

Scale-up activities in high-risk geographies to identify, track, and map migratory patterns of hard-to-reach nomadic populations in Somalia to effectively plan for and deliver polio vaccination outreach services to increase population immunity and interrupt poliovirus transmission

Project Information

- ◆ **Department:** Public Health Programs
- ◆ **Unit:** Polio and Immunization

Objectives

The project aims to improve immunization access for nomadic and hard-to-reach communities in Somalia. It will focus on reaching zero-dose and under-immunized children, strengthening disease surveillance, and improving community engagement and routine immunization services.

Project Objectives

- Vaccinate zero-dose and under-immunized children.
- Improve access to routine and polio vaccination.
- Strengthen AFP and disease surveillance.
- Improve community awareness and engagement.
- Strengthen the capacity of health workers and community teams.
- Improve data collection, reporting, and monitoring.
- Strengthen coordination with health authorities and partners.
- Reach children in mobile and hard-to-reach populations through Transit Point Vaccination teams.

BENEFICIARIES

Primary beneficiaries:

- Children under five years of age in nomadic, pastoralist, displaced, and other hard-to-reach populations across the targeted districts.
- Zero-dose and under-immunized children who are missed by routine immunization services.
- Children in transit and mobile populations reached through Transit Point Vaccination (TPV) teams.

Secondary beneficiaries:

- Caregivers and families through community engagement and health education.
- Community Mobilizers, Care Group Mothers, health workers, and project staff through training, supervision, and capacity building.
- Community leaders, religious leaders, clan elders, and other local stakeholders through engagement and collaboration.
- District, regional, and national health authorities through strengthened coordination, surveillance,

Regions of Work

Existing project districts:

- Dollow, Bardheere, Luuq, Beled-Hawa, Elwak, Garbaharey, Badhadhe, El-Barde, Baidoa, and Beletweyne.

Newly targeted districts (2026–2027 expansion):

- Hudur (Bakool Region)
- Afmadow (Lower Juba Region)
- Rural and internally displaced populations in Kismayo (Lower Juba Region)

PROJECT PHASES

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

Phase 2- Coordination: The implementing partner along with the consultant will conduct coordination meetings, with staff from the Ministry of Health and the Ministry of Livestock, WHO, UNICEF, IOM as well as other partners and local NGOs working in the targeted region.

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

PROJECT DESCRIPTION

EMPHNET will continue supporting conducting a nomadic project in the targeted regions (10 districts) and for this year will expand to new 3 districts with the goal of improving public health interventions, specifically immunizations, among nomadic populations. GHD will hire implementing partner (IP) and hire a consultant to coordinate project activities with the IP. Key activities include documenting nomadic movements, validating nomadic sites, and preparing routine immunization training materials for community health volunteers, mobilizers, vaccinators, and health facility staff. The project will conduct continuous field data collection and vaccinations for children (polio and routine immunization) across 13 districts, integrating data into a centralized system. Other efforts include strengthening immunization through outreach sessions, mother-to-mother support groups, community dialogue sessions, IEC material distribution, elder orientation on disease surveillance, and on-the-job training for healthcare workers. This project aims to enhance the accessibility of immunizations for children under five years of age in nomadic populations across selected districts of Somalia. Building on the past 3 years, the project addresses the challenges of low vaccination uptake, zero-dose children, and limited routine immunization infrastructure in nomadic communities, while integrating community engagement and data-driven monitoring.

The **Nomadic Polio Project** aims to improve access to immunization and strengthen disease surveillance among nomadic, pastoralist, displaced, and other hard-to-reach populations in Somalia. Building on the achievements of implementation in 10 districts, the 2026–2027 phase will expand interventions to **Hudur, Afmadow, and rural/IDP populations in Kismayo**, bringing the project's geographic coverage to 13 districts.

The project will deliver integrated outreach services, prioritize zero-dose and under-immunized children, strengthen routine immunization, and improve community-based surveillance for AFP and other epidemic-prone diseases. It will also use mapping of nomadic movement routes, seasonal settlements, water points, and transit hubs to improve microplanning and outreach scheduling. Transit Point Vaccination (TPV) teams will be established along high-mobility and cross-border corridors to reach children who are missed by conventional health services.

Project Start and End Date	03/1/2024 – 07/31/2027
Funded by	Centers for Disease Control and Prevention (CDC)
Collaborators	Ministry of Health and Human Services at the Federal Republic of Somalia and Visioning Corps Initiative VCI

Currently . . .

- 930 outreach sessions were conducted, delivering routine immunization, zero-dose identification, malnutrition screening, and AFP surveillance services.
- More than 7,300 children were vaccinated across hard-to-reach nomadic populations, improving access to essential immunization services.
- Active surveillance led to the identification and investigation of 12 suspected AFP cases, including one confirmed vaccine-derived poliovirus type 3 case in Baidoa district.
- Community engagement activities were implemented through 762 community dialogue sessions, 136 mother care group sessions, and 147 elderly engagement sessions, strengthening vaccine acceptance and demand generation.
- Digital reporting systems (ODK) supported real-time monitoring and planning, with over 1,801 entries recorded.
- AFP and fever/rash surveillance improved in Cairo and Giza.
- Three districts transitioned to regular PHC coverage, reflecting behavior change.

What is next . . .

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

EMPHNET Information: Eastern Mediterranean Public Health Network (EMPHNET) works at achieving its mission by responding to public health needs with deliberate efforts that allow for health promotion and disease prevention.

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