Somalia: Authorities Are Maintaining Restrictions As Of December 4 Due To COVID-19 Activity; Domestic And International Flights Ongoing /Update 5". 2021. Gardaworld. (<https://www.garda.com/crisis24/news-alerts/408321/somalia-authorities-are-maintaining-restrictions-as-of-december-4-due-to-covid-19-activity-domestic-and-international-flights-ongoing-update-5>) Accessed 19th April 2021

[3] Ministry of Health [<https://moh.gov.so/en/>] Accessed 19th April 2021

[4] Ministry of Health. "Draft AWD/Cholera Preparedness and Response Plan 2017-2022". [<https://moh.gov.so/en/wp-content/uploads/2020/12/Cholera-Preparedness-and-Response-Plan-for-Somalia1-Final.pdf>] Accessed 19th April 2021

## 3.2 EXERCISING RESPONSE PLANS

### 3.2.1 Activating response plans

#### 3.2.1a

Does the country meet one of the following criteria?

- Is there evidence that the country has activated their national emergency response plan for an infectious disease outbreak in the past year?

- Is there evidence that the country has completed a national-level biological threat-focused exercise (either with WHO or separately) in the past year?

Needs to meet at least one of the criteria to be scored a 1 on this measure. , Yes for both = 1 , Yes for one = 1 , No for both = 0

**Current Year Score: 1**

There is evidence that Somalia has activated a national emergency response plan for an infectious disease outbreak in the past year. However, there is also no evidence that Somalia has completed a national-level biological threat-focused exercise in the past year. The National Contingency Plan for Preparedness and Response to Coronavirus was implemented by the Ministry of Health to ensure detection, prevention and control, case management and community sensitisation towards Covid-19.[1] There is no further information on the Ministry of Health (MoH) website. [2] There are no planned or past simulation exercises listed for Somalia on the World Health Organization website. [3]

[1] Ministry of Health, National Contingency Plan for Preparedness and Response to Coronavirus Disease 2019, March-June 2020

([https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/national\\_contingency\\_plan\\_for\\_preparedness\\_and\\_response\\_to\\_coronavirus\\_covid-19\\_somalia.pdf](https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/national_contingency_plan_for_preparedness_and_response_to_coronavirus_covid-19_somalia.pdf)) Accessed 19th April 2021

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 19th April 2021

[3] World Health Organization. "Simulation Exercise." [<https://extranet.who.int/sph/simulation-exercise>]. Accessed 19th April 2021.

### 3.2.1b

**Is there evidence that the country in the past year has identified a list of gaps and best practices in response (either through an infectious disease response or a biological-threat focused exercise) and developed a plan to improve response capabilities?**

Yes, the country has developed and published a plan to improve response capacity = 2 , Yes, the country has developed a plan to improve response capacity, but has not published the plan = 1 , No = 0

**Current Year Score: 0**

There is not sufficient evidence that Somalia has in the past year identified a list of gaps and best practices (either through an infectious disease response or a biological-threat focused exercise) and developed a plan to improve response capabilities. There is no evidence that Somalia has undergone an After Action Review (post emergency response) or a biological threat-focused IHR exercise with the World Health Organisation (WHO) [1] The Ministry of Health (MoH) does not discuss such exercises. [2]

[1] World Health Organisation (WHO). "After Action Review." [<https://www.who.int/ihr/procedures/after-action-review/en/>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

## 3.2.2 Private sector engagement in exercises

### 3.2.2a

**Is there evidence that the country in the past year has undergone a national-level biological threat-focused exercise that has included private sector representatives?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is not sufficient evidence that Somalia has undergone a national-level biological threat-focused exercise that has included private sector representatives. There is no evidence that Somalia has ever undergone an After Action Review (post-emergency response) or a biological threat-focused IHR exercise with the World Health Organisation (WHO) [1] The Ministry of Health (MoH) does not discuss such exercises. [2] There are no past or future simulation exercises planned for Somalia on the WHO website. [3]

[1] World Health Organisation (WHO). "After Action Review." [<https://www.who.int/ihr/procedures/after-action-review/en/>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] World Health Organization. "Simulation Exercise." [<https://extranet.who.int/sph/simulation-exercise>]. Accessed 26

December 2020.

## 3.3 EMERGENCY RESPONSE OPERATION

### 3.3.1 Emergency response operation

#### 3.3.1a

**Does the country have in place an Emergency Operations Center (EOC)?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has an emergency operations centre (EOC). The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, says that there are no EOCs in Somalia's three zones, but that Puntland and Somaliland have more developed Emergency Preparedness and Response units than the South Central zone. The JEE notes a temporary ad hoc committee mechanism which leads response at all levels, but does not mention a permanent EOC. It also mentions a great need for developing emergency response mechanisms and capabilities. [1] There is no evidence on the Ministry of Health website. [2]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

#### 3.3.1b

**Is the Emergency Operations Center (EOC) required to conduct a drill for a public health emergency scenario at least once per year or is there evidence that they conduct a drill at least once per year?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that the Emergency Operations Centre (EOC) is required to conduct a drill at least once per year or has conducted such a drill in the past. This is because there is no evidence of an EOC in Somalia.

The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, says that there are no EOCs in Somalia's three zones, but that Puntland and Somaliland have more developed Emergency Preparedness and Response units than the South Central zone. The JEE notes a temporary ad hoc committee, which leads response at all levels. It also mentions a great need for developing emergency response mechanisms and capabilities. [1] There is no evidence on the Ministry of Health website. [2]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 19 April 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 19 April 2020.

### 3.3.1c

Is there public evidence to show that the Emergency Operations Center (EOC) has conducted within the last year a coordinated emergency response or emergency response exercise activated within 120 minutes of the identification of the public health emergency/scenario?

Yes = 1 , No = 0

**Current Year Score: 0**

There is no publicly available evidence that Somalia has an Emergency Operations Centre (EOC) nor that the existing ad hoc emergency operations entity can conduct, or has conducted within the last year, a coordinated emergency response or emergency response exercise activated within 120 minutes of the identification of the public health emergency/scenario. According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, says that there are no EOCs in Somalia's three zones, but that Puntland and Somaliland have more developed Emergency Preparedness and Response units than the South Central zone. The JEE notes a temporary ad hoc committee, which leads response at all levels. It also mentions a great need for developing emergency response mechanisms and capabilities. the JEE notes, "the system and decision-making process have been tested in real emergencies. However, there is no system in place to formally evaluate the emergency response or to routinely extract lessons from these events." [1] There is no evidence on the Ministry of Health website. [2]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

## 3.4 LINKING PUBLIC HEALTH AND SECURITY AUTHORITIES

### 3.4.1 Public health and security authorities are linked for rapid response during a biological event

#### 3.4.1a

Does the country meet one of the following criteria?

- Is there public evidence that public health and national security authorities have carried out an exercise to respond to a potential deliberate biological event (i.e., bioterrorism attack)?
- Are there publicly available standard operating procedures, guidelines, memorandums of understanding (MOUs), or other agreements between the public health and security authorities to respond to a potential deliberate biological event (i.e., bioterrorism attack)?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

**Current Year Score: 0**

There is insufficient publicly available evidence that Somalia public health and national security authorities have carried out an exercise to respond to a potential deliberate biological event (i.e. bioterrorism attack) or standard operating procedures, guidelines, MOUs or other agreements between the public health and security authorities to respond to a potential deliberate biological event (i.e. bioterrorism attack). According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, 17 to 21 October 2016, there is no legislation or written agreements between the two sectors, but there is some ad hoc collaboration. There is evidence of collaboration between security authorities and the Ministry of Health (MoH) in Ebola preparedness, but not any collaboration over responding to a potential deliberate biological event. [1] There is no discussion of the issue on the MoH website. [2] There is no relevant

information on the Ministry of Defence website. [3]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1].

Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [http://moh.gov.so/en/]. Accessed 6 December 2020.

[3] Ministry of Defence of the Republic of Somalia. [http://mod.gov.so/]. Accessed 6 December 2020.

## 3.5 RISK COMMUNICATIONS

### 3.5.1 Public communication

#### 3.5.1b

**Does the risk communication plan (or other legislation, regulation or strategy document used to guide national public health response) outline how messages will reach populations and sectors with different communications needs (eg different languages, location within the country, media reach)?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia's emergency communications activities consider populations with different communications needs because there is insufficient evidence that Somalia has an emergency risk communication plan. There is no information about an emergency risk communication plan (ERC) in the Somali Communications Act of 2012. [1] According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, "None of the [Ministries of Health] (MOHs) has an ERC strategy and there are no [standard operating procedures] (SOPs) on how to coordinate ERC during an emergency." However, the JEE notes that despite ERC being a new concept for the three Somali administrative zones, there "is a solid basis on which ERC capacity could be built." This includes, training public communications teams of Somaliland and Puntland in ERC activities, using mass media mechanisms for emergency communications, and implementation of the communication piece of the Comprehensive Multi-Year Strategy for Immunization 2016-2020. [2] There is no relevant information on the Ministry of Health website. [3]

[1] Government of the Republic of Somalia. 2012. "Somali Communications Act of 2012." [http://www.law-democracy.org/wp-content/uploads/2012/05/Somalia.Comms-Act-2012.pdf]. Accessed 6 December 2020.

[2] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1].

Accessed 6 December 2020.

[3] Ministry of Health of the Republic of Somalia. [http://moh.gov.so/en/]. Accessed 6 December 2020.

