#### Jamhuuriyadda Federaalka Soomaaliya

Hay'adda Duulista Rayidka Soomaaliyeed

Somali Federal Republic

**Somali Civil Aviation** 

**Authority (SCAA)** 



الفدرالية الصــومال جمهورية المدني الطيران هيئة الصـومالي

11th MEETING CAPSCA Africa Nairobi, Kenya, 1st to 5<sup>th</sup>
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Somalia CAPSCA Implementation: Baseline
Assessment, Gaps, and Strategic Roadmap

# Toward Strengthening Public Health Preparedness in Somali Civil Aviation

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**Presenting by:** Naima Omar Ibrahim

Contact Info: scaa@scaa.gov.so | Medical\_scaa.gov.so

# **Background and Context**





- Somalia is rebuilding its aviation and public health systems after decades of conflict.
- CAPSCA offers an opportunity to integrate Public Health
   Emergency (PHE) capacities into aviation operations.
- The ICAO-WHO CAPSCA framework guides countries to comply with International Health Regulations (IHR, 2005).
- Aden Adde International Airport (AAIA) serves as Somalia's first
   CAPSCA pilot site.

#### **Current Public Health Status at Airports**





- IHR core capacities at Somali Points of Entry (PoEs) remain low:
  - 27% average capacity at PoEs.
  - Only 20% at airports.
- Limited infrastructure for health screening, isolation, and emergency medical response.
- Minimal integration between aviation and health authorities.

# **Gaps Identified**





Lack of dedicated isolation areas and biosecure transport for suspected cases.

- No standard operating procedures for disease detection or PHE coordination.
- Insufficient trained medical staff and PPE stockpiles at airports.
- Inadequate communication between airport management and MoH health surveillance units.
- Absence of simulation exercises or drills at airports since 2020.

#### **Lessons from COVID-19**





COVID-19 exposed severe gaps in aviation public health preparedness.

- Screening at AAIA was improvised with limited thermometers and no testing on-site.
- Coordination with WHO and UNSOS was ad hoc, without formal command structure.
- Highlighted urgent need for CAPSCA-compliant national emergency plans.

#### **CAPSCA Pilot Site: Aden Adde International Airport**





- Selected by SCAA as pilot site for national CAPSCA rollout.
- Aim: strengthen public health preparedness through structured implementation.
- Core focus:
  - Establish airport health committee.
  - Develop SOPs for disease detection and case management.
  - Conduct periodic PHE simulations.
  - Create referral linkages with designated hospitals in Mogadishu.

# **Pilot Activities in Progress**





Baseline assessment conducted jointly by SCAA and WHO Somalia (2024).

- Draft Airport Public Health Emergency Plan (APHEP) under review.
- First CAPSCA Orientation or Briefing held for 45 aviation and Port Health staff (August 2025).
- Construction design for small isolation facility completed.
- Coordination meeting with airlines Airport Security, Immigration Authority and Favori LLC (operator) and port health ,UNSOS,UNHAS held in Oct 2025.

# Objectives of CAPSCA Implementation





- Improve coordination between aviation and health sectors.
- Develop sustainable capacity for disease detection and response at airports.
- Ensure compliance with ICAO and WHO standards (IHR, Annexes including 6,9,11,14,17,18 and 19 Annex).
- Enhance traveler confidence through visible preparedness measures.
- Integrate One Health principles into aviation emergency planning.

# **Roadmap for Implementation**





Phase 1 (2025–26) – Activate CAPSCA pilot at AAIA

- Establish national CAPSCA working group.
- Train airport and airline staff.
- Conduct tabletop and full-scale simulations.
- Finalize and approve Airport Health Emergency Procedures.

Phase 2 (2026–27) – Evaluate and scale up

- Review pilot outcomes and lessons learned.
- Extend implementation to other airports) National or International.
- Integrate health preparedness into national aviation policy.

Ongoing: Maintain coordination under NATFAC and IHR focal points.

#### **Stakeholder Coordination Framework**





- **SCAA:** Lead technical coordination, oversight of CAPSCA plan.
- MoH (Port Health): Surveillance, reporting, medical response.
- ICAO / WHO: Technical guidance, audits, and training.
- Favori LLC: Operational implementation at AAIA.
- UNSOS / UNHAS: Emergency logistics support.
- Donors (World Bank, AfDB, WHO EMRO): Financial and material support.

#### Roles and Responsibilities (Detailed Table)





Entity	Key Role
SCAA	Policy, coordination, and compliance with ICAO SARPs
МоН	Disease surveillance, quarantine, IHR notification
WHO	Technical guidance and simulation facilitation
ICAO	Oversight, regional collaboration, CAPSCA assessment
Africa CDC	Regional One Health and preparedness integration
Airlines	Passenger reporting, adherence to health protocols
Airport Operator	Infrastructure, communication, logistics

# **Training and Capacity Building**





- Initial training delivered on:
  - PHE communication protocols.
  - Infection prevention and control (IPC).
  - Use of PPE and screening techniques.
- Upcoming (2026):
  - Advanced CAPSCA workshop (ICAO–WHO).
  - Multi-agency drill simulation at AAIA.
  - Development of e-learning modules for staff.

