

# **Report of Qualitative Research on the Communication Channels in Use in Somalia**

July-December 2000

Submitted to UNICEF-Somalia

By

**Shanti Risal Kaphle**  
Consultant

## Summary

Almost half a decade has been passed since UNICEF-Somalia has extensively expanded its program from emergency support to sustainable quality improvements in the life of women and children of Somalia. Various studies (e.g., KAP study and MICS) conducted in the past have indicated that no significant changes and improvements have been occurred despite the considerable interventions aimed at improving the public health, education, water and sanitation. The studies have indicated the problems related with knowledge, attitude, and practices revealing the existence of misperceptions and wrong believes and harmful practices having continuous negative impact on the life of women and children affecting their right to adequate quality of life. Further, the studies have made it clear that elimination of misperceptions, wrong believes, and harmful practices is necessary for positive changes in the society. In so doing it is important to reach different groups of population with right and appropriate information and messages through the various channels of communications, which can intervene and convince people for evolution of behavior. As a result, necessity of an assessment of the existing channels, access of different population groups to such channels, and identification of the right and main channels to reach the different population groups was felt. Realizing the necessity an in-depth qualitative research study was conceived and conducted from July to December 2000.

The study has focused to solicit in-depth qualitative information on the traditional and other channels of communication existing in Somalia. The purpose of the study was to identify the most appropriate and specific channels to be used as the main channel to disseminate appropriate and proper messages and information. And to assess the impact of the information with a view to enable parents, households, and community to work together to improve the quality of life.

The study was guided by the qualitative research technique and focused on exploration of insider's views/opinion, and collection of information from multiple sources. The study not only assessed the existing channels of communications in Somalia but also assessed the preferred channels of the different target groups to receive information on various issues like health and hygiene, reproductive health, circumcision, immunization, water, education, and rights. An effort was endeavored to assess the types of information given and types of information in need on the mentioned issues, how far the information are being implemented as per the need, and if any change has been brought in the practice by the information received.

The study is nationally represented including the urban, rural, and nomadic settlements of the population. The information obtained from the qualitative research indicates that Somalia being an oral society, people are more receptive to the oral and other traditional interpersonal channels than the print forms of communication channels. Religious institutions/Imams have specific importance as the sources of information and have authoritative and convincing hold on the community. Further, the information obtained has repeatedly emphasized that acquired knowledge needs wide support of capacity, empowerment and accessibility to implement in the practice in order to a bring change.

The study has revealed that disseminated information has succeeded to increase the level of knowledge and awareness but the awareness has not been reflected in the practice, which basically suggests three main reasons.

- (I) Belief of the people that the knowledge they have is enough and do not need any further information, which consequently is perpetuating the negative practices also.
- (II) Incapacity of the people to use the acquired knowledge in lack of equity. For instance, people are aware that both the girls and boys have equal right to education but it is not reflected in the case of the girl's education in lack of school in the accessible distance and friendly time and environment of the existing schools. Similarly, in the case of potable water, almost all target groups have expressed their knowledge that how water could/should be purified but negligible number of people are using the knowledge they have because of the unaffordable and expensive water purifying substances and the process.
- (III) Empowerment and capacity building of the people are equally important enabling them to implement their awareness in the practice. Empowerment is not limited to the economic aspect only but also covers the cultural, social, and political aspects. Moreover, sporadic intervention of information and program is not enough to bring a change. Intensive intervention with participatory approach in certain intervals, in phases, and in progressive manner is necessary to improve the quality of life and to achieve the expected change.

❖ **Summary of the findings and recommendations:**

1. **Rating of the existing channels:**

**Major findings:**

- Across the country radio is the most popular and commonly used channel whether or not it has been the first choice of the target groups. It is the most affordable and accessible channel in use. Afternoon and evening is the most suitable time for the radio listening.
- Despite its high popularity radio is commonly used for the news updates of political and other current affairs rather than the educational information on various issues.
- Disparity in choices of preferred channels is high among the target groups of different population settings (urban, rural, and nomadic) compared to the disparity between the zones.
- Among the female population interpersonal channels are more popular.
- Print media are not popular enough in all target groups except the newspapers.
- In lack of support, skill development, return outcome, and access to the audiences traditional channels of art forms are losing its popularity.
- Religious institutions (mosque, religious leader, and gatherings) have important role in disseminating information across the country.

**Recommendations:**

- Using the high popularity of radio important messages need to be aired through out the year during the prime time as it is basically used for news.
- Female targets should be reached intensively through interpersonal channels.
- Men should be targeted adequately with appropriate information, as they are one of the major sources of information for the family in the rural and the nomadic areas.
- Traditional channels of art forms need overall support and strengthening because they have built-in acceptance of the society and still could play a major role for information dissemination in the rural and the nomadic areas. Further, the package of information for such channels should be designed in a progressive manner so that the channel could be used in a certain intervals of time and the messages will not be forgotten by the target groups.