### 3.5.1 Risk communication planning

#### 3.5.1a

**Does the country have in place, either in the national public health emergency response plan or in other legislation, regulation, or strategy documents, a section detailing a risk communication plan that is specifically intended for use during a public health emergency?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has developed an emergency risk communication plan. There is no information about an emergency risk communication plan (ERC) in the Somali Communications Act of 2012. [1] According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, "None of the [Ministries of Health] (MOHs) has an ERC strategy and there are no [standard operating procedures] (SOPs) on how to coordinate ERC during an emergency." However, the JEE notes that despite ERC being a new concept for the three Somali administrative zones, there "is a solid basis on which ERC capacity could be built." This includes, training public communications teams of Somaliland and Puntland in ERC activities, using mass media mechanisms for emergency communications, and implementation of the communication piece of the Comprehensive Multi-Year Strategy for Immunization 2016-2020. [2] There is no relevant information on the Ministry of Health website. [3]

[1] Government of the Republic of Somalia. 2012. "Somali Communications Act of 2012." [<http://www.law-democracy.org/wp-content/uploads/2012/05/Somalia.Comms-Act-2012.pdf>]. Accessed 6 December 2020.

[2] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[3] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

### 3.5.1c

**Does the risk communication plan (or other legislation, regulation or strategy document used to guide national public health response) designate a specific position within the government to serve as the primary spokesperson to the public during a public health emergency?**

Yes = 1, No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has developed an emergency risk communication plan which designates a specific position within the government to serve as the primary spokesperson to the public during a public health emergency. There is no information about an emergency risk communication plan (ERC) in the Somali Communications Act of 2012. [1] According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, "None of the [Ministries of Health] (MOHs) has an ERC strategy and there are no [standard operating procedures] (SOPs) on how to coordinate ERC during an emergency." However, the JEE notes that despite ERC being a new concept for the three Somali administrative zones, there "is a solid basis on which ERC capacity could be built." This includes, training public communications teams of Somaliland and Puntland in ERC activities, using mass media mechanisms for emergency communications, and implementation of the communication piece of the Comprehensive Multi-Year Strategy for Immunization 2016-2020. [2] There is no relevant information on the Ministry of Health website. [3]

[1] Government of the Republic of Somalia. 2012. "Somali Communications Act of 2012." [<http://www.law-democracy.org/wp-content/uploads/2012/05/Somalia.Comms-Act-2012.pdf>]. Accessed 6 December 2020.

[2] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[3] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

## 3.5.2 Public communication

### 3.5.2a

**In the past year, is there evidence that the public health system has actively shared messages via online media platforms (e.g. social media, website) to inform the public about ongoing public health concerns and/or dispel rumors, misinformation or disinformation?**

Public health system regularly shares information on health concerns = 2, Public health system shares information only during active emergencies, but does not regularly utilize online media platforms = 1, Public health system does not regularly utilize online media platforms, either during emergencies or otherwise = 0

**Current Year Score: 1**

There is evidence Somalia has used social media to inform the public about ongoing health concerns, but social media channels appear only to be regularly used to share information about health concerns during active emergencies. According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, Somalia has mass media mechanisms to communicate during emergencies through local radio and SMS text messages. The Ministry of Health also organises press conferences as needed. The JEE notes that there is a problematic dynamic in which "local radio is an amplifier of rumours, and Somalis like to report them to this form of media." [1] However, there is no corroborating evidence of this on the Ministry of Health website, which has a media centre, but it does not include any press releases or information on public health emergencies. [2] The Ministry of Health has a Facebook and Twitter account which has been used to provide updates on the COVID-19 outbreak but is mostly used to share news about meetings and diplomatic activity when there is not an active health emergency. [3,4]

[1] Government of the Republic of Somalia. 2012. "Somali Communications Act of 2012." [<http://www.law-democracy.org/wp-content/uploads/2012/05/Somalia.Comms-Act-2012.pdf>]. Accessed 6 December 2020.

[2] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[3] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

### 3.5.2b

**Is there evidence that senior leaders (president or ministers) have shared misinformation or disinformation on infectious diseases in the past two years?**

No = 1, Yes = 0

**Current Year Score: 1**

There is not sufficient evidence that senior leaders have spread misinformation or disinformation on infectious disease in the past two years. No major media outlets have reported any incidents. There are however major concerns about the spread of misinformation regarding COVID-19 in Somalia and significant mistrust of the government. A Save the Children assessment in June 2020 found that 42 percent of more than 3,000 people surveyed believed COVID-19 was a "government campaign" and around three quarters of respondents said that while they had heard of the virus, they "did not feel they knew enough about it." [1]

[1] Save the Children. "Misinformation leads to increasing COVID-19 stigma in sub-Saharan Africa." [<https://www.savethechildren.net/news/misinformation-leads-increasing-covid-19-stigma-sub-saharan-africa>]. Accessed 26 December 2020.

## 3.6 ACCESS TO COMMUNICATIONS INFRASTRUCTURE

### 3.6.1 Internet users

#### 3.6.1a

Percentage of households with Internet

Input number

Current Year Score: 2.0

2019

International Telecommunication Union (ITU)

### 3.6.2 Mobile subscribers

#### 3.6.2a

Mobile-cellular telephone subscriptions per 100 inhabitants

Input number

Current Year Score: 48.8

2019

International Telecommunication Union (ITU)

### 3.6.3 Female access to a mobile phone

#### 3.6.3a

Percentage point gap between males and females whose home has access to a mobile phone

Input number

Current Year Score: 3.0

2019

Gallup; Economist Impact calculation

### 3.6.4 Female access to the Internet

#### 3.6.4a

Percentage point gap between males and females whose home has access to the Internet

Input number

Current Year Score: 6

2019

Gallup; Economist Impact calculation

## 3.7 TRADE AND TRAVEL RESTRICTIONS

### 3.7.1 Trade restrictions

#### 3.7.1a

**In the past year, has the country issued a restriction, without international/bilateral support, on the export/import of medical goods (e.g. medicines, oxygen, medical supplies, PPE) due to an infectious disease outbreak?**

Yes = 0, No = 1

**Current Year Score: 1**

There is no evidence that Somalia has issued a restriction, without international/bilateral support, on the export/import of medical goods due to an infectious disease outbreak. No major media outlets have reported any incidents. The Ministry of Health and the Ministry of Foreign Affairs do not share any relevant information on their websites, including relating to the COVID-19 outbreak. [1,2]

[1] Ministry of Health. [<https://moh.nomadilab.org/>] Accessed 6 December 2020.

[2] Ministry of Foreign Affairs. [<https://www.mfa.gov.so/>] Accessed 6 December 2020.

#### 3.7.1b

**In the past year, has the country issued a restriction, without international/bilateral support, on the export/import of non-medical goods (e.g. food, textiles, etc) due to an infectious disease outbreak?**

Yes = 0, No = 1

**Current Year Score: 1**

There is no evidence that Somalia has issued a restriction, without international/bilateral support, on the export/import of non-medical goods (e.g. food, textiles, etc) due to an infectious disease outbreak. According to World Health Organisation (WHO) Disease Outbreak News, on 29 March 2018 Somalia reported a Cholera outbreak. However, there is no evidence of a resulting restriction on travel and trade. The WHO did not recommend such restrictions. [1] There is no evidence of an outbreak report on the World Organisation for Animal Health (OIE) WAHIS database. [2] There is no mention of any such restrictions in media outlets. The Ministry of Health website does not discuss this issue. [3] There is no website for a Ministry of Transportation of Somalia, but there is a website for the Ministry of Transport and Road Development of the Somaliland region. There is no mention of such a restriction on the Ministry of Transport and Road Development of Somaliland. [4] Neither the Ministry of Health nor the Ministry of Foreign Affairs share any relevant information, even relating to COVID-19. [5,6]

[1] World Health Organisation (WHO). 29 March 2018. "Cholera-- Somalia Disease Outbreak News." [<https://www.who.int/csr/don/29-march-2018-cholera-somalia/en/>]. Accessed 6 December 2020.

[2] World Organisation for Animal Health (OIE). "WAHIS Weekly Disease Information database." [[https://www.oie.int/wahis\\_2/public/wahid.php/Diseaseinformation/WI](https://www.oie.int/wahis_2/public/wahid.php/Diseaseinformation/WI)]. Accessed 6 December 2020.

[3] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[4] Ministry of Transport and Road Development of the Republic of Somaliland. [<https://somalilandtransport.com/>]. Accessed 6 December 2020.

[5] Ministry of Health. [<https://moh.nomadilab.org/>] Accessed 6 December 2020.

[6] Ministry of Foreign Affairs. [<https://www.mfa.gov.so/>] Accessed 6 December 2020.

### 3.7.2 Travel restrictions

#### 3.7.2a

In the past year, has the country implemented a ban, without international/bilateral support, on travelers arriving from a specific country or countries due to an infectious disease outbreak?

Yes = 0, No = 1

Current Year Score: 0

There is evidence that Somalia implemented a ban, without international/bilateral support, on travelers arriving from a specific country or countries due to an infectious disease outbreak. As a result of Covid-19, Somali authorities banned all international passenger flights and there were no passenger flights to Somalia (excluding Somaliland). [1]

[1] Travel Bans (2020). "Somalia Travel Restrictions." [<https://travelbans.org/africa/somalia/>]. Accessed 6 December 2020.

## Category 4: Sufficient and robust health sector to treat the sick and protect health workers

### 4.1 HEALTH CAPACITY IN CLINICS, HOSPITALS, AND COMMUNITY CARE CENTERS

#### 4.1.1 Available human resources for the broader healthcare system

##### 4.1.1a

Doctors per 100,000 people

Input number

Current Year Score: 2.3

2014

WHO; national sources

##### 4.1.1b

Nurses and midwives per 100,000 people

Input number

Current Year Score: 11.19

2014

WHO; national sources

#### 4.1.1c

**Does the country have a health workforce strategy in place (which has been updated in the past five years) to identify fields where there is an insufficient workforce and strategies to address these shortcomings?**

Yes = 1, No = 0

**Current Year Score: 0**

There is no evidence that Somalia has a health workforce strategy in place which has been updated in the past five years. According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, there is a lack of a formal workforce development plan or strategy. "Several people have been trained in [Field Epidemiology Training Programme] (FETP)-type programmes but there is no registry of them and no programme existing or planned for the country." The JEE also notes that "a strategy for human resources for health exists but has not been implemented," "public health needs to be added as part of the health workforce strategy," and "the existing health workforce strategy is limited and needs more elaboration." Furthermore, the JEE notes there is a significant brain drain in the public health sector where professionals are usually trained abroad and when they do return to Somalia health professionals leave to the private and NGO sector for better wages. [1] There is no relevant information on the Ministry of Health, Ministry of Labour, or Ministry of Education websites. [2,3,4]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Labour of the Republic of Somalia. [<http://molgov.so/>]. Accessed 6 December 2020.