# **Infrastructure Development**





- Planned:
  - Isolation room (2 beds, negative pressure).
  - Portable screening booths for arrivals.
  - Dedicated medical transport vehicle (ambulance).
  - Radio communication system linked to tower and MoH.
- Long term:
  - Air-ambulance partnership and rapid sample transfer system.

#### **One Health Integration**





#### **One Health Integration**

- Somalia adopted the **One Health framework (2013)** bridging health, livestock, and environment sectors.
- CAPSCA aligns by addressing zoonotic spillovers (avian flu, Marburg virus, Mpox, Ebola, MERS).
- Promotes multi-sector collaboration during outbreaks affecting air transport.
- Enhances cross-border information sharing on emerging diseases.

# **Legal and Policy Framework**





- CAPSCA implementation linked to:
  - Somali Civil Aviation Act (2023)
  - Public Health Act (Draft, 2024)
  - IHR (2005) obligations for points of entry.
- Next steps: adopt Airport Health Regulations and national CAPSCA policy directive under SCAA— MoH joint authority.

#### **Regional and International Collaboration**





- ICAO-WHO MoU (2022): Strengthened collaboration in aviation health preparedness.
- Somalia actively participates in CAPSCA Africa Network.
- Africa CDC supporting integrated surveillance and joint training.
- Engagement with AMREF Flying Doctors for potential medevac partnerships.

# **Progress Achieved**





Somalia regained control of its airspace (Mogadishu FIR) in 2023.

- Aviation academy established for technical training (2024).
- Increased coordination with WHO, ICAO, and UN agencies.
- Development of national database of airport health resources underway.

# **Challenges and Support Needs**





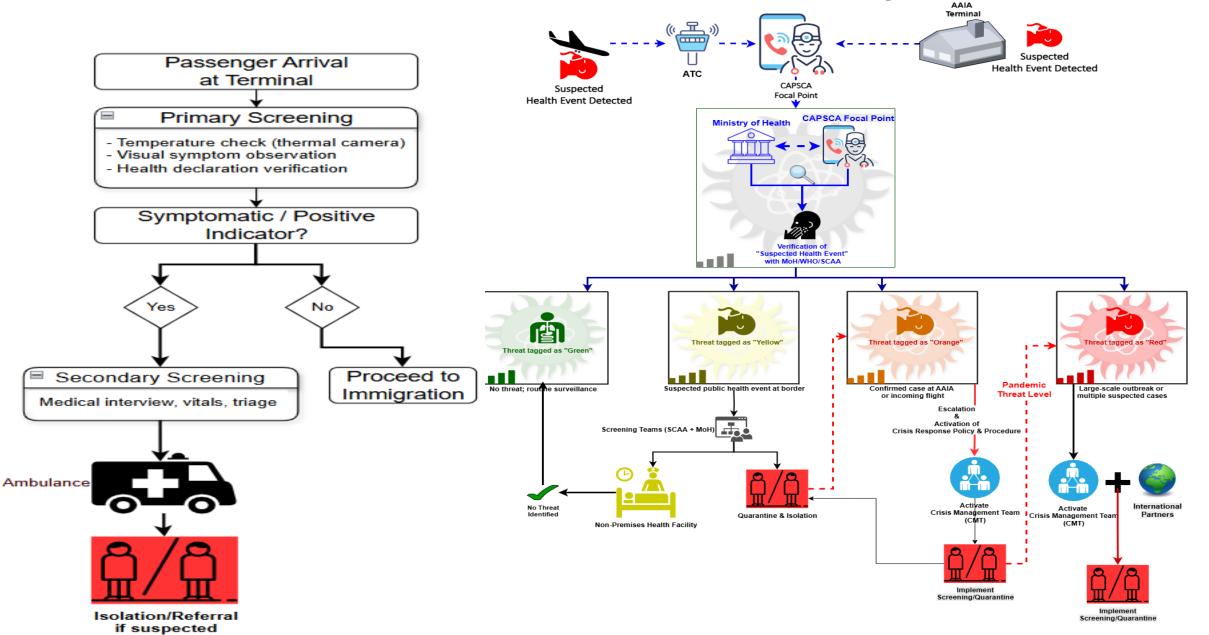
**Financial:** Need for sustained donor funding for infrastructure and training.

- **Technical:** Limited expertise in epidemiology within aviation sector.
- Logistical: Gaps in medical supply chain and communication systems.
- Policy: Weak enforcement of IHR at ports of entry.
- Support needed from ICAO, WHO, and development partners to address these.

#### **CAPSCA FRAMEWORK**







#### **DEVELOPED BASELINE STUDIES & SOPs**







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#### Conclusion





- Somalia's **CAPSCA implementation is on track** with strong inter-agency collaboration.
- The Aden Adde pilot sets the foundation for national aviation health readiness.
- Sustained technical and financial support from ICAO, WHO, and donors is vital.
- Somalia remains committed to building **resilient**, **One- Health-based aviation systems** ensuring public health safety for all travelers.
- "Safe skies, healthy borders Somalia's journey toward resilient aviation health."



# **THANK YOU**

ANY QUESTIONS?



























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