Protests in Somalia after police killing during pandemic lockdown

By Stephan McCoy
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Angry protests broke out in Somalia last Saturday following the fatal shooting of at least one civilian in the capital, Mogadishu, by a police officer, with crowds burning tires and demanding justice.

The man, whose name has not been released, was killed by a policeman enforcing the night-time curfew mounted to halt the spread of the coronavirus in place since mid-April.

The protests reflect a broader anger towards the brutal methods utilized by the security forces during the curfew, with residents reporting beatings and other abusive treatment. The government has exploited the pandemic to build up the powers of the state to repress opposition to its unpopular rule, under conditions where the Islamist group al-Shabab controls much of the country and relations with the federal states are poor.

Somalia recorded its first case of the coronavirus mid-March in a student recently returned from China and its first death on April 8. As of April 27, there have been 436 confirmed cases and at least 23 people have died, although these figures are likely to be an underestimate.

While most of the cases are in the capital, there are at least five in Somaliland and two in Kismayo, Jubaland, one of whom is an internally displaced person (IDP). Among those who have died from the deadly disease is the Justice Minister of Hirshabelle state, Khalifa Mumin Tohow, and another is a legislator.

Somalia, which has seen three decades of civil wars and conflict that have left the country without basic infrastructure, has one of the weakest health systems in the world. The Global Health Security Index rates it 194 out of 195 countries. There are just 20 ICU beds to serve a population of 12 million in the whole country. While there are 14 isolation centres in the country, there is only one hospital dedicated to COVID-19 patients.

A modern hospital in Mogadishu with ventilators and critical medical equipment remains inaccessible to the public. It has been closed for two years because of a dispute between the Somali government and the United Arab Emirates (UAE) that built the hospital.

As with most countries on the African continent, Somalia’s public health system has little in the way of personal protective equipment (PPE) and a complete lack of the necessary medical equipment. Absent laboratories able to test for the virus, all swabs must be sent to South Africa, causing long delays and making any strategy of contact tracing, isolation and treatment all but impossible.

Health care workers are being forced to work under conditions where they must risk exposing themselves, their loved ones and their patients to the coronavirus. At least 15 health care workers have already contracted the disease.

The virus comes amid a deepening economic crisis in the country—a consequence of the decades of wars and interventions orchestrated and fomented by US imperialism as it seeks to counter the growing economic influence of China on the African continent. At least half of the country’s 12 million population are at risk of hunger; 3.1 million people need health assistance; 2.7 million need water and sanitation; and 2.6 million have been driven from their homes.

The International Monetary Fund and World Bank have moved to increase Washington’s influence over the war-torn country, signing off on a debt relief package worth at least $5 billion. Somalia’s debt will supposedly be reduced from $5.2 billion to $557 million over a period of three years. The catch is that the country must submit itself to the usual demands—“broad economic reforms,” “debt management” and “building an inclusive economy”—all of which mean deeper penetration by the banks and multinational corporations.

There is a great fear among experts and medical professionals that the pandemic will kill more people in Somalia than anywhere else in the world due to poverty,
long running conflict and the large number of internally
displaced people living in atrocious conditions in
settlement camps. Last week, the UN Office for the
Coordination of Humanitarian Affairs (OCHA) said,
“The impact on the 2.6 million IDPs living in more than
2,000 crowded settlements with limited access to health
and water, sanitation and hygiene services would be
catastrophic.”

There are fears that the virus has crept into the
settlements for IDPs fleeing the fighting and US
airstrikes. The cramped and crowded conditions, lack of
access to even the most basic amenities such as water and
hygiene services, let alone to health care, make the
settlement an ideal breeding ground for the virus.

In addition to the curfew, the government has halted
international flights, closed its borders, banned large
gatherings and shuttered schools and universities, leaving
many children roaming the streets and increasing their
chances of contracting the disease. Khadija Hassan told
the Guardian, “It is as though the schools were closed for
public holiday ... students and children are ... playing
football and gathering in crowds in the neighbourhood.”

Many families are dependent upon remittances sent
back from the multi-million Somali diaspora. Remittances
account for a larger portion of Somalia’s national budget
than international aid. But remittances worth more than
$0.8 billion dollars a year have nosedived as Somalis
overseas have lost their income due to lockdowns and the
shuttering of their businesses. There are at least 250,000
Somalis in the UK who have been hard hit by the virus in
both health and economic terms.

The continuing armed conflict in the country threatens
to worsen the pandemic. There has been no let-up in
insurgent violence by al-Shabab. All hopes of a ceasefire
between the government and al-Shabab are crumbling,
with both sides exploiting the crisis to pursue their own
ends and punish the population.

According to recently released figures, US Africa
Command (AFRICOM) has massively escalated
Washington’s undeclared war in Somalia, carrying out 39
airstrikes in the country in the first four months of this
year, three more than it did during all eight years of the
Obama administration. Last year, the Trump
administration carried out 63 air strikes. According to
AFRICOM spokesperson John Manley, the total number
of Defense Department personnel based in Somalia
fluctuates between 650 and 800 “depending on training
missions, operations and other security force assistance
activities.”

UN Secretary-General António Guterres has called for a
“global ceasefire” in the face of the pandemic, saying,
“There should be only one fight in our world today, our
shared battle against COVID-19.” Even as he was
speaking, AFRICOM conducted an “airstrike targeting
al-Shabaab terrorists in the vicinity of Bush Madina,
Somalia,” according to a command press release.

Reports indicate the number of US troops and
commandos on the continent remain at an all-time high.
Similarly, despite talk of demobilisation and reduction of
forces the presence of the US military in Africa has
expanded. According to the Intercept, there are now five
US bases in Somalia, second only to Niger.

The Somali government and the African Union Mission
in Somalia (AMISOM) have continued their operations,
with the SNA and AMISOM killing six al-Shabab
militants and three foreign militant leaders in Lower Juba.
AMISOM is due to draw down its forces this year.

The US’s focus on Somalia is due to the country’s
position in the Horn of Africa at the entrance to the Red
Sea, through which much of the oil from the Middle East
passes. The US’s main base is in neighbouring Djibouti
where China has set up its own overseas military base.
Somalia, along with longstanding interventions by US
imperialism, has become the focal point of rival
geo-political interests by various regional powers such as
Turkey and the UAE.

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