[4] Ministry of Education of the Republic of Somalia. [<http://moesomalia.net/english/>]. Accessed 6 December 2020.

### 4.1.2 Facilities capacity

#### 4.1.2a

**Hospital beds per 100,000 people**

Input number

**Current Year Score: 87**

2017

WHO/World Bank; national sources

#### 4.1.2b

**Does the country have the capacity to isolate patients with highly communicable diseases in a biocontainment patient care unit and/or patient isolation room/unit located within the country?**

Yes = 1, No = 0

**Current Year Score: 0**

There is insufficient evidence indicating that Somalia has the capacity to isolate patients with highly communicable diseases in a biocontainment patient care unit and/or patient isolation facility located within the country. The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, discusses isolation in the context of points of entry (PoEs) noting that "no public health contingency plan to respond to public health emergencies of any hazards exists at any PoE, nor any designated spaces to isolate ill passengers or animal quarantine." The JEE also notes that there are legal provisions regarding quarantine of animals, but not in the context of zoonotic diseases. [1] The Banadir Hospital, the National Referral Hospital of Somalia which is managed by the Ministry of Health, does not publicly list any isolation or quarantine capabilities. [2] The Puntland Hospital lists infectious disease as one of their specialities, but does not discuss isolation or quarantine. [3] The Edna Adan Hospital does not have isolation or quarantine capability according to the website. [4] The Ministry of Health website does not discuss the issue. [5]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. "Banadir Hospital." [http://banadirhospital.com/#]. Accessed 6 December 2020.

[3] Puntland Hospital. "Patients and Visitors." [http://puntlandhospital.com/patient-and-visitors/]. Accessed 6 December 2020.

[4] Edna Adan Hospital. "Departments." [https://www.ednahospital.org/edna-hospital/departments/]. Accessed 6 December 2020. [5] Ministry of Health of the Republic of Somalia. [http://moh.gov.so/en/]. Accessed 6 December 2020.

**4.1.2c**

**Does the country meet one of the following criteria?**

**- Is there evidence that the country has demonstrated capacity to expand isolation capacity in response to an infectious disease outbreak in the past two years?**

**- Is there evidence that the country has developed, updated or tested a plan to expand isolation capacity in response to an infectious disease outbreak in the past two years?**

Yes = 1, No = 0

**Current Year Score: 0**

There is insufficient evidence indicating that Somalia has demonstrated capacity to expand isolation capacity in response to an infectious disease outbreak in the past two year. There is also no evidence that the country has developed, updated or tested a plan to expand isolation capacity in response to an infectious disease outbreak in the past two years. The National Contingency Plan for Preparedness and Response to Coronavirus Disease mentions the need for isolation but does not provide details about expansion of isolation facilities or of a plan to to expand isolation capacity. However, it is specified that the country has limited isolation capacity.[1] Given the limited resources of the country, WHO provided 15 additional isolation centers across the country by supplying personal protective equipment and medical supplies, and by training health care workers.[2] The Draft AWD/Cholera Preparedness and Response Plan 2017-2022 talks about establishing isolation facilities and reinforce barrier nursing procedures and standard and risk-based precautions. However, there is not much information on expansion of isolation facilities. [3] The Puntland Hospital lists infectious disease as one of their specialities, but does not discuss isolation or quarantine. [4] The Edna Adan Hospital does not have isolation or quarantine capability according to the website. [5] The Ministry of Health website does not discuss the issue. [6]

- [1] Ministry of Health, National Contingency Plan for Preparedness and Response to Coronavirus Disease 2019, March-June 2020  
([https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/national\\_contingency\\_plan\\_for\\_preparedness\\_and\\_response\\_to\\_coronavirus\\_covid-19\\_somalia.pdf](https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/national_contingency_plan_for_preparedness_and_response_to_coronavirus_covid-19_somalia.pdf)) Accessed 19th April 2021
- [2] COVID-19: WHO's Action in Countries, Somalia, May 2020 [[https://www.who.int/docs/default-source/coronaviruse/country-case-studies/somalia-c19-case-study-20-may.pdf?sfvrsn=c7d6eea1\\_2&download=true](https://www.who.int/docs/default-source/coronaviruse/country-case-studies/somalia-c19-case-study-20-may.pdf?sfvrsn=c7d6eea1_2&download=true).] Accessed 19th April 2021
- [3] Ministry of Health. "Draft AWD/Cholera Preparedness and Response Plan 2017-2022". [<https://moh.gov.so/en/wp-content/uploads/2020/12/Cholera-Preparedness-and-Response-Plan-for-Somalia1-Final.pdf>] Accessed 19th April 2021
- [4] Puntland Hospital. ""Patients and Visitors."" [<http://puntlandhospital.com/patient-and-visitors/>]. Accessed 19th April 2021.
- [5] Edna Adan Hospital. ""Departments."" [<https://www.ednahospital.org/edna-hospital/departments/>]. Accessed 19th April 2021
- [6] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 19th April 2021

## 4.2 SUPPLY CHAIN FOR HEALTH SYSTEM AND HEALTHCARE WORKERS

### 4.2.1 Routine health care and laboratory system supply

#### 4.2.1a

**Is there a national procurement protocol in place which can be utilized by the Ministries of Health and Agriculture for the acquisition of laboratory supplies (e.g. equipment, reagents and media) and medical supplies (e.g. equipment, PPE) for routine needs?**

Yes for both laboratory and medical supply needs = 2, Yes, but only for one = 1, No = 0

**Current Year Score: 0**

There is insufficient information that Somalia has a national procurement protocol in place which can be utilised by the Ministries of Health and Agriculture for the acquisition of laboratory supplies and medical supplies. The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, noted that capacity for procurement, particularly for vaccines, is limited at the Ministry of Health (MoH) and district level and thus the international community plays a great role in procurement. [1] International partners include Gavi The Vaccine Alliance, United Nations International Children's Emergency Fund (UNICEF), International Red Cross, and WHO. As of 29 March 2019, Somalia has received \$39,587,294 in vaccine related disbursements between 2000-2018 Gavi, "an international organisation- a global Vaccine Alliance, bringing together public and private sectors with the shared goal of creating equal access to new and underused vaccines for children living in the world's poorest countries." [2] According to a 12 December 2016 UNICEF article, the MoH of Jubaland region and the federal government of Somalia are working with UNICEF, International Red Cross, and the WHO on a mass vaccination campaign. [3] The Logistics and Procurement page of the MoH website is still under development. The Medical Services page of the MoH website describes the department is, "responsible for procurement, storage, and distribution of medical supplies," but additional information is not available. [4] The Ministry of Agriculture and Irrigation website does not discuss this issue. [5]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 19 April 2021.

[2] Gavi The Vaccine Alliance. 29 March 2019. "Somalia." [<https://www.gavi.org/country/somalia/>]. Accessed 19 April 2021.

[3] Li, Kun, United Nations International Children's Emergency Fund (UNICEF). 12 December 2016. "Measles Outbreak Poses New Threat to Children in Somalia." [https://www.unicef.org/infobycountry/somalia\_94164.html]. Accessed 19 April 2021.

[4] Ministry of Health of the Republic of Somalia. "Medical Services." [http://moh.gov.so/en/departments/medical-services]. Accessed 19 April 2021.

[5] Ministry of Agriculture and Irrigation of the Republic of Somalia. [http://moa.gov.so/]. Accessed 19 April 2021.

## 4.2.2 Stockpiling for emergencies

### 4.2.2a

**Does the country have a stockpile of medical supplies (e.g. MCMs, medicines, vaccines, medical equipment, PPE) for national use during a public health emergency?**

Yes = 2, Yes, but there is limited evidence about what the stockpile contains = 1, No = 0

**Current Year Score: 0**

There is no publicly available information indicating that Somalia has a stockpile of medical supplies (e.g. MCMs, medicines, vaccines, medical equipment, PPE) for national use during a public health emergency. According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, Somalia has a "huge deficit in necessary MCM and personnel to counter an emergency, requiring reliance on international assistance," and that MCMs has been provided on an ad hoc basis by Turkey, the Kingdom of Saudi Arabia, United Arab Emirates, WHO/UNICEF, international NGOs, and the Somali diaspora. [1] The Ministry of Health (MoH) website has a Pharmaceutical and Medical Equipment page and an Emergency and Outbreak Response page, but there is not any relevant information on either page.[2] There is no relevant information on the Ministry of humanitarian affairs and disaster management website. [3] There is not currently a website for the Ministry of Interior and Security of the Republic of Somalia. The website for the ministry of defence is not active yet. [4]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1]. Accessed 19 April 2021.

[2] Ministry of Health of the Republic of Somalia. [http://moh.gov.so/en/]. Accessed 19 April 2021.

[3] Ministry of humanitarian affairs and disaster management. [https://mohadm.gov.so/]. Accessed 19 April 2021.

[4] Ministry of Defence of the Republic of Somalia. [http://mod.gov.so/]. Accessed 19 April 2021.