## **2. Health and Hygiene:**

### ***Major findings:***

- ◆ There is not much disparity in preference of channels, use of the existing channels and health practices among the zones.
- ◆ Malaria, diarrhea, TB, anemia, malnutrition and measles are the most common illness in all settlements. Most of the target groups in all population groupings are aware/informed about the common illness of their community, its causes, and prevention. Furthermore, youths (both boys and girls) are more informed/aware about the causes and prevention of common illness than their elders and the mothers. Despite adequate information on prevention the diseases are rampant.
- ◆ To be informed about the disease is not enough to bring changes in health practices and behavior. Accessibility, affordability, and physical presence of health services have direct impact on health practice and behavior; and are major causes of non-implementation of the knowledge the people have. For instance, to control malaria knowing that what can control it is not enough; people should have ability to buy mosquito net, medicine, and insecticides as well.
- ◆ Radio, mobile microphone, health centers, and the religious leader are commonly preferred channel by all target groups. However, in rural and nomadic area experienced fellow persons for adult groups and parents for young groups have important role in providing firsthand information in need. Specially, in the rural and the nomadic settlements religious healer and traditional healer have specific space, and are in need of reliable information on health.

### ***Recommendations:***

- ◆ Radio and the mobile microphone should be massively used for information dissemination on health education and campaigning.
- ◆ To reach the rural and the nomadic population both modern and traditional channels should be used.
- ◆ Mosque, religious leader, and community leaders should be empowered on health teachings/information sharing.
- ◆ Realizing the popularity of the TV and video parlors such channels should be provided appropriate package of information on health awareness and education.
- ◆ Health centers and workers should be targeted with appropriate information, as they are one of the main sources of information for many target groups specially, in the rural and the nomadic areas. Further, health workers should be empowered with the necessary physical support.
- ◆ A survey should be conducted to identify the locally available methods of prevention, so that acquired knowledge could be applied as well.

## **3. Immunization:**

### ***Major findings:***

- ◆ Target groups in all population groupings are generally aware of the importance of immunization. Still people are in need of specific information about the types of the vaccines covering the benefits, immediate side effects and the dangers a person could face if not immunized.
- ◆ Women target groups from the rural and the nomadic areas have reservation and misperception on immunization.

- ◆ Specially, in the rural and the nomadic areas traditional channels like religious leader, community meetings, Quranic School, and teashop have specific role to convince people.
- ◆ Radio, mobile microphone, health center and the religious leaders have equal preference of the target groups to receive information on vaccination.

***Recommendations:***

- ◆ Although the radio and the mobile microphones are the main channels informing people about immunization, however, traditional channels should also be strengthened with appropriate and specific information.
- ◆ Firsthand information sources like parents, experienced person of the community, religious leaders, and also the health center should be well informed to help people receiving right and appropriate advice/information.
- ◆ Specific package of information should be developed and disseminated on regular basis targeted to build the confidence of the people and mitigating the reservations.

**4. Reproductive Health:**

***Major findings:***

- ◆ Experience of elderly mothers has specific role in reproductive health. The rural and the nomadic women are less informed about the reproductive health than the urban women are. There is general lack of adequate pre and post-natal care.
- ◆ Varieties of modern and traditional channels like radio, mobile microphone, MCH, doctor, religious leaders, mosque, mother, and teashop etc., are preferred by the different target groups. However, only those channels in easy access and confidence would be contacted to seek advice in need.
- ◆ Despite their important role elderly women are not very much concerned to receive and learn new but useful information because of the belief that they have adequate knowledge to deal with the problems of the reproductive health.
- ◆ Men are the ultimate sources of advice and women would follow their advice in need indicating the enormous dependence of women and limitation of their access to available health services. Use of health service depends how the man of the family perceives it.

***Recommendation:***

- ◆ Elder generation should be targeted more with appropriate information on reproductive health, focused to convince them about the importance and usefulness of the information they are receiving, so that their know how will be helpful for the younger generation and to bring a change in health practice.
- ◆ Elder mothers, community elders, religious leader, and midwives should be well informed on the reproductive health issues.
- ◆ The rural and the nomadic areas need more regular intervention with specific information on reproductive health. People should be educated that it is an important matter to build a healthy future rather than something shameful to talk about.
- ◆ Men and the religious leaders in all population settings should be given reproductive health education using their preferred channels.

**5. HIV/AIDS:**

***Major findings:***

- ◆ Despite high number of people in all target groups who have heard about HIV/AIDS, people are in need of detail, educating and awareness raising information on HIV/AIDS covering its reasons, causes, symptoms, prevention, management of infected person etc. None of the study groups reported having knowledge on prevention, symptoms, and management of the infected person.

