Somalia – a global health crisis and insurgency: a bad cocktail for a country in the throes of nation-building

Somalia has been slowly moving out of a state of protracted military conflict. The central (federal) government does not have firm and effective control of large parts of the country. The country, especially the rural areas in the South, is dominated by the terrorist group Al-Shabab, which has a notorious history of violently disrupting humanitarian work. Severe poverty and hunger faces many people, leaving them vulnerable. Nevertheless, there is resilience in the people, evident from their struggle to end the insurgency and to reconstruct and reconcile their country. This is the context in which the coronavirus arrived at the shores of Somalia, threatening to thwart the country’s slow but steady strides in nation-building that were underway.

The first case of COVID-19 was confirmed in Somalia on the 16th of March 2020 in Mogadishu, the nation’s capital city. The Federal Government of Somalia led by President Mohamed Abdullahi Farmajo has since taken some measures to stem the spread of the disease and ultimately to defeat it. As of May 15, 2020, Somalia had recorded 1,284 confirmed cases with 53 dead and 135 recoveries.

Public health measures –

- The government formed a task force to respond to COVID-19. This task force does not have trade union and employers’ representatives.
- Closure of schools, including universities, took effect from the 19th of March 2020. Large gatherings were also interdicted.
- Ban on passengers who had been to China, Iran, Italy, or South Korea in the 14 days preceding March 19 from entering Somalia.
- Suspension of all international flights with the possibility of exceptions for humanitarian flights.
- Adoption of quarantine measures.
- Curfew imposition with an exclusion for essential services workers and support staff with official movement permit. As at the time of filing this report, all these measures adopted by the central government are still in place.

Given the historical ties between Somalia and Italy, the Somalia Federal Government sent 20 volunteer doctors from the Somali National University to assist Italy in the fight against the pandemic.

Economic measures

Some of the economic and fiscal measures that the government adopted included:

The announcement by the Prime Minister, Mr. Hassan Ali Khaire of government’s provision of $5m to deal with the disease. Aside from the announcement of the fund, there is no evidence that the Somali central (Federal) Government made any employment-related provisions. Laying-off of private-sector workers under the “no-work-no-pay” policy is being implemented by several private sector businesses. This is a policy the Federation of Somali Trade Unions (FESTU) has strongly rejected.

Gaps observed in the measures adopted -
Similar to other African countries, Somalia is experiencing critical shortages of medical supplies and Personal Protection Equipment (PPEs) for medical care workers. There were initial reports that Somali health officials initially had trouble obtaining medical equipment but did successfully order some ventilators and ICU beds. Information that only one hospital, the Martini Hospital in Mogadishu, is the medical facility dedicated to the treatment of COVID-19 patients, is an indication of the inadequate healthcare infrastructure and signals the gravity of the challenge in dealing with the pandemic in Somalia.

Somalia does not have testing capabilities. Test samples are taken abroad for analysis and results returned later. This has contributed to the testing challenge in the country as it means testing results come late. Asymptomatic persons who are not tested can easily spread the virus. The dearth in testing capabilities has also placed a restraint on tracing persons who have had contact with index cases.

The level of poverty in the country has been seen as partly responsible for the weak adherence to the social distancing measures put in place. Somalia is a country with over 80% of the economy being informal and also heavily dependent on remittances from abroad. Speaking to these limitations, the Somali Medical Association expressed concerns that the death toll in the country from COVID-19 may be huge and that Somalia may not be able to recover from the economic effects. Their predictions are premised on the poor working relations between the central government and states in the federation which leads to lack of control and poor coordination by the central government in the fight against the pandemic.

The awareness measures adopted could benefit from more intensity and consistency. Communication needs to be boosted to raise sufficient awareness of the people and to elicit compliance with announced public health protocols and adoption of the necessary social distancing measures. Low level of awareness is partly responsible for why people, especially in Mogadishu, still gather in crowded areas.

**Somali trade union contributions to the fight against COVID-19**

- **FESTU issued a statement to highlight the shortcomings of the intervention measures by the public authorities and proposed necessary actions to rectify these shortcomings.**

- **FESTU has supported and complemented government’s COVID-19 awareness and education measures.** It has issued statements focusing on the need for workers and the people of Somalia to heed government’s advice on social distancing and the practising of responsible hygiene and sanitation practices. Affiliates of FESTU have included in the curricula of their workplace-based training programs, topics on how workers can protect themselves and prevent the spread of the coronavirus as well as mitigate the impact of the COVID-19.

- **FESTU actively campaigned for debt cancellation for Somalia for the country to acquire the necessary fiscal space for dealing with the crisis.** Once resources have been freed domestically with debt cancellation FESTU has continued to advocate for a social protection floor for all Somalis including the most vulnerable.

- **FESTU has been actively rejecting the laying-off of workers, mostly in the private-sector in this time of COVID-19.** The mass-sack of private sector workers by several private business operators is being carried out under the broad interpretation of the implementation of the “no-work-no-pay” policy meant for voluntary workers’ withdrawal of their labour.
FESTU has appointed a Desk Official at its Secretariat to be responsible for the compilation of COVID-19 induced workers’ rights violation complaints across all economic sectors. This is an important step that should help in the continuous monitoring and reporting of rights violations that can help prevent a national emergency from being used as a pretext to clamp down on civil liberties.

The union can also contribute to dispel misinformation and false news that are peddled to undermine the fight against the pandemic. Some persons, including even journalists, are reported to have been arrested and detained for spreading false information. The journalists’ union can provide special training to its members on how to fact-check COVID-19 information and also on how to counter misinformation. This should help in the identification of the union as a credible and reliable partner in the fight against the coronavirus in Somalia.

Conclusion

COVID-19 has come to worsen an already fragile situation in Somalia. The mobilization of various sections of the population is essential for tapping fully into their resilience and in ensuring that the country does not become overwhelmed by the toxic mixture of the health crisis with the situation of insurgency in the country. The trade union effort in contributing to the fight against the pandemic can be stepped up towards assuring more inclusiveness in the national effort as a whole.

Already the Secretary-General of the United Nations has issued a global clarion call for the cessation of hostilities around the world so that everyone can focus on the fight against COVID-19. The trade unions can respond to this call by considering how they can also push further for cessation of violence in the Somali situation. The trade unions may build on the caution issued by the Somali Medical Association about the difficulty of post-crisis recovery for Somalia to draw attention to the need for all contending forces in Somalia to seize hostilities now and for clans, regions, state governments, federal government, employers, trade unions and all others, to move towards collaboration for the very survival of the country as an entity.

As the country prepares to move away from the heavy restrictions that were imposed at the beginning of the health crisis, the trade unions can discharge themselves creditably by preparing to engage effectively with the national recovery effort. This must be done in a manner that will benefit workers and the vulnerable sections of the population. A trade union assessment of the impact of COVID-19 on employment and well being of different categories of workers can help the formulation of specific measures for the benefit of workers. Such measures can be tabled in the Social Dialogue Forum that has been recently established in Somalia. FESTU has to exercise initiative in giving meaningful life to a national tripartite institution that was born shortly before this particularly challenging time.