### 4.2.2b

**Does the country have a stockpile of laboratory supplies (e.g. reagents, media) for national use during a public health emergency?**

Yes = 2, Yes, but there is limited evidence about what the stockpile contains = 1, No = 0

**Current Year Score: 0**

There is no publicly available information indicating that Somalia has a stockpile of laboratory supplies for use during a national public health emergency. The Ministry of Health (MoH) website has a Pharmaceutical and Medical Equipment page and an Emergency and Outbreak Response page, but there is not any information on either page regarding laboratory supplies [1] There is no relevant information on the Ministry of Defence website. [2] There is not currently a website for the Ministry of Interior and Security of the Republic of Somalia. In January 2018, the Government of the Republic of Somalia launched a Ministry of Disaster Management, but there is no website for the Ministry. [3]

[1] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[2] Ministry of Defence of the Republic of Somalia. [<http://mod.gov.so/>]. Accessed 6 December 2020.

[3] Ali, Muna. Adeso. 5 March 2018. "Launch of the Somalia Disaster Management Policy." [<http://adesoafrika.org/what-we-do/blogs/launch-of-the-somalia-disaster-management-policy/>]. Accessed 6 December 2020.

#### 4.2.2c

**Is there evidence that the country conducts or requires an annual review of the national stockpile to ensure the supply is sufficient for a public health emergency?**

Yes = 1, No = 0

**Current Year Score: 0**

There is no evidence that the country conducts or requires an annual review of the national stockpile to ensure the supply is sufficient for a public health emergency. The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, noted that capacity for procurement of medical supplies is limited at the Ministry of Health (MoH) and district level and thus the international community plays a great role in procurement. [1] The Ministry of Health (MoH) website has a Pharmaceutical and Medical Equipment page and an Emergency and Outbreak Response page, but there is not any relevant information on either page.[2] There is no relevant information on the Ministry of humanitarian affairs and disaster management website. [3] There is not currently a website for the Ministry of Interior and Security of the Republic of Somalia. The website for the ministry of defence is not active yet. [4]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 19 April 2021.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 19 April 2021.

[3] Ministry of humanitarian affairs and disaster management. [<https://mohadm.gov.so/>]. Accessed 19 April 2021.

[4] Ministry of Defence of the Republic of Somalia. [<http://mod.gov.so/>]. Accessed 19 April 2021.

### 4.2.3 Manufacturing and procurement for emergencies

#### 4.2.3a

**Does the country meet one of the following criteria?**

- Is there evidence of a plan/agreement to leverage domestic manufacturing capacity to produce medical supplies (e.g. MCMs, medicines, vaccines, equipment, PPE) for national use during a public health emergency?

- Is there evidence of a plan/mechanism to procure medical supplies (e.g. MCMs, medicines, vaccines, equipment, PPE) for national use during a public health emergency?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

**Current Year Score: 0**

There is no publicly available information indicating that Somalia has a plan to produce or procure medical supplies (e.g. MCMs, medicines, vaccines, equipment, PPE) during a national public health emergency. There is no relevant information on the Ministry of Defence website. The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, noted that capacity is limited at the Ministry of Health (MoH) and district level and thus the international community plays a great role in procurement. [1] Neither the Ministry of Health

nor the Ministry of Defence share any relevant information on their websites. [2,3]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1].

Accessed 19 April 2021.

[2] Ministry of Health of the Republic of Somalia. [http://moh.gov.so/en/]. Accessed 19 April 2021.

[3] Ministry of Defence of the Republic of Somalia. [http://mod.gov.so/]. Accessed 19 April 2021.

#### 4.2.3b

Does the country meet one of the following criteria?

- Is there evidence of a plan/agreement to leverage domestic manufacturing capacity to produce laboratory supplies (e.g. reagents, media) for national use during a public health emergency?

- Is there evidence of a plan/mechanism to procure laboratory supplies (e.g. reagents, media) for national use during a public health emergency?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

**Current Year Score: 0**

There is no publicly available information indicating that Somalia has a plan to produce or procure laboratory supplies during a national public health emergency. There is no relevant information on the Ministry of Defence website. The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, noted that capacity is limited at the Ministry of Health (MoH) and district level and thus the international community plays a great role in procurement of materials required to respond to a health emergency. [1] Neither the Ministry of Health nor the Ministry of Defence share any relevant information on their websites. Somalia's national laboratory does not have its own website. [2,3]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1].

Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [http://moh.gov.so/en/]. Accessed 6 December 2020

[3] Ministry of Defence of the Republic of Somalia. [http://mod.gov.so/]. Accessed 6 December 2020.

## 4.3 MEDICAL COUNTERMEASURES AND PERSONNEL DEPLOYMENT

### 4.3.1 System for dispensing medical countermeasures (MCM) during a public health emergency

#### 4.3.1a

Does the country have a plan, program, or guidelines in place for dispensing medical countermeasures (MCM) for national use during a public health emergency (i.e., antibiotics, vaccines, therapeutics and diagnostics)?

Yes = 1, No = 0

**Current Year Score: 0**

There is no evidence that Somalia has a plan, program, or guidelines in place for dispensing medical countermeasures for national use during a public health emergency. According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, Somalia has a "huge deficit in

necessary MCM and personnel to counter an emergency, requiring reliance on international assistance," and that MCMs has been provided on an ad hoc basis by a number of Middle Eastern countries, WHO/UNICEF, international NGOs, and the Somali diaspora. The JEE states there is a draft drug policy governing medical supplies management, but details of this draft policy are unavailable and it is unclear if the policy was ever enacted. It also cites the National Health Professional Council draft law (South Central zone) and Law No. 6 (Puntland), but the text is not available for either document. If there is such a plan, the details are not available. [1] The Ministry of Health (MoH) website has a Pharmaceutical and Medical Equipment page and an Emergency and Outbreak Response page, but there is not any information on either page regarding MCMs. [2] There is no relevant information on the Ministry of Defence website. [3] There is not currently a website for the Ministry of Interior and Security of the Republic of Somalia. In January 2018, the Government of the Republic of Somalia launched a Ministry of Disaster Management, but there is no website for the Ministry and no information available regarding its involvement or agreements with pharmaceutical manufacturers for MCMs. [4]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [http://moh.gov.so/en/]. Accessed 6 December 2020.

[3] Ministry of Defence of the Republic of Somalia. [http://mod.gov.so/]. Accessed 6 December 2020.

[4] Ali, Muna. Adeso. 5 March 2018. "Launch of the Somalia Disaster Management Policy." [http://adesoafrika.org/what-we-do/blogs/launch-of-the-somalia-disaster-management-policy/]. Accessed 6 December 2020.

## 4.3.2 System for receiving foreign health personnel during a public health emergency

### 4.3.2a

**Is there a public plan in place to receive health personnel from other countries to respond to a public health emergency?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has a national plan in place to receive health personnel from other countries to respond to a public health emergency. According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, Somalia has a "huge deficit in necessary MCM and personnel to counter an emergency, requiring reliance on international assistance." The JEE also notes that there have been several bilateral agreements and memoranda of understand (MoU) for receiving personnel, but a integrated plan is lacking. The details of such MoUs are not available. The JEE cites the National Health Professional Council draft law (South Central zone) and Law No. 6 (Puntland), but the text is not available for either document. [1] The Ministry of Health (MoH) website has a Human Resources page and an Emergency and Outbreak Response page, but there is not any information on either page regarding agreements or MoU about personnel. [2] There is no relevant information on the Ministry of Defence website. [3] There is not currently a website for the Ministry of Interior and Security of the Republic of Somalia. In January 2018, the Government of the Republic of Somalia launched a Ministry of Disaster Management, but there is no website for the Ministry and no information available regarding MoU or agreements for receiving personnel. [4]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [http://moh.gov.so/en/]. Accessed 6 December 2020.

[3] Ministry of Defence of the Republic of Somalia. [http://mod.gov.so/]. Accessed 6 December 2020.

[4] Ali, Muna. Adeso. 5 March 2018. "Launch of the Somalia Disaster Management Policy." [http://adesoafrika.org/what-we-do/blogs/launch-of-the-somalia-disaster-management-policy/]. Accessed 6 December 2020.

## 4.4 HEALTHCARE ACCESS

### 4.4.1 Access to healthcare

#### 4.4.1a

**Does the constitution explicitly guarantee citizens' right to medical care?**

Guaranteed free = 4, Guaranteed right = 3, Aspirational or subject to progressive realization = 2, Guaranteed for some groups, not universally = 1, No specific provision = 0

**Current Year Score: 3**

2020

World Policy Analysis Center

#### 4.4.1b

**Access to skilled birth attendants (% of population)**

Input number

**Current Year Score: 9.4**

2006

WHO/World Bank/United Nations Children's Fund (UNICEF)

#### 4.4.1c

**Out-of-pocket health expenditures per capita, purchasing power parity (PPP; current international \$)**

Input number

**Current Year Score: -**

2017

WHO Global Health Expenditure database

### 4.4.2 Paid medical leave

#### 4.4.2a

**Are workers guaranteed paid sick leave?**

Paid sick leave = 2, Unpaid sick leave = 1, No sick leave = 0

**Current Year Score: 0**

2020

### 4.4.3 Healthcare worker access to healthcare

#### 4.4.3a

**Has the government issued legislation, a policy, or a public statement committing to provide prioritized healthcare services to healthcare workers who become sick as a result of responding to a public health emergency?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia issued legislation, a policy or a public statement committing to provide prioritized health care services to healthcare workers who become sick as a result of responding to a public health emergency. The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, does not comment on the issue. [1] There is no relevant information on the Ministry of Health website. [2] The National Development Plan (2012-2016), the only publicly available planning document, does not discuss the issue. [3]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Country Planning Cycle Database, World Health Organisation (WHO). December 2011. "Republic of Somaliland Ministry of National Planning Development National Development Plan (2012-2016)."

[[http://www.nationalplanningcycles.org/sites/default/files/country\\_docs/Somalia/ndp\\_somalia.pdf](http://www.nationalplanningcycles.org/sites/default/files/country_docs/Somalia/ndp_somalia.pdf)]. Accessed 6 December 2020.