- ◆ Both modern and traditional channels are disseminating information on HIV/AIDS, yet there are misperceptions mitigating the chances of behavior change.
- ◆ In the rural and the nomadic areas interpersonal channels are more used than one way information disseminating channels since the rural and the nomadic people are in less access to printed educational information. Consequently, people have to rely on person to person information sharing providing chances of distortion of information. Therefore, traditional interpersonal channels need to be more informative and authoritative in these areas.
- ◆ There are certain kinds of misperceptions in all population settings and among all target groups, which need to be addressed.
- ◆ Messages in forms of Slogans are not enough; people are in need of elaborated and educating information in order to understand adequately the problem of HIV/AIDS.

***Recommendations:***

- ◆ Existing local media of mass communication should be strengthened with appropriate package of information on HIV/AIDS so that more people can be reached.
- ◆ Use of traditional interpersonal channels should be strengthened with more authoritative and educational information on HIV/AIDS in the rural and the nomadic areas.
- ◆ Religious institutions should be strengthened and equipped with detail educational information on HIV/AIDS.
- ◆ The Qurtanic Schools and the formal schools should be trained and equipped with the appropriate information in order to reach the youths and the younger generations.

**6. FGM:**

***Main Findings:***

- ◆ The focus of the disseminated awareness information are basically on health impacts on girls and women as they are the victims of the age old practice, however, the affect on family life and other implications of the practice have been over shadowed.
- ◆ Target groups are receiving information from the religious institutions that the Sunni circumcision is good because it does not have health problem, it is allowed by religion and should be continued. Consequently, awareness information whatever is disseminated has created an environment of confusion.
- ◆ A major change brought by the information disseminated is shifting the traditional practice to the Sunni circumcision but has not convinced people for the total eradication.
- ◆ Youth girls in all population groupings rely more on their mothers for receiving information on FGM than any other channel indicating the decisive roles of mothers and grand mothers on FGM, and having a direct link as the information channel. Further, notwithstanding the realization of the complications and pain young girls are not in the position to deny the practice.
- ◆ Men and women of all age groups are in consensus that total eradication is not possible, only few adult women and youths have agreed on total eradication.
- ◆ Religious leaders, mosque, and radio are the commonly preferred channels to receive information on FGM, in all population settings.

***Recommendations:***

- ◆ Information on total eradication of FGM needs to be emphasized while discussing about the problems and impacts of FGM.
- ◆ Mobilization of religious institutions should be enhanced with strengthened capacity on religious and cultural arguments of circumcision.

- ◆ Coordinated package of information and messages should be developed in order to mitigate the confusing and contradicting stories on types of circumcision.
- ◆ Mothers and grandmother are in the position of gatekeepers and are in need of detail information on FGM including its religious, economic and social aspects.
- ◆ The strategies for the total eradication should take an integrated approach targeting the all three generations (elder, adult, and young) with appropriate package of information.

## **7. Education:**

### ***Major findings:***

- ◆ All men and women of all age groups are aware of importance of education.
- ◆ All men and women of all age groups have positive view on providing equal education opportunity for girls. Despite the unanimous acceptance of girl's education, surprisingly this positive attitude does not correlate with the existing high dropout rate and low female literacy rate of Somalia.
- ◆ Almost all of the groups of men and women mentioned importance of girls' education in the context that they are the mothers of tomorrow rather than an individual in need of over all development who can play a major role in building the nation.
- ◆ Awareness raising information are reaching to the people, however, to achieve remarkable change physical facilities are equally important and need to be enhanced, specially, in the rural and the nomadic areas.
- ◆ Information encouraging the adult education is needed in all population settings.
- ◆ Most of the video parlors interviewed as the key informants have expressed their willingness to include educational videos in their shows.

### ***Recommendations:***

- ◆ Educational priority should be enhanced to the rural and the nomadic areas. Package of information to improve education, encouraging basic education, and duties of the stakeholders to promote education need to be disseminated using audio/visual and interpersonal channels.
- ◆ Girls' friendly time and environment in the existing schools, and the physical presence of the schools should be enhanced in all population settings and information should be disseminated widely. Awareness information on girls' education should highlight the girl as a responsible person of tomorrow.
- ◆ Educational videos highlighting the importance of education, and also giving information on various issues like health, HIV/AIDS, environment improvement, social development, rights of children and women, and role of the stakeholders etc., should be produced for dissemination not only for the agencies but also for the various target groups.

## **8. Water and Sanitation:**

### ***Major findings:***

- ◆ All target groups are more or less aware of the differences and consequences of safe and unsafe water for drinking and cooking.
- ◆ Most of the target groups are not implementing the knowledge they have but some of them casually implement the information depending on the availability of water and out break of diseases.
- ◆ Radio, mobile microphone, health center/worker and religious leader are the commonly preferred channels to receive water- related information across the country and target groups. In the NW teashop where men gather to chew chat has acquired an important space as one of the channel to receive information.

### ***Recommendations:***

- ◆ Awareness information should emphasize on purifying the water no matter how little is available for drinking and not only during the outbreak of diseases.
- ◆ Awareness should be supported with enhanced access to water-purifying substances also making them affordable in all population settings.
- ◆ Appropriate knowledge should be given to use water- purifying substances. Locally available methods of the water purifying need to be explored and introduced.

