



# *Vulnerable populations Health matters Most*

Case of Badhadhe district by  
& Nawang Yan

Hassan Hussein,

# Tittle

Access to Health in Badhade District, Somalia

# Meet Hassan

Hassan will report on his observations in Badhade District in Somalia. He will conduct interviews with women who will provide valuable lived experiences of their conditions in the district.




# The Roots of My Research

While in a vocational break from university in early 2015 I visited my hometown - Badhadhe district and took a walk around the town visiting one of the primary health care service providers. I met Suado Aden one of the health care workers who was working as a health volunteer busy in her daily task of serving the public. Being so busy we made an arrangement for a talk after duty. Afterwards, we had a friendly open talk on one of Tuesday evenings where she exposed me to some of the problems mothers in this location have. She highlighted the mortality rate for mothers and children. She said I would have had the opportunity and resource would have written research that would have helped me understand the dependent and independent variables behind the high mortality rate for mothers and challenges of safe delivery in this district. This statement and Saudo (female health worker) description of this particular health issue which is greatly affecting one gender made me develop an interest in research on this area.

I thereafter, intended to deduce my research topic from this meeting so that I will be able to draw from these the intersectionality between barriers of accessing healthcare services, gender and human rights. This will help in bringing out what are the contributing factors behind the high mother mortality rate. Understanding the reason why women are facing various issues ranging from gender issues, human rights violation and mother's high mortality rate in Badhadhe district.

My strong relationship with the community and the trust I built will make me feel concerned for the well-being. I will be committed not to do any harm. I will ensure to ask the consent and ensure that participants' information will be kept confidential.

The Maternal Mortality Rate in Somalia 732 maternal deaths per 100,000 live births, compared to 6.26 per 100,000 live births in Canada.



*"The future of children living in this town, communities' next generation of leaders in was in total darkness."*

*BRANCHING  
OUT:  
PUTTING  
THE  
ISSUE(S)  
INTO  
CONTEXT*

Kolbio is a border town situated in the lower Juba region of southern Somalia. It is strategically located in the far south of Somalia shares a border with Halugho town in North Eastern Kenya and had roads connecting to Dadaab refugee camps. According to the UNFPA population estimation survey (2014), lower juba hosts a population of (489,307), Kolbio town is amongst the towns that came under Badhadhe district, one of the major districts of Juba land, and according to this population estimation survey hosts a total of 4000 households. These include households that are living a nomadic life in the surrounding areas. This town has fertile farming land and receives an adequate amount of rainfall, livestock farming and beekeeping are also major activities for the community living here. Since the collapse of the central government of Somalia in 1991 the town, lost the previous education, health and social service system. Different categories of the population in this town are affected either directly or indirectly by missing access to opportunities. The report had shown that there is a big number of children living in the surrounding rural areas who were as well not enjoying their basic rights i.e. education. The future of children living in this town, communities' next generation of leaders in was in total darkness.



## WHAT HUMAN RIGHTS MEANS TO ME

We all have the right to access the highest standard of health care and human rights, respect and dignity without discrimination, whatever circumstances or localities we were in. We all have the right to receive good quality health services, with dignity and respect. We all have the right to the essentials for a healthy life, including food, water, sanitation, housing, clean air and a safe environment. States are legally obliged by international law to enable us to realize our right to health, and other basic rights, such as the rights to life, education and information, to participation, and to benefit from scientific progress and its applications. (Human right document adopted Dec 9/ 1948)

The right to health does not stand alone but is indivisible from other human rights. Human rights cannot be fully enjoyed without health; likewise, health cannot be fully enjoyed without the dignity that is upheld by all other human rights.

Healthy women, children whose rights are protected are the very heart of sustainable development. Their inherent right to the highest attainable standard of health is enshrined in the constitution of the World Health Organization and international human rights law. When their right to health is upheld, their access to all other human rights is also enhanced, triggering a cascade of transformative change. Survive, thrive and transform: that is the clarion call of the Global Strategy for Women's, Children's Health (2016–2030). If rights to health and through health are upheld, delivery of the Sustainable Development Goals (SDGs) will indeed leave no one behind. (convention rights 2013)

*"Human rights cannot be fully enjoyed without health; likewise, health cannot be fully enjoyed without the dignity that is upheld by all other human rights."*

The Global Strategy presents a comprehensive human rights-based roadmap by prioritizing human rights to health and through health for the most marginalized; by recognizing age groups' distinctive needs and adopting a gender-sensitive life course approach; and by encouraging leadership to realize rights to health and human right interconnection. In many settings, the international community can play an important role, but national and local leadership are vital.

Even when resources are restricted, committed leadership can make a huge difference to the lives of women, children and adolescents. Only through focused leadership by governments, both nationally and locally, can inequities in health outcomes be addressed conclusively, gender-based and other forms of inequality are tackled, and discrimination removed, including within health systems. Only committed leadership with accountability will produce sustained abandonment of harmful practices, inspire others to act in support of human rights to health and through health, guide systematically the needed human rights-based approaches to the design, implementation and evaluation of policies and programmes affecting health, and implement the necessary legal provisions.