## 4.5 COMMUNICATIONS WITH HEALTHCARE WORKERS DURING A PUBLIC HEALTH EMERGENCY

### 4.5.1 Communication with healthcare workers

#### 4.5.1a

**Is there a system in place for public health officials and healthcare workers to communicate during a public health emergency?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient publicly available information indicating if Somalia has a system in place for public health officials and healthcare workers to communicate during a public health emergency. There is no relevant information in the National Contingency Plan for Preparedness and Response to Coronavirus Disease 2019. [1] According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, the Ministries of Health (MoH) of Somaliland and Puntland have communication teams, but "none of the MoHs has an [emergency Risk communication] (ERC) strategy, and there are no SOPs on how to coordinate ERC during an emergency." [2] There is no relevant information on the Ministry of Health website. [3] There is no relevant information on

the Ministry of humanitarian affairs and disaster management website. [4]

[1] Ministry of Health, National Contingency Plan for Preparedness and Response to Coronavirus Disease 2019, March-June 2020

([https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/national\\_contingency\\_plan\\_for\\_preparedness\\_and\\_response\\_to\\_coronavirus\\_covid-19-\\_somalia.pdf](https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/national_contingency_plan_for_preparedness_and_response_to_coronavirus_covid-19-_somalia.pdf)) Accessed 19th April 2021

[2] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 19th April 2021

[3] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 19th April 2021.

[4] Ministry of humanitarian affairs and disaster management. [<https://mohadm.gov.so/>]. Accessed 19 April 2021.

#### 4.5.1b

**Does the system for public health officials and healthcare workers to communicate during an emergency encompass healthcare workers in both the public and private sector?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient publicly available information indicating if Somalia has a system in place for public health officials and healthcare workers (for either the public and private sector) to communicate during a public health emergency. There is no relevant information in the National Contingency Plan for Preparedness and Response to Coronavirus Disease 2019. [1] According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, the Ministries of Health (MoH) of Somaliland and Puntland have communication teams, but "none of the MoHs has an [emergency Risk communication] (ERC) strategy, and there are no SOPs on how to coordinate ERC during an emergency." [2] There is no relevant information on the Ministry of Health website. [3] There is no relevant information on the Ministry of humanitarian affairs and disaster management website. [4]

[1] Ministry of Health, National Contingency Plan for Preparedness and Response to Coronavirus Disease 2019, March-June 2020

([https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/national\\_contingency\\_plan\\_for\\_preparedness\\_and\\_response\\_to\\_coronavirus\\_covid-19-\\_somalia.pdf](https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/national_contingency_plan_for_preparedness_and_response_to_coronavirus_covid-19-_somalia.pdf)) Accessed 19th April 2021.

[2] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 19th April 2021.

[3] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 19th April 2021.

[4] Ministry of humanitarian affairs and disaster management. [<https://mohadm.gov.so/>]. Accessed 19 April 2021.

## 4.6 INFECTION CONTROL PRACTICES AND AVAILABILITY OF EQUIPMENT

### 4.6.1 Healthcare associated infection (HCAI) prevention and control programs

#### 4.6.1a

**Is there evidence that the national public health system is monitoring for and tracking the number of healthcare associated infections (HCAI) that take place in healthcare facilities?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is no public information indicating Somalia's national public health system monitors for and tracks the number of health care associated infections that take place in healthcare facilities. There is no relevant information in the National Contingency Plan for Preparedness and Response to Coronavirus Disease 2019. [1] There is no information about healthcare associated infections (HCAI) in the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016. [2] There is no relevant information on the Ministry of Health website. [3]. Somalia does not have a national AMR action plan listed on the World Health Organisation (WHO) Library of national action plans. [4] There is no information about Somalia in the WHO "Monitoring Global Progress on Addressing Antimicrobial Resistance," 2018 report. [5]

[1] Ministry of Health, National Contingency Plan for Preparedness and Response to Coronavirus Disease 2019, March-June 2020

([https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/national\\_contingency\\_plan\\_for\\_preparedness\\_and\\_response\\_to\\_coronavirus\\_covid-19\\_somalia.pdf](https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/national_contingency_plan_for_preparedness_and_response_to_coronavirus_covid-19_somalia.pdf)) Accessed 19th April 2021.

[2] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 19th April 2021.

[3] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 19th April 2021.

[4] World Health Organisation (WHO). "Library of national action plans." [<https://www.who.int/antimicrobial-resistance/national-action-plans/library/en/>]. Accessed 19th April 2021.

[5] World Health Organisation (WHO), Food and Agriculture Organisation of the United Nations (FAO), and the World Organisation for Animal Health (OIE). July 2018. "Monitoring Global Progress on Addressing Antimicrobial Resistance: Analysis report of the second round of results of AMR country self-assessment survey 2018."

[<https://apps.who.int/iris/bitstream/handle/10665/273128/9789241514422-eng.pdf?ua=1>]. Accessed 19th April 2021.

## 4.7 CAPACITY TO TEST AND APPROVE NEW MEDICAL COUNTERMEASURES

### 4.7.1 Regulatory process for conducting clinical trials of unregistered interventions

#### 4.7.1a

**Is there a national requirement for ethical review (e.g., from an ethics committee or via Institutional Review Board approval) before beginning a clinical trial?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient publicly available information indicating Somalia has a national requirement for ethical review (e.g. from an ethics committee or via Institutional Review Board approval) before beginning a clinical trial. The Ministry of Health website includes a Policy and Planning page and a Monitoring and Evaluations page, but neither of them discuss an ethical review process prior to the commencement of a clinical trial. [1] The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, does not discuss this issue. [2] There is not a website for the Ministry of Research for Somalia.

[1] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[2] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

#### 4.7.1b

**Is there an expedited process for approving clinical trials for unregistered medical countermeasures (MCM) to treat ongoing epidemics?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient information that Somalia has an expedited process for approving clinical trials for unregistered medical countermeasures to treat ongoing pandemics. There is no relevant information on clinical trials or medical countermeasures (MCMs) on the Ministry of Health website. [1] There is no information about clinical trials and no relevant information about MCMs in the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016. [2] There is not a website for the Ministry of Research for Somalia. There are no relevant studies or external documentation.

[1] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[2] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020

### 4.7.2 Regulatory process for approving medical countermeasures

#### 4.7.2a

**Is there a government agency responsible for approving new medical countermeasures (MCM) for humans?**

Yes = 1 , No = 0

**Current Year Score: 0**

There is insufficient evidence that there is an Somali government agency responsible for approving new medical countermeasures (MCMs) for humans. According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, Somalia has a "huge deficit in necessary MCM and personnel to counter an emergency, requiring reliance on international assistance," and that MCMs has been provided on an ad hoc basis by a number of Middle Eastern countries, WHO/UNICEF, international NGOs, and the Somali diaspora. The JEE discusses the Ministries of Health of Puntland and Somaliland are able to manage supplies, but there is no mention of approving new MCMs. [1] There is no relevant information on the Ministry of Health website. [2] There is not a website for the Ministry of Research for Somalia. There are no relevant studies or external documentation.

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

#### 4.7.2b

Is there an expedited process for approving medical countermeasures (MCM) for human use during public health emergencies?

Yes = 1, No = 0

Current Year Score: 0

There is no publicly available information indicating Somalia has an expedited process for approving medical countermeasures for human use during public health emergencies. It is also unclear what Somali government entity is responsible for approving new medical countermeasures (MCMs) for humans. According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities (JEE) of the Republic of Somalia, conducted 17 to 21 October 2016, Somalia has a "huge deficit in necessary MCM and personnel to counter an emergency, requiring reliance on international assistance," and that MCMs has been provided on an ad hoc basis by a number of Middle Eastern countries, WHO/UNICEF, international NGOs, and the Somali diaspora. The JEE discusses the Ministry of Health's in Puntland and Somaliland are able to manage supplies, but there is no mention of approving new MCMs and if there is an expedited process. [1] There is no relevant information on the Ministry of Health website. [2] There is not a website for the Ministry of Research for Somalia. There are no relevant studies or external documentation.

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>].

Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

## Category 5: Commitments to improving national capacity, financing plans to address gaps, and adhering to global norms

### 5.1 INTERNATIONAL HEALTH REGULATIONS (IHR) REPORTING COMPLIANCE AND DISASTER RISK REDUCTION

#### 5.1.1 Official IHR reporting

##### 5.1.1a

Has the country submitted IHR reports to the WHO for the previous calendar year?

Yes = 1, No = 0

Current Year Score: 0

2020

World Health Organization

## 5.1.2 Integration of health into disaster risk reduction

### 5.1.2a

**Are epidemics and pandemics integrated into the national risk reduction strategy or is there a standalone national disaster risk reduction strategy for epidemics and pandemics?**

Yes = 1, No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia integrates pandemics into the national risk reduction strategy or if it has a standalone national disaster risk reduction strategy for pandemics. According to the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016, there is a "Disaster Management Agency, mainly responsible for the overarching response to natural emergencies like floods and droughts. However, it has no mandate to coordinate the response to public health events, such as disease outbreaks, which are initiated by the emergency coordinator at the Ministry of Health." [1] However, there is no website for this disaster management agency and therefore it is not possible to see if pandemics are included in its mandate. According to a 5 March 2018 Adeso (a humanitarian/development organisation specializing in aid delivery to Africa) article, Somalia launched its Disaster Management Policy and agency on 16 January 2018. [2] There is no information on the Ministry of Health website regarding pandemics or a national risk reduction strategy. [3]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[2] Ali, Muna. Adeso. 5 March 2018. "Launch of the Somalia Disaster Management Policy." [<http://adesoafrika.org/what-we-do/blogs/launch-of-the-somalia-disaster-management-policy/>]. Accessed 6 December 2020.