## **9. Rights Perspectives:**

### ***Major findings:***

- ◆ Perception of human rights is not very clear among the target groups. Only some of the urban and very few of the rural target groups are aware of basic rights in all zones. The nomadic population has negligible concept of rights.
- ◆ Most of the women target groups in all zones are not aware of their rights and even do not know if any rights are missing.
- ◆ Contradicting to the perception of rights most of the target groups are in the view that women are not made equal by the religion and are eligible for only those rights, which are allowed and accepted by the religion. And to look for equality and equal rights for women is something contradicting with the religion.
- ◆ Religion and the religious leaders are the basic sources of information on rights issues. Islamic teachings and instructions on rights and duties of men and women are the foundation for conceptualization of rights.
- ◆ Almost all of the target groups preferred radio, religious leader, mosque, and awareness raising meeting to receive information on rights issues.

### ***Recommendations:***

- ◆ Awareness raising information needs to be enhanced across the country highlighting the compatibility of universal human rights and the Islamic protection, where ever is possible.
- ◆ The rural and the nomadic population should be targeted with appropriate information on rights.
- ◆ The religious institutions and the community leaders should be strengthened with capacity and information on rights and mobilized for awareness raising on rights. As the religious leaders have major role in dispute settlements related to family matters, therefore, their understanding of basic principles of human rights can play an effective role on realization of women and children's rights.
- ◆ Mass media should be adequately used for awareness raising and advocating human rights.

## **Report of Qualitative Research on Communication Channels in use in Somalia (24 July- December, 2000)**

**-Shanti Risal Kaphle**

### **1. Introduction:**

Society is a form of communication and relationship, through which experience, ideas, and opinion are described, shared, modified and preserved. Sharing of ideas consists of many parts but the two most important aspects can be identified. The first is the sharing of facts and information; and the second is the sharing of values. The need to share facts, information, and values is basic and inherent in human nature. This need has been used to develop human cultures, ideas, socialization, experiences, civilizations and so on. Further, the need has been also used to preserve the culture, to change social behavior, and to improve quality of life.

For this sharing process various modes of communication play a crucial and important role in any community and society. Communication today is increasingly seen as a process through which the exchange and sharing is made possible. Proper communication process empowers people in making rational decision, which ultimately helps to bring positive changes to attain quality of life.

In many societies and communities, there do exist various modes of communication. Generally all kind of society have their traditional communication channels, which exist in the form of interpersonal channels and art forms of channels. Interpersonal channels include individual to individual communication or group communication like community gatherings, religious gatherings, social events etc., where as art forms include song, poetry, drama, music, folk stories, dances etc.

Further, modern forms of communication are also functioning in all kind of societies. Modern communication channels include all the electronics and print media of communication like radio, newspapers, magazines, posters, television, film, video, and audiocassette etc.

Each of these communication channels has specific role, target and audiences as per its content and objectives. Each of these channels plays specific role in sharing information, experiences, values, practices and behavior as well as to bring changes in the society. In any society different people have different preference for varieties of communication channels depending on the content and objectives of the channel.

In Somalia, UNICEF carried out a qualitative and quantitative research on knowledge, attitude, and practice (KAP) in NWZ during the period of September 1998-February 1999. Findings of the research highlighted that great disparities exist among the urban, rural, and nomadic population on how these groups perceive and understand critical issues related to wellbeing of women and children. The research also highlighted how misconceptions and wrong believes and harmful practices persist among those groups of population continuing the negative impacts on the daily life of women and children affecting their **right to quality life**. For instance, many people believe that HIV/AIDS does not affect Muslims, and it is wrath of the God for disobeying him. Further, the Multiple Indicator Cluster Survey (MICS) has

revealed that slightly more than 9 percent women stated that AIDS can be transmitted by mosquito bite and only 15 percent of women correctly believe that a healthy looking person can be infected. Moreover diarrhea is a major cause of mortality among children in Somali but still there is a common belief that a person can not die drinking water rather he could die without water.

The findings of the KAP survey has made it clear that to bring positive changes in practices, and attitude, it is necessary to eliminate existing wrong believes and practices in Somali societies. The one way to do so is to reach different groups of population with right and appropriate messages and information through various communication channels (including traditional and modern channels) existing in Somalia. Access to different population groups with appropriate message and information will also be helpful to ensure that positive changes in their attitude and practices are actually taking place enabling women and children to enjoy a healthy life.

The KAP survey and the MICS survey<sup>1</sup> held in Somalia included a component to assess the most commonly used communication channels in Somalia. These surveys identified that the most common source of information on social and community developments was oral channels in rural and nomadic areas where as Radio was more common in the urban or semi-urban areas. The KAP survey (NWZ) further revealed that Radio is mostly used by men where as women either do not have access/ possess a radio or they do not have time to listen radio. Even if men are the main users of radio they are more interested in information on current affairs and politics. These findings reveals the fact that only a small group of population have access to selected information where as a big group of population either do not have access to information related with their health, hygiene, sanitation, education and so on or they are not reached by the existing communication channels. Consequently a considerable size of population miss the opportunity to have useful information and messages which, can facilitate and enable them to bring changes in their practices and believes of negative impacts. Further, the coverage of above mentioned studies were rather limited and was focused on some other specific areas.

