# Somalia: Ageing Situation and the Demand for Geriatric Care

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#### Article Info

#### **Article type:**

Letter to the Editor

#### How to cite this article:

BakiBillah, A. H., Muhammad, F. & Ali Haidari, B. & Rummana, S. (2025). Somalia: Ageing Situation and the Demand for Geriatric Care. *Health Nexus*, 3(1), 18-20.

https://doi.org/10.61838/kman.hn.3.1.3



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#### 1. Introduction

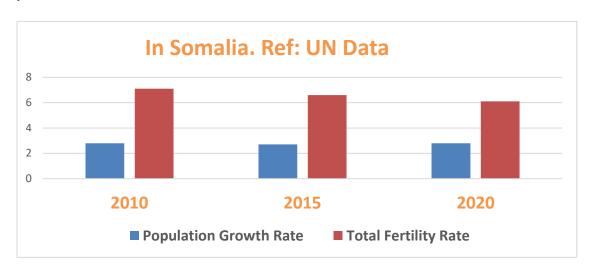
Somalia, officially the Federal Republic of Somalia, is a country in the Horn of Africa that was used to term 'the Switzerland of Africa'. Instrumentally, Somalia bears a high importance to global affairs due to its geo-political advantage. Notably, Somalia has a history of decades of civil war that has destroyed its development status. Due to the civil war and terrorism, its name and fame have been ruined (1). Since 2012, the country has been scaling up its strength writing its glorious history again after the end of the civil war. Most of the democratic institutions are in the working phase (2). Importantly, the health system was destroyed during the civil war. As a result of the long war, population dynamics were also affected. Though Somali society has

been transforming towards a developed society from a nomadic one, its fertility rate with religious beliefs is still high driving the population rate in a positive trend. Somalis aged 65 and above made up only about 2 percent of the population (3). The estimated population of Somalia in 2022 is 17,701,119 (4). Somalia has a young population—around 54 percent of household members are under 15 years of age (5). Somalia's total fertility rate (TFR) is 6.9 children. Based on the fertility rate, Somalia is likely to observe an uplift in population growth over the coming years. About 37 percent of the female household members are within childbearing age (15-49 years) (5). It has a greater implication on the country's future birth rates. Indeed, the large number of potential mothers generates momentum leading to a high growth of population in the days to come (5).



Figure 1

Population Dynamics in Somalia



From Figure 1, we can clearly understand that both the population growth rate and the fertility rate are increasing in Somalia. As the socio-economic conditions including health care increase, life expectancy is also expected to increase which means the number of aged people is on the rise in the future days. According to WHO, aging is a biological phenomenon and the world has been experiencing an aging population across the globe (6). The demographic shift in Africa is seeing more people make it to old age (60 years or over), a state associated with an increased risk of acquiring communicable and non-communicable diseases, and demand for specialized health care (7). On the other hand, the whole healthcare infrastructure of Somalia collapsed during the civil war and now attempting to stand up with fragile status. The most important challenge is that the health system is not ready enough to provide quality care to elderly people. According to the Elder Care Direction, there are two primary categories of geriatric care, including care from a doctor and nursing care (8). As per the UNFPA report, 45.6 percent of the population was below the age of 15 years in 2014. It means that almost 50% of people are under 20 years who are going to become older in the days to come. Today's greater share of young people is going to become older who will demand quality geriatric care (5).

As per the current population size, the demand for geriatric care in Somalia is negligible, only 2% of people but a high number of people are going to become older in the future days who need this care (5). Before that, the fragile

health system of Somalia needs to be strengthened. Recommendations include the following; to install a strong surveillance system across the country, to ensure extensive health education for healthy lifestyle for all, to raise awareness among the stakeholders, particularly the government for the strong commitment towards a stronger health system needs to be triggered out. In conclusion, it is imperative to introduce a robust plan with short, mid and long-term issues in order to deliver quality and affordable health services to older people in Somalia.

## **Authors' Contributions**

A. H. B., F. M., B. A. H., and S. R. collectively contributed to the conceptualization and writing of the letter. A. H. B. initiated the idea and drafted the first version, highlighting the ageing situation in Somalia and the emerging demand for geriatric care. F. M. and B. A. H. provided data on the healthcare infrastructure in Somalia and its capacity to handle geriatric care. S. R. reviewed the manuscript, offering insights on policy implications and recommendations for addressing the geriatric care gap. All authors reviewed and approved the final submission.

#### **Transparency Statement**

Data are available for research purposes upon reasonable request to the corresponding author.

## Acknowledgments





We would like to express our gratitude to all individuals helped us to do the project.

#### **Declaration of Interest**

The authors report no conflict of interest.

## **Funding**

According to the authors, this article has no financial support.

#### **Ethics Considerations**

Not applicable.

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