[3] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020

## 5.2 CROSS-BORDER AGREEMENTS ON PUBLIC HEALTH AND ANIMAL HEALTH EMERGENCY RESPONSE

### 5.2.1 Cross-border agreements

#### 5.2.1a

**Does the country have cross-border agreements, protocols, or MOUs with neighboring countries, or as part of a regional group, with regards to public health emergencies?**

Yes = 2, Yes, but there is evidence of gaps in implementation = 1, No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has cross-border agreements with regards to public health emergencies. The World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016 states that Somali needs to, "review and update agreements with neighbouring countries on cross-border surveillance and response to public health events." [1] There is evidence of one agreement described in the Kenya and Somalia Joint Cross Border Health Coordination Meeting report (organized by the World Health Organisation (WHO), UNICEF, Core Group Polio Project, Global Polio Eradication Initiative). The focus of the 4 to 6 April 2018 report is public health cooperation between the two countries and to discuss addressing a public health emergency, a poliovirus outbreak. This agreement does not extend to other specific diseases of public health emergencies generally. [2] There is no relevant information on the Ministry of Health website. [3] There is no evidence of such agreements or memorandum of

understanding on the Somalia profile of the United Nations Food and Agriculture Organisation (FAO) website. [4]

[1] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1].

Accessed 6 December 2020.

[2] CORE GROUP Polio Project. 4-6 April 2018. "Kenya and Somalia Joint Cross Border Health Coordination Meeting Report."

[https://coregroup.org/wp-content/uploads/2018/06/Wajir-Joint-Cross-Border-HC-Meeting-Report.pdf]. Accessed 6

December 2020.

[3] Ministry of Health of the Republic of Somalia. [http://moh.gov.so/en/]. Accessed 6 December 2020.

[4] United Nations Food and Agriculture Organisation (FAO). "Somalia."

[http://www.fao.org/countryprofiles/index/en/?iso3=SOM]. Accessed 6 December 2020.

### 5.2.1b

**Does the country have cross-border agreements, protocols, or MOUs with neighboring countries, or as part of a regional group, with regards to animal health emergencies?**

Yes = 2, Yes, but there is evidence of gaps in implementation = 1, No = 0

**Current Year Score: 0**

There is insufficient evidence that Somalia has cross-border agreements, protocols or MOUs with neighbouring countries, or as part of a regional group, with regards to animal health emergencies. Somalia is part of the United Nations Food and Agriculture Organisation's (FAO) Emerging Pandemic Threats Programme through the Middle East Respiratory Syndrome (MERS), which is a zoonotic disease with pandemic potential, and was created in response to the outbreak in humans 2012, with over 2,402 confirmed cases. However, this does not discuss animal health emergencies specifically. [1] There is no relevant information on the World Health Organisation (WHO) Joint External Evaluation of IHR Core Capacities of the Republic of Somalia (JEE), conducted 17 to 21 October 2016. [2] There is no relevant information on the World Organisation for Animal Health (OIE) website. [3] There is no relevant information on the Ministry of Health website. [4]

[1] United Nations Food and Agriculture Organisation (FAO). 20 March 2019. "Middle East Respiratory Syndrome (MERS-CoV) situation update." [http://www.fao.org/ag/againfo/programmes/en/empres/mers/situation\_update.html]. Accessed 6 December 2020.

[2] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1].

Accessed 6 December 2020.

[3] World Organisation for Animal Health (OIE). [http://www.oie.int/en/]. Accessed 6 December 2020.

[4] Ministry of Health of the Republic of Somalia. [http://moh.gov.so/en/]. Accessed 6 December 2020.

## 5.3 INTERNATIONAL COMMITMENTS

### 5.3.1 Participation in international agreements

#### 5.3.1a

**Does the county have signatory and ratification (or same legal effect) status to the Biological Weapons Convention?**

Signed and ratified (or action having the same legal effect) = 2, Signed = 1, Non-compliant or not a member = 0

**Current Year Score: 1**

2021

Biological Weapons Convention

### 5.3.1b

Has the country submitted confidence building measures for the Biological Weapons Convention in the past three years?

Yes = 1 , No = 0

Current Year Score: 0

2021

Biological Weapons Convention

### 5.3.1c

Has the state provided the required United Nations Security Council Resolution (UNSCR) 1540 report to the Security Council Committee established pursuant to resolution 1540 (1540 Committee)?

Yes = 1 , No = 0

Current Year Score: 0

2021

Biological Weapons Convention

### 5.3.1d

Extent of United Nations Security Council Resolution (UNSCR) 1540 implementation related to legal frameworks and enforcement for countering biological weapons:

Very good (60+ points) = 4, Good (45–59 points) = 3, Moderate (30–44 points) = 2, Weak (15–29 points) = 1, Very weak (0–14 points) or no matrix exists/country is not party to the BWC = 0

Current Year Score: 0

2021

Biological Weapons Convention

## 5.3.2 Voluntary memberships

### 5.3.2a

Does the country meet at least 2 of the following criteria?

- Membership in Global Health Security Agenda (GHSA)
- Membership in the Alliance for Country Assessments for Global Health Security and IHR Implementation (JEE Alliance)
- Membership in the Global Partnership Against the Spread of Weapons and Materials of Mass Destruction (GP)
- Membership in the Australia Group (AG)
- Membership in the Proliferation Security Initiative (PSI)

Needs to meet at least two of the criteria to be scored a 1 on this measure. , Yes for five = 1 , Yes for four = 1 , Yes for three = 1 , Yes for two = 1 , Yes for one = 0 , No for all = 0

Current Year Score: 0

2021

Global Health Security Agenda; JE Alliance; Global Partnership; Australia Group; PSI

## 5.4 JOINT EXTERNAL EVALUATION (JEE) AND PERFORMANCE OF VETERINARY SERVICES PATHWAY (PVS)

### 5.4.1 Completion and publication of a Joint External Evaluation (JEE) assessment and gap analysis

#### 5.4.1a

Has the country completed a Joint External Evaluation (JEE) or precursor external evaluation (e.g., GHSA pilot external assessment) and published a full public report in the last five years?

Yes = 1 , No = 0

Current Year Score: 1

2021

WHO Strategic Partnership for IHR and Health Security (SPH); Global Health Security Agenda

#### 5.4.1b

Has the country completed and published, within the last five years, either a National Action Plan for Health Security (NAPHS) to address gaps identified through the Joint External Evaluation (JEE) assessment or a national GHSA roadmap that sets milestones for achieving each of the GHSA targets?

Yes = 1 , No = 0

Current Year Score: 0

2021

WHO Strategic Partnership for IHR and Health Security (SPH); Global Health Security Agenda

### 5.4.2 Completion and publication of a Performance of Veterinary Services (PVS) assessment and gap analysis

#### 5.4.2a

Has the country completed and published a Performance of Veterinary Services (PVS) assessment in the last five years?

Yes = 1 , No = 0

Current Year Score: 0

2021

OIE PVS assessments

### 5.4.2b

Has the country completed and published a Performance of Veterinary Services (PVS) gap analysis in the last five years?

Yes = 1 , No = 0

Current Year Score: 0

2021

OIE PVS assessments

## 5.5 FINANCING

### 5.5.1 National financing for epidemic preparedness

#### 5.5.1a

Is there evidence that the country has allocated national funds to improve capacity to address epidemic threats within the past three years?

Yes = 1 , No = 0

Current Year Score: 0

There is insufficient evidence that Somalia has allocated national funds to improve capacity to address epidemic threats within the past three years. The Ministry of Finance Budget Strategy Paper for financial year 2021 mentions the impact of the COVID-19 pandemic on the country's economy but does not make any specific allocations to improve capacity to address epidemic threats. [1] The 2020 budget and the 2019 budget similarly do not make any specific allocations to address epidemic threats. [2,3] The 'Health Financing' section of the Ministry of Health website is blank, and there is no relevant information on the Ministry of Agriculture website. [4,5]

[1] Federal Government of Somalia, Ministry of Finance. "Budget Strategy Paper (BSP)-FY2021."

[<https://mof.gov.so/sites/default/files/2020-09/BUDGET%20STRATEGY%20PAPER%20ENGLISH%20VERSION.pdf>]. Accessed 6 December 2020.

[2] Federal Republic of Somalia. "Appropriation Act for 2020 Budget." [[https://mof.gov.so/sites/default/files/2020-01/Budget%20Appropriation%20Act%20for%202020%20Approved\\_0.pdf](https://mof.gov.so/sites/default/files/2020-01/Budget%20Appropriation%20Act%20for%202020%20Approved_0.pdf)]. Accessed 6 December 2020.

[3] Federal Republic of Somalia. "Appropriation Act for 2019 Revised Budget." [<https://mof.gov.so/sites/default/files/2020-03/Budget%20Appropriation%20Act%20for%202019%20Revised%20budget%20Approved.pdf>] Accessed 6 December 2020.

[4] Ministry of Health. "Health Finances." [<https://moh.gov.so/en/publications/health-financing-2/>] Accessed 6 December 2020.

[5] Ministry of Agriculture. [<http://www.moa.gov.so/>] Accessed 6 December 2020.

## 5.5.2 Financing under Joint External Evaluation (JEE) and Performance of Veterinary Services (PVS) reports and gap analyses

### 5.5.2a

Does the Joint External Evaluation (JEE) report, National Action Plan for Health Security (NAPHS), and/or national GHSA roadmap allocate or describe specific funding from the national budget (covering a time-period either in the future or within the past five years) to address the identified gaps?

Yes = 1 , No/country has not conducted a JEE = 0

Current Year Score: 0

2021

WHO Strategic Partnership for IHR and Health Security (SPH); Global Health Security Agenda

### 5.5.2b

Does the Performance of Veterinary Services (PVS) gap analysis and/or PVS assessment allocate or describe specific funding from the national budget (covering a time-period either in the future or within the past five years) to address the identified gaps?