Hence, it was realized that there is a need to assess the existing communication channels in use in Somalia in order to reach the different groups of population with appropriate and correct information and messages to enable parents, households, and communities to work together to improve their quality of life. With this felt need UNICEF-Somalia planned and conducted a qualitative study to identify the proper communication channels for the dissemination of correct and appropriate messages and information in the area of health & hygiene, immunization, education, water, sanitation, and to raise awareness on rights issues in all three zones of Somalia.

## **2. Purpose of the study:**

The aim of the study is to contribute to develop communication strategies to reach the different groups of population to bring positive changes and to improve quality of life of children and women of Somalia. Hence, the purpose of the study was to solicit qualitative and in-depth information on the traditional and other communication channels existing in Somalia. The study also focused to identify the most appropriate and specific channels to be used as main channel to disseminate the appropriate and proper messages on health & hygiene, water & sanitation, education, and rights perspectives to different groups of population.

---

<sup>1</sup> MICS survey was conducted in NEZ during August 1997-March 1998, and in NWZ during 1997.

## **2.1. Specific objectives of the study:**

- To identify and to prepare an inventory of the existing and most commonly used communication channels in Somalia.
- To assess the understanding of the audiences/ target groups and their rating of the existing channels in terms of content of the messages/information disseminated, popularity, and trust.
- To assess the impact of the messages/ information in the daily life of the audience/ target groups.
- To assess the accessibility of existing communication channels to the target group of population
- To identify the constraints of the target groups to use/ access the existing communication channels.
- To make recommendations for the use of appropriate communication channels and the regional communication disparities to be addressed in communication strategies.

## **3. Research Methodology:**

The dearth of information on communication channels in use including traditional and modern channels required a study that is exploratory in nature. The study was guided by the qualitative research technique. In conformity with qualitative research the study focused on flexibility, exploration, insiders views and collection of information from multiple sources using variety of techniques, and in-depth analysis of the information.

### **3.1. Study techniques and tools:**

Exploration for the information included identification of various modes of communication channels in use in Somalia paying special attention to regional disparities of existing channels, access, and understanding of the target groups.

The technique used included key informant interviewing and focused group discussions and some visual aids to collect information. The applied technique emphasized more on participatory methodology.

A set of unstructured or semi-structured questioners was developed for interviews and a written topic guideline for focus group discussion was developed with flexibility of required changes and probing by the interviewers. The questioners and the discussion guideline focused to assess and acquire intensive information on areas of focus mentioned below.

The questioners and the guidelines were developed suitable to collect information on health, nutrition, water and sanitation, education, immunization, FGM, HIV/AIDS, reproductive health, and rights in consultation with the respective sections in UNICEF- Somalia.

### **3.2. Operationalization:**

Definition of the various terminologies used in the study always enable proper understanding of the objectives of the research. Hence, for the purpose of the study the term 'Communication', 'Channels', and 'Source of information' were defined as following.

- **Communication:**

Communication is an interactive process by which the exchange and sharing of experiences, ideas, facts, values, behaviors, tradition, and knowledge are established, maintained, and altered. It is a process that will assist in increasing participation of people on the issues related to them. Communication always requires four elements-the source of information, the message, the destination (the audience or receiver), and the source to disseminate (channel) message/information.

- **Channel:**

For the purpose of the study communication channels are those sources through which the message/information are reached to the destination (audience or receiver) and people at all levels of society communicate with one another.

Communication channels for the study includes both traditional and modern forms of communication.

The traditional channels include the interpersonal and art form of communication. The interpersonal channels include individual to individual communication or group communication like community gatherings, religious gatherings, social events and ceremonies etc. likewise, art forms include song, poetry, drama, music, dances etc. these sources can also be defined as 'oral' channels.

The modern forms of communication include all the electronics and print media of communication like radio, newspapers, magazines, posters, television, film, video and audio-tapes etc.

- **Source of information:**

For the purpose of the study the term source of information includes all those source from which various channels of communication derive/gain information and messages to reach the audience in the community.

### **3.3. Sources of Information for data collection:**

Being a qualitative study, the study has solicited information from multiple sources. The sources included target population from 15- 70 age groups. This group of population was categorized in three groups. First, the youth group which comprised young boys and girls of 15-25 age group; second, the active adult group which comprised men and women of 26-50 age groups; third the elderly women group which comprised the grand mothers of 51-70 age groups.

