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“Strengthening mental health system in low and middle income countries”

Somaliland Country presentation

International meeting

21st -24th April 2009

Rimini, Italy

Sponsored by Cittadinanza & WHO

***By: Abdirisak M Warsame: GAVO Community MH
Program coordinator***

Republic of Somaliland

The Republic of Somaliland was formed in 1991, following over three years of bitter civil war which resulted in the overthrow of the government of Siad Barre based in Mogadishu.

subsequent inter-clan conflict in Somaliland resulted

- Deaths and displacement of an estimated 450.000 people both internally and to neighboring countries,
- A near total destruction of urban infrastructure including health and educational facilities of which an estimated 90% were destroyed.
- All information and records lost

Political

- Somaliland is self declared democratic republic
- The country has remained internationally unrecognised.
- A stable administration has been formed characterized by a bi-cameral structure incorporating different clan interests, and moving towards multi-party democracy in line with the Somaliland Constitution

- A functional parliament and government ministries, an army, a police force and judiciary.
- International organisations as the United Nations (UN) and European Union work with the administration as responsible authorities.
- A broad range of civil society organizations have emerged, contributing to a dynamic environment for change

Populations and Climate

- Population

Population is estimated at three million. The population consists of nomadic people (55%) and urban dwellers (45%). The population density is estimated at 22 persons per km

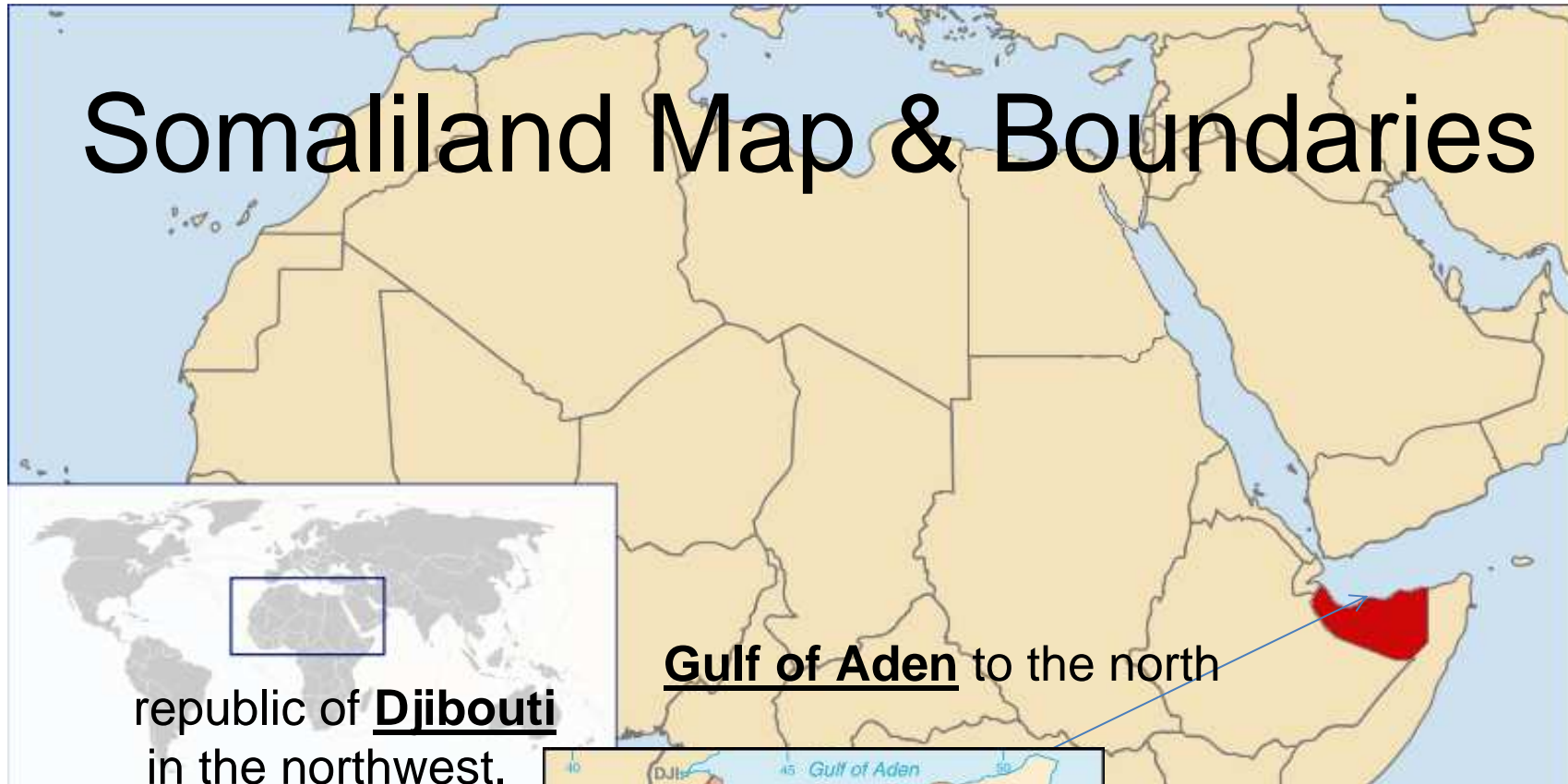
- Climate

Somaliland is semi arid, the average daily temperature range from 25c to 35c. The average annual rainfall is 14.5 inches in most part of the country

Economy

- No data is available on GDP of the country.
- Most people live with less than one dollar a day.
- livestock export destined to Saudi Arabia and other Arabian countries.
- A ban was imposed in 2000 due to outbreak of unfounded rift valley fever.
- The ban has had severe economic effects in the country leading to sudden depreciation of local currency, unemployment and steady process of population growth in the cities.