Yes = 1 , No/country has not conducted a PVS = 0

Current Year Score: 0

2021

OIE PVS assessments

## 5.5.3 Financing for emergency response

### 5.5.3a

Is there a publicly identified special emergency public financing mechanism and funds which the country can access in the face of a public health emergency (such as through a dedicated national reserve fund, an established agreement with the World Bank pandemic financing facility/other multilateral emergency funding mechanism, or other pathway identified through a public health or state of emergency act)?

Yes = 1 , No = 0

Current Year Score: 1

There is evidence that Somalia has a publicly identified special emergency public financing mechanism and funds, which the country can access in the face of a public health emergency. Somalia became eligible to receive International Development Association (IDA) funding from the World Bank for the first time in 30 years in early 2020. [1,2] Due to Somalia's IDA eligibility, it is also Pandemic Emergency Financing Facility (PEF) eligible. [3] The Ministry of Health website and related documents such as the Health Sector Strategic Plan January 2013 -- December 2016 do not discuss special emergency public financing mechanisms or funds. [4,5] There are no media reports on this issue.

[1] World Bank Group. "IDA Borrowing Countries." [<http://ida.worldbank.org/about/borrowing-countries>]. Accessed 6 December 2020.

[2] Bloomberg. "Somalia Clears World Bank Debt, Enabling First Loans in 30 Years."

[<https://www.bloomberg.com/news/articles/2020-03-06/somalia-clears-world-bank-debt-enabling-first-loans-in-30-years>]. Accessed 26 December 2020.

[3] World Bank Group. December 2017. "Pandemic Emergency Financing Facility (PEF) Operational Brief for Eligible Countries." [<http://pubdocs.worldbank.org/en/119961516647620597/PEF-Operational-Brief-Dec-2017.pdf>]. Accessed 6 December 2020.

[4] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[5] Ministry of Health and Ministry of Human Development and Public Services Directorate of Health. "Health Sector Strategic Plan January 2013-- December 2016." [<http://moh.gov.so/en/images/publication/HSSP.pdf>]. Accessed 6 December 2020.

## 5.5.4 Accountability for commitments made at the international stage for addressing epidemic threats

### 5.5.4a

Is there evidence that senior leaders (president or ministers), in the past three years, have made a public commitment either to:

- Support other countries to improve capacity to address epidemic threats by providing financing or support?
- Improve the country's domestic capacity to address epidemic threats by expanding financing or requesting support to improve capacity?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

**Current Year Score: 0**

There is insufficient evidence that senior leaders of the Republic of Somalia have made a public statement in support other countries to improve capacity to address epidemic threats by providing financing or providing support or a statement regarding the improvement of its own domestic capacity to address epidemic threats by expanding financing or requesting support to improve capacity in the past three years. There is evidence in a World Health Organisation (WHO) article entitled, "Pandemic and epidemic diseases: 2018 in retrospect." This article says that the Infectious Hazard Management programme of the Department of Health Emergencies in the Eastern Mediterranean Region to "strengthen surveillance systems for detection of high-threat pathogens in Djibouti, Libya, occupied Palestinian territory, Somalia, Sudan, Syria and Yemen." However, this does not note that Somalia is explicitly helping other countries or asking for assistance. It is also unclear if this is part of a permanent operation. [1] As addressed in the WHO Joint External Evaluation of IHR Core Capacities of the Republic of Somalia conducted between 17-21 October 2016, Somalia does not have an Emergency Operations Centre or permanent entity that might improve domestic capacity long-term. [2] The Ministry of Foreign Affairs of the Republic of Somalia website is not currently functioning. There is no relevant information on the Ministry of Agriculture and Immigration website. [3] There is no relevant information on the Ministry of Health website. [4] There are no media reports on this topic.

[1] World Health Organisation (WHO). "Pandemic and epidemic diseases: 2018 in retrospect."

[<http://www.emro.who.int/pandemic-epidemic-diseases/information-resources/ped-2018-in-retrospect.html>]. Accessed 6 December 2020.

[2] World Health Organisation (WHO). 17-21 October 2016. "Joint External Evaluation of IHR Core Capacities of the Republic of Somalia." [<https://apps.who.int/iris/bitstream/handle/10665/254789/WHO-WHE-CPI-2017.17-eng.pdf?sequence=1>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Immigration of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

[4] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

### 5.5.4b

Is there evidence that the country has, in the past three years, either:

- Provided other countries with financing or technical support to improve capacity to address epidemic threats?
- Requested financing or technical support from donors to improve the country's domestic capacity to address epidemic threats?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

**Current Year Score: 1**

There is evidence that Somalia has requested financing to improve capacity to address epidemic threats in the past three years. But there is no evidence that it has provided other countries with financing or technical support to improve capacity to address epidemic threats.

There is evidence via the Global Health Security Funding Tracker that Somalia has invested donor financed to improve domestic capacity to address epidemic threats. The tracker notes that Somalia has received funding from multiple donors to enhance their capacity on global security preparedness, including just over US\$103.17m disbursed from the World Health Organisation to provide technical assistance to enhance surveillance and raise population immunity to the threshold needed to stop polio transmission in affected and at-risk areas. [1]

Additionally, there is evidence in a World Health Organisation (WHO) article entitled, "Pandemic and epidemic diseases: 2018 in retrospect." This article says that the Infectious Hazard Management programme of the Department of Health Emergencies in the Eastern Mediterranean Region to "strengthen surveillance systems for detection of high-threat pathogens in Djibouti, Libya, occupied Palestinian territory, Somalia, Sudan, Syria and Yemen." However, this does not note that Somalia is explicitly helping other countries or asking for assistance. It is also unclear if this is part of a permanent operation. [2]

There is no evidence that it has provided other countries with financing or technical support to improve capacity to address epidemic threats. The Ministry of Foreign Affairs of the Republic of Somalia website is not currently functioning. There is no relevant information on the Ministry of Agriculture and Immigration website. [3] There is no relevant information on the Ministry of Health website. [4]

[1] Global Health Security Funding Tracker. [<https://tracking.ghscosting.org/#/data>]. Accessed 19 April 2021.

[2] World Health Organisation (WHO). "Pandemic and epidemic diseases: 2018 in retrospect." [<http://www.emro.who.int/pandemic-epidemic-diseases/information-resources/ped-2018-in-retrospect.html>]. Accessed 19 April 2021.

[3] Ministry of Agriculture and Immigration of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 19 April 2021.

[4] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 19 April 2021.

### 5.5.4c

Is there evidence that the country has fulfilled its full contribution to the WHO within the past two years?

Yes = 1, No = 0

**Current Year Score: 0**

2021

Economist Impact analyst qualitative assessment based on official national sources, which vary by country

## 5.6 COMMITMENT TO SHARING OF GENETIC AND BIOLOGICAL DATA AND SPECIMENS

### 5.6.1 Commitment to sharing genetic data, clinical specimens, and/or isolated specimens (biological materials) in both emergency and nonemergency research

#### 5.6.1a

Is there a publicly available plan or policy for sharing genetic data, clinical specimens, and/or isolated specimens (biological materials) along with the associated epidemiological data with international organizations and/or other countries that goes beyond influenza?

Yes = 1 , No = 0

Current Year Score: 0

There is insufficient evidence that Somalia has a publicly available plan or policy for sharing genetic data, epidemiological data, clinical specimens, and/or isolated specimens (biological materials) with international organizations and/or other countries that goes beyond influenza. Somalia is part of the World Health Organisation (WHO)'s Early Warning, Alert, and Response Network (EWARN), an ongoing surveillance system involving weekly reporting of public health issues. According to a 29 March 2018 WHO article the, "EWARN relies on a network of health facilities, and public health professionals who are responsible for the collection, reporting, investigation, analysis and dissemination of information to stakeholders to implement effective public health response measures." However, it is unclear if this includes genetic data, epidemiological data, clinical specimens, and/or isolated specimens (biological materials). [1] Therefore Somalia has a policy of regularly reporting data to the WHO. The Ministry of Health and Ministry of Agriculture and Irrigation websites do not discuss this issue. [2,3] There is not a website for the Ministry of Research for Somalia.

[1] World Health Organisation (WHO). 29 March 2018. "Health workers trained on electronic disease early warning surveillance systems." [<http://www.emro.who.int/pandemic-epidemic-diseases/news/health-workers-trained-on-electronic-disease-early-warning-surveillance-systems.html>]. Accessed 6 December 2020.

[2] Ministry of Health of the Republic of Somalia. [<http://moh.gov.so/en/>]. Accessed 6 December 2020.

[3] Ministry of Agriculture and Irrigation of the Republic of Somalia. [<http://moa.gov.so/>]. Accessed 6 December 2020.

#### 5.6.1b

Is there public evidence that the country has not shared samples in accordance with the Pandemic Influenza Preparedness (PIP) framework in the past two years?

Yes = 0 , No = 1

Current Year Score: 1

There is no evidence that Somalia did not share samples during an influenza outbreak in accordance with the Pandemic Influenza Preparedness framework (PIP) in the past two years. There is no indication on the World Health Organisation Somalia country website that Somalia did not share influenza samples in accordance with PIP. [1] There is no evidence of this on any media sites including the New York Times or Reuters.

[1] World Health Organisation (WHO). "Somalia Country Profile." [<http://www.emro.who.int/countries/som/index.html>]. Accessed 6 December 2020.

### 5.6.1c

Is there public evidence that the country has not shared pandemic pathogen samples during an outbreak in the past two years?

Yes = 0 , No = 1

**Current Year Score: 1**

There is no evidence that Somalia did not share pandemic pathogen samples during an outbreak in the past two years. There is no indication on the World Health Organisation Somalia country website that Somalia has not shared pandemic pathogen samples, including for COVID-19. [1] There is no evidence of this on any media sites including the New York Times or Reuters.

[1] World Health Organisation (WHO). "Somalia Country Profile." [<http://www.emro.who.int/countries/som/index.html>]. Accessed 6 December 2020.