The categorization of targeted population is based on the potentiality of each group as a separate entity functioning as sources of information or channels to communicate messages/ information in the family and community and the potential audiences as well. For instance, youth being a very active group has been playing very important role in many societies as messenger to the family, to the peer groups, and as a future generation to implement the knowledge they have. As well as grand parents have specific role to pass the values and practices to the younger generation and to preserve the tradition. The adult group is the most active and productive

groups with opportunities to interact with many sources of information, which needs to be well informed to lead their family and communities for betterment and to set an example for the future.

Somalia being an oral society each of the category has important role in message dissemination in the community. And the thrust of the study is to assess what these groups are receiving; from where and whom; how they understand/ perceive what they have received; what affect and impact it had; and how they disseminate to others.

The key informant interviews further supported the variation of information sources for the study. The group of the key informants comprised community leaders, religious leaders, L/NGOs and CBOs, and media of mass communication. Equal representation of women as key informants was in focus while identifying the key informants in all population groupings.

In order to assess commonly used communication channels, source of information, content of message/information, and audiences at least five local NGOs in each study Zone (total 15) were interviewed. While selecting L/NGOs equal representation of women's groups was also considered. Further, to the possible extent locally functioning media of mass communication were contacted as well to solicit information on sources of their information and audiences. Derived information from this group contributed to identify the largely accessible channels of communication.

### **3.4. Gender perspectives:**

The study took a gender-balanced approach in order to take into account the perspectives of girls and boys, men and women, as each of the group may not have same perspectives. Gender-balance and soliciting information from gender perspectives was the foundation of focus group discussion and all the interviews. However, the equal gender representation in the interviews with the key informants could not be properly followed because women are not considered as community leaders and religious leaders (according to Islam women can not lead the prayer) in Somalia.

### **3.5. Pre-test and finalization of questioners:**

A Somali artist sketched some of the traditional and modern channels of communication in use in Somalia, which were used in the pocket charts as visual aid for rating of the existing channels. Prepared sketches were also pre-tested in order to assess how far the target groups of the study will understand the sketched pictures of various channels of communication.

The questioners and the guideline were translated into Somali language and pre-tested. Pre-test was conducted in Somaliland (NWZ) only. For the pre-test of Focus Group Discussion guideline, three different categories of target groups, i.e., one group of men in urban area, one group of women in rural area, and one mixed group of youth in urban area were visited. Among the key informants, one video parlor, one community leader and two L/NGO in Hargeisa (NW) were met and interviewed. The questioner and the guideline were improved as required after the pretest. The M & E officers from the field offices jointly edited the questioners and guidelines in Somali version to have a common word and understanding in all zones.

### **3.6. Selection and training of the Research Team:**

Required numbers of enumerators were selected in each Zone following the desired qualification, gender balance approach and with some previous experience of qualitative research. Each research team was formed of three members comprising one facilitator, one co-facilitator and one note taker.

In NEZ total nine enumerators were selected, i.e., three teams covering three clusters of the zone; in NWZ total six enumerators were selected, i.e., two teams covering five clusters of the zone. Likewise in CSZ total 30 enumerators were selected, i.e., ten teams covering 13 clusters of the zone.

In NWZ, realizing the difficulties in finding enumerators with basic knowledge of qualitative study, only two teams were selected for the fieldwork.

The selected research teams were trained for three days. First training for enumerators was conducted in Hargeisa (NW) jointly by the monitoring and evaluation (M & E) officers from NEZ and CSZ and the consultant. Enumerators in other zones were trained later by the M& E officers of the respective zones.

The training covered the qualitative research method; purpose of the study; detail understanding of the study guidelines and questioners; methodology of focus group discussion; target groups and sample size; screening of the target groups; clustering of study locales; and organizing the fieldwork. The research teams were also given time to practice the techniques they learnt in the training. During the practical the teams were observed closely and later the problems and missing process were discussed, which helped the team to realize the importance of following the research methodology for the accuracy of the information. **See Annex ... for desired qualification of the research team, roles and responsibilities of the team members.**

### **3.7. Clustering and identification of study locales:**

The definition for the various population groups was used confirming those used in the MICS surveys in NWZ and NEZ. The urban population grouping includes settlements with 10,000 or more inhabitants, as well as a few settlement that have somewhat less inhabitant but as district capitals have an urban character. The rural population grouping includes settlement with less than 10,000 inhabitants with agro-pastoralist settlement; and the nomadic population grouping concerns those people who moves from place to place on a seasonal basis, staying on average less than four months in one location.

The study is conducted in national basis covering all three administrative zones of Somalia. Considering each of the three administrative zones as a separate study locale. The mode of clustering of the sample size has followed the KAP survey for NWZ and MICS survey for NEZ and C& S dividing whole targeted population size in 8 urban clusters, 8 rural clusters and 6 nomadic clusters.

