



RCRF SUPPORTS GOVERNMENT ADMINISTRATIONS TO MITIGATE THE COVID-19 Pandemic SUSTAINABLE IMPACT ON SOMALIA'S PUBLIC SECTOR

During the recent years, the health care system in Somalia is recovering from a prolonged period of civil war that resulted in a complete collapse of the health care system in the country. Somalia has one of the worlds' worst health indicators globally including the highest maternal, neonatal, and infant mortality rates. Health expenditure remains very low, due to limited fiscal space, and there is a critical shortage of health workers. As a result, around 3.2 million women and men in Somalia need emergency health services (WHO).

Given the fragile and weak health system in the country, Somalia has also struggled to contain and adequately respond to the toll of the COVID-19 outbreak on its own after the first case of the pandemic was declared by the Ministry of Health on 16th March 2020. With limited controls in place by the various government entities, the pandemic continues to pose great health risks to local populations, leaving those in rural communities the most vulnerable.



The COVID-19 pandemic is having far reaching and detrimental impacts on the public sector through multiple channels. These include reversing the gains made in improving the health care service delivery systems, overburdening the existing fragile frameworks of health service provision, severe fiscal impacts resulting from revenue shortfalls and the combined impacts on public sector productivity of illness and social distancing measures.

These factors will in turn impede the FGS and FMS collectively in achieving the PDO during the project period. The inherent risk environment for the RCRF III operation is therefore very high as a result but progressing due to the coordinated efforts between FGS and FMS.

As the country is unable to independently address the far-reaching impact of the Covid-19 pandemic on the public sector and greatly eroding the existing fragile frameworks of health service provision, severe fiscal impacts resulting from shortfalls and the combined impacts on public sector productivity of illness and social distancing measures, the World Bank RCRF Project phase III contributed funds in 2021 towards COVID-19 response and health sector recovery via a scaled-up fiscal support initiative to Federal Member States. The aim was to help the government in addressing the impact of the pandemic.

RCRF III Sub-Component 2.2 provides US\$11.7 million to support social service delivery at FMSs through on-budget fiscal transfers, which will help service delivery follow beyond FMSs administration capitals to make sure public services are brought very close to the community level. The ultimate goal is to strengthen governance in social service sector and increase allocations of funds for FMSs through reforms based on conditionals.

In Puntland, the key ministry in charge of the health sector is the Ministry of Health. The ministry oversees the RCRF health projects in all 9 regions. During the last two years, the project succeeded in the recruitment of 260 Community Healthcare Workers, referred to as Female

Healthcare Workers (Marwo Caafimaad). These Health Workers have been instrumental in the identifying of disease outbreaks, dispensing of medicines, and in the serious cases the referral of patients in rural areas to more adequately resourced health care centers. This however, has not been without challenge.

With RCRF funding, the Ministry of Health of Puntland has procured 28 hospital beds for 12 MCHs and purchased 4 brand new Ambulance's equipped with Oxygen and provided much needed supplies & medicines with the support of the RCRF Project. More specifically, these resources have been assigned to rural areas where under normal circumstances, emergency assistance will be difficult to provide due to the distance from the main cities and the rough terrain which makes transport more even more troublesome.

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Furthermore, Puntland has been able to procure an oxygen plant. This is a fully functional plant which creates, stores and transports oxygen tanks which is currently severely limited and very scarce. It is without question that lives will be saved, as one of the main causes of death for COVID-19 positive patients are directly related to breathing difficulties. The roll-out location of this will be in Badhan, Puntland.



The State has also used these funds to train 72 new Female Health Workers for on-the-job skills that will be required on a day-to-day basis, such as COVID-19 protocols and the use of PPE. They were trained in all of the new modules of the Somali compendium for three months to ensure their service delivery to the community is efficient and upholds standards of being a community health worker and all its

requirements. Also the State has rehabilitated six existing rural Health posts, with new toilets, delivery room repairs and piping for water as It is important to be able to provide care for those in need of medical attention in a sanitary and adequate facility, and through RCRF support this has been sufficiently achieved.

In conclusion, the Recurrent Cost and Reform Financing (RCRF III) will continue to work with all Federal Member States and the Banadir Region to ensure that improved governance and service delivery is further strengthened and an increased allocations is made available to them by adopting strategies to strengthen resource management systems across the country.

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