## Category 6: Overall risk environment and vulnerability to biological threats

### 6.1 POLITICAL AND SECURITY RISK

#### 6.1.1 Government effectiveness

##### 6.1.1a

Policy formation (Economist Intelligence score; 0-4, where 4=best)

Input number

**Current Year Score: 1**

2020

Economist Intelligence

##### 6.1.1b

Quality of bureaucracy (Economist Intelligence score; 0-4, where 4=best)

Input number

**Current Year Score: 0**

2020

Economist Intelligence

**6.1.1c**

Excessive bureaucracy/red tape (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 0

2020

Economist Intelligence

**6.1.1d**

Vested interests/cronyism (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 0

2020

Economist Intelligence

**6.1.1e**

Country score on Corruption Perception Index (0-100, where 100=best)

Input number

Current Year Score: 12

2020

Transparency International

**6.1.1f**

Accountability of public officials (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 0

2020

Economist Intelligence

**6.1.1g**

Human rights risk (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 0

2020

Economist Intelligence

## 6.1.2 Orderly transfers of power

### 6.1.2a

**How clear, established, and accepted are constitutional mechanisms for the orderly transfer of power from one government to another?**

Very clear, established and accepted = 4, Clear, established and accepted = 3, One of the three criteria (clear, established, accepted) is missing = 2, Two of the three criteria (clear, established, accepted) are missing = 1, Not clear, not established, not accepted = 0

**Current Year Score: 0**

2021

Economist Intelligence

## 6.1.3 Risk of social unrest

### 6.1.3a

**What is the risk of disruptive social unrest?**

Very low: Social unrest is very unlikely = 4, Low: There is some prospect of social unrest, but disruption would be very limited = 3, Moderate: There is a considerable chance of social unrest, but disruption would be limited = 2, High: Major social unrest is likely, and would cause considerable disruption = 1, Very high: Large-scale social unrest on such a level as to seriously challenge government control of the country is very likely = 0

**Current Year Score: 0**

2021

Economist Intelligence

## 6.1.4 Illicit activities by non-state actors

### 6.1.4a

**How likely is it that domestic or foreign terrorists will attack with a frequency or severity that causes substantial disruption?**

No threat = 4, Low threat = 3, Moderate threat = 2, High threat = 1, Very high threat = 0

**Current Year Score: 0**

2021

Economist Intelligence

### 6.1.4b

What is the level of illicit arms flows within the country?

4 = Very high, 3 = High, 2 = Moderate, 1 = Low, 0 = Very low

Current Year Score: 3

2020

UN Office of Drugs and Crime (UNODC)

### 6.1.4c

How high is the risk of organized criminal activity to the government or businesses in the country?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 0

2021

Economist Intelligence

## 6.1.5 Armed conflict

### 6.1.5a

Is this country presently subject to an armed conflict, or is there at least a moderate risk of such conflict in the future?

No armed conflict exists = 4, Yes; sporadic conflict = 3, Yes; incursional conflict = 2, Yes, low-level insurgency = 1, Yes; territorial conflict = 0

Current Year Score: 0

2021

Economist Intelligence

## 6.1.6 Government territorial control

### 6.1.6a

Does the government's authority extend over the full territory of the country?

Yes = 1, No = 0

Current Year Score: 0

2021

Economist Intelligence

## 6.1.7 International tensions

### 6.1.7a

Is there a threat that international disputes/tensions could have a negative effect?

No threat = 4, Low threat = 3, Moderate threat = 2, High threat = 1, Very high threat = 0

Current Year Score: 0

2021

Economist Intelligence

## 6.2 SOCIO-ECONOMIC RESILIENCE

### 6.2.1 Literacy

#### 6.2.1a

Adult literacy rate, population 15+ years, both sexes (%)

Input number

Current Year Score: 54.8

2008-2018

United Nations Development Programme (UNDP); United Nations Educational, Scientific and Cultural Organization (UNESCO);  
The Economist Intelligence Unit

### 6.2.2 Gender equality

#### 6.2.2a

United Nations Development Programme (UNDP) Gender Inequality Index score

Input number

Current Year Score: 0.43

2018

United Nations Development Programme (UNDP); The Economist Intelligence Unit

### 6.2.3 Social inclusion

#### 6.2.3a

Poverty headcount ratio at \$1.90 a day (2011 PPP) (% of population)

Input number

Current Year Score: 19.16

2008-2018

World Bank; Economist Impact

### 6.2.3b

#### Share of employment in the informal sector

Greater than 50% = 2, Between 25-50% = 1, Less than 25% = 0

**Current Year Score: 2**

It is highly likely that employment in the informal sector in Somalia is greater than 50 percent, however there is no data provided by The World Bank or the International Labour Organization's ILOSTAT explorer database. [1,2] According to Moody's analytics Somalia maintains an "informal economy largely based on livestock, remittance/money transfer companies and telecommunications." Moody's states that "Nomads and semi-pastoralists, who are dependent upon livestock for their livelihood, make up a large portion of the population." It estimates the labor force by occupation is 71 percent agriculture. [3]

[1] The World Bank. "Informal Employment (percentage of total non-agricultural employment) - Somalia."

[<https://data.worldbank.org/indicator/SL.ISV.IFRM.ZS?locations=SO>]. Accessed 6 December 2020.

[2] International Labour Organization. "ILOSTAT Explorer."

[[https://www.ilo.org/shinyapps/bulkexplorer37/?lang=en&segment=indicator&id=IFL\\_XIEM\\_SEX\\_ECO\\_IFL\\_NB\\_A](https://www.ilo.org/shinyapps/bulkexplorer37/?lang=en&segment=indicator&id=IFL_XIEM_SEX_ECO_IFL_NB_A)] Accessed 6 December 2020.

[3] Moody's Analytics. "Somalia - Economic Indicators." [<https://www.economy.com/somalia/indicators#ECONOMY>] Accessed 6 December 2020.

### 6.2.3c

#### Coverage of social insurance programs (% of population)

Scored in quartiles (0-3, where 3=best)

**Current Year Score: 0**

2016, or latest available

World Bank; Economist Impact calculations

## 6.2.4 Public confidence in government

### 6.2.4a

#### Level of confidence in public institutions

Input number

**Current Year Score: 1**

2021

Economist Intelligence Democracy Index

## 6.2.5 Local media and reporting

### 6.2.5a

Is media coverage robust? Is there open and free discussion of public issues, with a reasonable diversity of opinions?

Input number

Current Year Score: 0

2021

Economist Intelligence Democracy Index

## 6.2.6 Inequality

### 6.2.6a

Gini coefficient

Scored 0-1, where 0=best

Current Year Score: 0.37

Latest available.

World Bank; Economist Impact calculations

## 6.3 INFRASTRUCTURE ADEQUACY

### 6.3.1 Adequacy of road network

#### 6.3.1a

What is the risk that the road network will prove inadequate to meet needs?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 0

2021

Economist Intelligence

### 6.3.2 Adequacy of airports

#### 6.3.2a

What is the risk that air transport will prove inadequate to meet needs?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 0

2021

Economist Intelligence

### 6.3.3 Adequacy of power network

#### 6.3.3a

What is the risk that power shortages could be disruptive?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 0

2021

Economist Intelligence

## 6.4 ENVIRONMENTAL RISKS

### 6.4.1 Urbanization

#### 6.4.1a

Urban population (% of total population)

Input number

Current Year Score: 45.55

2019

World Bank

### 6.4.2 Land use

#### 6.4.2a

Percentage point change in forest area between 2006–2016

Input number

Current Year Score: -1.22

2008-2018

World Bank; Economist Impact

### 6.4.3 Natural disaster risk

#### 6.4.3a

What is the risk that the economy will suffer a major disruption owing to a natural disaster?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 0

2021

Economist Intelligence

## 6.5 PUBLIC HEALTH VULNERABILITIES

### 6.5.1 Access to quality healthcare

#### 6.5.1a

Total life expectancy (years)

Input number

Current Year Score: 57.07

2018

United Nations; World Bank, UNICEF; Institute for Health Metrics and Evaluation (IHME); Central Intelligence Agency (CIA)  
World Factbook

#### 6.5.1b

Age-standardized NCD mortality rate (per 100 000 population)

Input number

Current Year Score: 769.2

2019

WHO

#### 6.5.1c

Population ages 65 and above (% of total population)

Input number

Current Year Score: 2.89

2019

World Bank

#### 6.5.1d

Prevalence of current tobacco use (% of adults)

Input number

Current Year Score: 14.04

2018

World Bank

### **6.5.1e**

**Prevalence of obesity among adults**

Input number

**Current Year Score: 8.3**

2016

WHO

## **6.5.2 Access to potable water and sanitation**

### **6.5.2a**

**Percentage of homes with access to at least basic water infrastructure**

Input number

**Current Year Score: 52.44**

2017

UNICEF; Economist Impact

### **6.5.2b**

**Percentage of homes with access to at least basic sanitation facilities**

Input number

**Current Year Score: 38.34**

2017

UNICEF; Economist Impact

## **6.5.3 Public healthcare spending levels per capita**

### **6.5.3a**

**Domestic general government health expenditure per capita, PPP (current international \$)**

Input number

**Current Year Score: -**

2018

WHO Global Health Expenditure database

## 6.5.4 Trust in medical and health advice

### 6.5.4a

#### Trust medical and health advice from the government

Share of population that trust medical and health advice from the government , More than 80% = 2, Between 60-80%, or no data available = 1, Less than 60% = 0

**Current Year Score: 1**

2018

Wellcome Trust Global Monitor 2018

### 6.5.4b

#### Trust medical and health advice from medical workers

Share of population that trust medical and health advice from health professionals , More than 80% = 2, Between 60-80%, or no data available = 1, Less than 60% = 0

**Current Year Score: 1**

2018

Wellcome Trust Global Monitor 2018