In NWZ two urban, two rural and one nomadic cluster were covered; in NEZ one urban, one rural and one nomadic cluster were covered; and in Central & South five urban, five rural and three nomadic clusters were covered. The selection of study clusters were done purposively keeping in mind the geographical diversity, socio-economic structure and size of the population and regional disparities in each cluster. Although in the beginning random selection of the

clusters was planned. Later it was realized that being a qualitative study purposive selection based on economic, geographical distribution, and population groupings will be more appropriate for the study so that different settlement of population as well as regional variation will be covered and represented by the study. Clustering was done in participation of the research teams in all zones.

For details of clusters and number of Focus Group Discussions see Annex I.

#### **4. Organization of field work:**

Overall management of the study was the responsibility of the M&E section UNICEF- Somalia where as work on the ground was co-managed by M&E officers in field offices and the consultant. The study design and research tools were shared with the program sections on health, education, communication, water and sanitation, HIV/AIDS, and gender for their inputs before the fieldwork.

The selected research teams conducted the fieldwork using the learnt techniques. One staff member of UNICEF, field coordinators, and the consultant supervised all teams in all zones. Whole fieldwork was carried out on the basis of detailed fieldwork plan and was conducted in three weeks time (15 September- 10 October).

In all study sites one local person was hired to help the team to identify focus group participants, venue and other logistic arrangements. Generally the reception of the research teams in all study clusters were cordial except in few sites in NWZ. In one rural cluster of NWZ called Dhoqoshay in Togdheer region, where the local health post person turned the community against the research team and they were chased away after one day of work, therefore the team were sent to another rural cluster called Gidhays in Togdheer region. On the other hand, the other team working in Sool and Sanag region in NWZ also faced a problem due to the recent political dilemma of "Somalia". The team could not go to the selected nomadic cluster in Sool region, therefore another nomadic cluster under Sool administration was chosen.

The pocket chart prepared from the locally available material was used to display the sketched pictures of existing channels of communication and for voting. The pictures were well understood by the participants in most of the urban areas however, in rural areas particularly with women groups it needed an explanation, because mostly the rural women were found bit shy to come forward and have a closer look of the pictures.

##### **4.1. The process of Data collection:**

Data collection process mainly focused on the following areas:

- Identification of communication channels in use at present in all the targeted categories and population groupings (urban, rural, nomadic);
- Preparation of an inventory of all forms of the existing communication channels;
- Rating of the existing channels in use;
- Sources of information/knowledge of target groups on water & sanitation, health & hygiene, education, reproductive health, immunization, FGM, HIV/AIDS, and rights perspectives;
- Response of the target groups to the current available information and communication channels, and the impact of the information;

- Preferred/ trusted channel of communication to receive information on health, immunization, reproductive health, FGM, education, HIV/AIDS, water and sanitation, and rights perspectives:
- Sources and content of information for various key informants
- Regional disparities to be addressed in the communication strategy.

#### 4.2. Data processing, analysis and report writing:

The objective of the study is to provide qualitative information; the initial information was collected in Somali in the form of field notes and FGD proceedings. Collected data and information was translated into English by professional translators in the field offices in each zone making sure that the translator translates verbatim not interprets the information.

The consultant did the final data processing, analysis, and report writing at Nairobi. Collected data was processed based on triangulation of the various sources, types of data and methods ensuring validity of data. The processed data has been analyzed giving an overall construction of the situation. Collected quantitative data has been given due weight in the analysis.

**Table: 1: Organization of Focus Group Discussion (FGD):**

Zone	Cluster		No. of participants as per cluster and target group					
			Eld. women	Adult women	Youth (G)	Youth (B)	Male	Total
NE	Urban	1	12	14	9	11	9	55
	Rural	1	12	12	12	11	11	58
	Nomadic	1	9=33	11=37	10=31	15=37	14=34	59=172
NW	Urban	2	20	20	21	19	16	96
	Rural	2	26	23	17	23	22	111
	Nomadic	1	8=54	8=51	10=48	9=51	10=48	45=252
CS	Urban	5	35	40	40	40	32	187
	Rural	5	30	32	33	36	31	162
	Nomadic	3	23=88	18=90	21=94	18=94	17=80	97=446
<b>Total</b>		<b>21</b>	<b>175</b>	<b>178</b>	<b>173</b>	<b>182</b>	<b>162</b>	<b>870</b>

In all three zones of Somalia total 870 persons from five targeted groups participated in the focus group discussions. Out of that 338 persons are from the urban cluster; 330 persons from the rural cluster; and 201 persons from the nomadic cluster. Out of 870 persons, 172 are from the NE, 252 from the NW and 446 from the CSZ. Across the country 175 elderly women; 178 adult women; 173 youth girls; 182 youth boys; and 161 males were contacted in the focus group discussions.

Across the country 20 community leaders, 20 religious leaders, 20 video parlors, five local radios, 20 local NGOs/CBOs, and seven local newspapers were contacted and interviewed as the key informants.

## 5. Research Findings:

The research was conducted in all over of Somalia, covering the selected urban, rural, and nomadic clusters from all three zones. As mentioned elsewhere a guideline was used to conduct the focus group discussions and the key informants were approached with semi structured

interview questioners. The guideline has covered nine different issues to solicit in- depth information from the target groups. The findings of the study are analyzed issue-wise.