Somaliland Map & Boundaries



republic of **Djibouti**
in the northwest.

Gulf of Aden to the north

federal state of **Ethiopia**
to the south and west,

Somalia to the east

The total area of Somaliland is 137,600 km² with a coastline of 850kms



Health System

Somaliland health context is believed to be one of the worst in the world. Due to the circumstances surrounding including but not limited to; weak government, lack of resources, lack of health policies , insufficient facilities, inadequate staff,

Mental Health

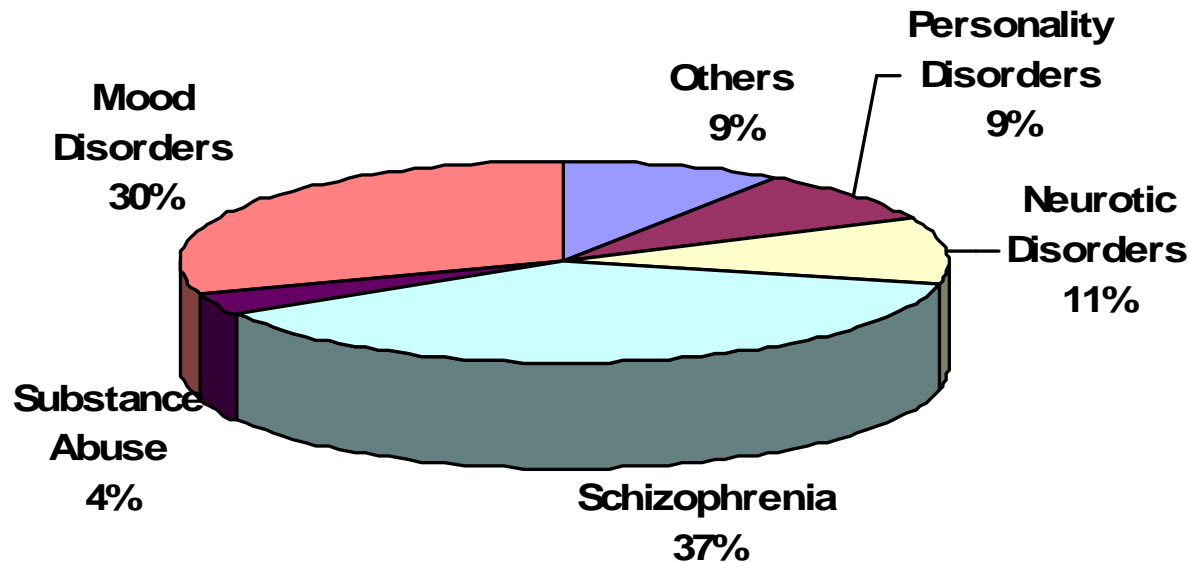
- There Only two mental hospitals
- Six outpatient facilities (inc. two community M health centers)
- Two community Inpatient facilities
- 2003 VIVO report showed that 21% of the surveyed household has one person with some kind of PTSD
- 2004 GAVO baseline assessment survey one person in every two household.

Factors/Causes

- Displacements,
- unemployment,
- post-era-civil-wars,
- substances, poverty
- and others...

Most common mental Disorders

GRAPH 2.5 - PATIENTS TREATED IN MENTAL
HOSPITALS BY DIAGNOSIS



GAVO



(General Assistance & Volunteers Organization)

- Non-profit making humanitarian, local organization
- Founded in 1993, first intervention BMH
- Has profound and long working experience in the field of mental health
- Has recently developed a community based service by shifting its strategy
- Works in three hospitals in three regions
- Two community mental health centre
- Outreach program

Mental Health Weaknesses in Somaliland....

- Absence of policy and legislation
- Low government involvement and support
- Improper organization of services and insufficiency
- Inadequacy of Psychotropic medication
- No-full/formal integration of primary health care with Mental health care services
- Very low/lack or inadequate number of professionals (psychiatrist, psychologist, social workers, occupation-therapist, psych-nurses) according to the demand
- Low public education
- Violation of the basic human rights of the M-ill people at various levels (community, judiciary, etc)
- Absence of accurate monitoring to the services

MH Strengths in Somaliland....

- Establishment of National Mental health Unit
- Dedicated local organization since 1993
- Community driven initiatives like establishment of private centers
- Locally mobilized resources both In-kind/cash

Somaliland Project Proposal

**“Improving the mental health situation
in Somaliland.”**

Choice of intervention

1. Increasing the general public awareness and education to the community on respecting mental ill peoples' rights through awareness campaigns
2. Strengthening community based mental health services
3. Advocating for national mental health policy through consultations and training workshops
4. Enhancing the quality service in the existing mental health facilities through trainings and capacity support

Expected Results

- Increased level of Consciousness for the formulation of NMH policy
- Better service provision
- Reduced unnecessary admission at MH Facilities
- Increased level of awareness in the community
- Fundamental Basic human rights and freedom of Mentally-ill people respected
- Reduced discrimination and isolations
- Decreased no of chained patients

Thank you

END