The High-Level Working Group is convinced that committed leadership for collective action is urgently needed to safeguard the full exercise of women's, children's and adolescents' human rights for their health and for the health of their communities. This requires that they be enabled to access comprehensive information, exercise autonomous decision-making. A transformative leadership agenda is vital if women, children and adolescents are to realize their health and well-being and to flourish and prosper (Sustainable Development 2030)

*WHEN IT ALL  
COMES  
TOGETHER:  
THE WONDERS OF  
COMMITTED  
LEADERSHIP*





# PLANTING THE SEEDS: *THE IMPORTANCE OF LISTENING TO LIVED EXPERIENCES*



In regards to this, in early December 2019, there was a measles outbreak that left many mothers and children dead at Badhadhe district in lower juba of Somalia. Jubaland State, according to Mahado -the mother of 4 children confirmed the evidence of several of her neighbours died from Measles. She mentioned the district not have access to better health services and health personnel. Because of distance, the nearest area is Kismayo which is 150 kilometres away. Several that was taken there died on the way.

“The second wave of measles killed another dozen children and their caretakers in November 2020,” said Mahado. This wave was more intense and killed dozens of children and their caretakers. According to her, the humanitarian assistant doesn't reach them. She said that not only residents in kolbio and Badhadhe town that has suffered the impact of this outbreak but also surrounding localities like Ras Kamboni, Kudha, and Burgabo.

According to Mahado, a mother of 4 children and resident “the impact of covid-19 outweighed the impacts of measles, unlike other localities that gets access to government services and humanitarian intervention, this locality was totally forgotten and leave of medical intervention they could not even get access to health-protective equipment”. she urged Ministry of Health (MOH) of both regional and federal government of Somalia, World health organization WHO and United Nations Children’s Fund (UNICEF) to reach out this marginalized community and making health services accessible, and save lives.

Photo of Mahado, a resident of Badhadhe district  
(March 8 2021)



*"While most men run away from civil war and some tend to live in the big towns, women and children are left alone to face life without proper access to all basic rights, ranging from water, public sensation, healthcare services, protection and respect of their rights."*

Photo of Ayan, mother of 3 during a face-to-face interview. Covid-19 protocols observed during the interview including masks and social distancing.

In the face of pandemics, people do not get access to clean water and sanitation hygiene facilities. Open defecation of children of low economic class, who can't afford toilets posts health threats. Public services and humanitarian interventions are not reaching the intended recipient. Few who were in power are self-centred and unconcerned about the unfolding health situation. Public resources that were meant for the marginalized community are diverted into the hand of few self-centred individuals. While most men run away from civil war and some tend to live in the big towns, women and children are left alone to face life without proper access to all basic rights, ranging from water, public sensation, healthcare services, protection and respect of their rights. In addition to pandemics, they also do experience gender-based violence and various gender issues. There is no equal participation and decision-making process that those decisions made without their involvement. Women in this locality are not well represented in politics. (Ayan 2021)


Even during the election, they have no say. Absence of the right to vote and exercise rights of electing who best fits them.

According to Ayan one of the contributing factors that affecting access to health care and human rights is corruption, particularly during elections. Few selected elders were exclusively men. These teams are bribed and influenced to take some money and elect individuals who were not from the resident. The representatives were not pointed on a merit basis. After the election, they will disappear and would not advocate for the right of the residents. Whenever they were asked why they were not representing the community well they will tell you that they paid for the seat. They will only reappear when their time comes to an end. The regional government is unconcerned about the well-being of the society.



# MY CONCLUDING REMARKS

Finally, all humanity has entitlement and various rights to enjoy. These rights are interdependent and fulfilment of one right facilitates the fulfilment of the other. The research focused on the intersectionality between health and human rights and why women in the Badhadhe district do not are locked in the junction where human rights and health intersects. Women in this locality faced various human rights issues that require the attention of the government and humanitarian attention. UNDP, Government of Somalia, Juba land regional administration, UNICEF, WHO, are urged to respond to humanitarian issues in this region.



# Moving Towards Re-Birth and Growth

## Challenges

- Violation of human rights and access to basic rights for the voiceless children and mothers.
- Lack of enough medical facilities and expertise and less humanitarian intervention worsen the situation
- Poor leadership, particularly those representing the district at both regional and national levels.
- Lack of allocation of resources from the regional government as well as the central government of Somalia has taken a greater role in the complication of access to health services and other social services.
- Poor road network and ineffective transport made transportation of sick difficult for delivering mother reach Kismayo save making many died on the way.
- Most deaths before age 5 are linked to undernutrition The best interest of the child is often underestimated.
- An estimated 1000 women died in pregnancy and childbirth in 2019 and 2020 in Badhadhe district.

## Recommendations

- Address human rights as determinants of health All residents should undertake periodic human rights-based assessments of the determinants of women's, children's and adolescents' health.
- Particular attention to gender inequality, discrimination, displacement, violence, dehumanizing urbanization, environmental degradation and climate change, and develop rights-based national and subnational strategies to address these determinants.
- A human rights-based approach to health is a people-centred approach local to be included in making decisions affecting their lives.



# *My Photo Diary*



# Reflection Period

We understand that what you have been reading so far may be disturbing. Take this time to reflect on what you read. How did you feel when reading my work? Answer some questions I provided below.

The effects of war are gendered. In my case, women were unable to run away and were left in horrible social circumstances. Can you think of other ways war impacts women?

What can be done so that government and humanitarian bodies are more willing to respond and help in these situations?

Put your self in my shoes. Imagine you were interviewing these women. How does your positionality in the world affect the way you would conduct research in these areas?

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