### 5.1. Rating of existing communication channels in use:

For the rating of the existing channels of communication a pocket chart was prepared from the locally available material. About 24 sketched pictures of traditional and modern channels were displayed in the pocket chart. Scanned copies of the displayed pictures are annexed, *see annex II*.

At the beginning of the focus group discussion participants were requested to have a closer look of the pictures and were asked whether they understand and identify the displayed pictures. All the pictures were properly understood in general in all of the zones. Although in some of the rural and nomadic clusters some of the pictures of modern channels like leaflets, magazine, posters etc., needed an explanation. When the participants felt comfortable with the displayed pictures then they were asked to identify which of the displayed channels does exist in their community and whether they would like to add some other channels which they think are important and are in use in their community.

In all of the urban clusters participants were in agreement that most of the displayed channels do exist in their community and are in use more or less. According to the participants in the rural and the nomadic clusters most of the modern channels were not in use except the radio, mobile microphone, newspapers, and the posters to some extent.

In the urban areas many participants suggested to add market place, workshop, school, and training centers as other important channels of communication. In these places people have lot of opportunities to interact with and share information as well as to disseminate information.

Most of the women participants from the urban area emphasized on market place as an effective channel to give information to women audiences. Market place is one of the places, where many women spent most of their time doing petty business and at the end of the day they return home with lots of information to share with the family. These petty-business women are playing a double role as a target audience and as messenger of information.

On the other hand, youth girls and boys suggested adding workshop, school, and training centers as other important channels of communication. These groups of participants think they learn, receive, and share varieties of information in the workshop, schools and training centers. Water source point was another suggested place which many people think is an effective channel and provides opportunity to share information.

After the identification and addition of channels, participants were asked to vote for the most commonly used and popular channels in their community. Participants were given small blank cards as ballot and were asked to cast that in the pockets behind the pictures. The process was done democratically and participants were asked to use their opinion. When the voting was finished one of the participants was requested to count the votes. The rating of the channel in use is analyzed as per the target groups and population groupings as each of the target group has separate choice and voted for different channels.

*See Annex III for number of vote cast by target group, clusters, population groupings, and the zone.*

#### 5.1.1. Ranking of the existing communication channels:

**Table: 2: Most Popular channels by zones and target groups as per voting:**

NEZ	Target groups						
	Channels	Eld. women	Adult women	Youth (G)	Youth (B)	Male	Total

Radio	8	7	7	13	10	45
Mosque	4	4	5	6	3	22
Religious meeting	-	9	2	5	-	16
Women's meeting	6	3	-	-	-	9
NWZ	Target groups					
Channels	Eld. women	Adult women	Youth (G)	Youth (B)	Male	Total
Radio	11	17	17	13	11	69
Mosque	14	5	7	3	12	41
Tea shop	3	5	5	3	12	27
Community meeting	6	2	0	4	4	16
CSZ	Target groups					
Channels	Eld. women	Adult women	Youth (G)	Youth (B)	Male	Total
Radio	31	38	41	45	39	194
Mosque	15	13	11	16	16	71
Mobile microphone	7	10	11	17	9	54
Community meeting	11	8	4	2	4	29

The table shows that in all zones radio is ranked on the top and the mosque is voted for the second rank, whereas there are disparities on third choice of the channels among the zones. As the table shows in the NE religious meeting is in the third place; in the NW teashop is ranked third; and in the CSZ mobile microphone is ranked on the third place. In all zones meeting of the community or women's specific meetings have given important place as the source of information. The table also indicates that radio is more popular among the youth groups.

In the NE out of 172 Focus Group participants from all of the three population groupings 45 persons voted for the radio on the first rank; mosque is ranked second with 22 votes and the religious meeting is ranked third with 16 votes. In the CSZ also Radio has been ranked first. Out of 446 Focus group participants CSZ, 194 voted for the radio; mosque is ranked second with 71 votes; and the mobile microphone is ranked third with 54 votes. In the NW, out of 252 FGD participants 69 persons has voted for radio; 41 persons voted for the mosque; and 27 persons voted for the teashop as the most popular channel of communication.

**Table: 3: Most popular channels by zones and population setting as per voting;**

Channels	Zone											
	NE				NW				CS			
	Urban	Rural	Nomadic	S. Total	Urban	Rural	Nomadic	S. Total	Urban	Rural	Nomadic	S. Total
.Radio	13	21	11	45	40	19	10	69	104	87	3	194=308
Mosque	9	1	12	22	10	21	10	41	16	28	27	71=134
Mobile microphone	-	-	-	-	7	5	3	15	29	16	9	54=69
Community meeting	1	3	6	10	7	6	3	16	1	3	25	29=55
Religious meeting	9	6	6	21	4	-	2	6	-	-	-	=27
Tea shop	-	-	-	-	1	26	0	27	-	-	-	=27
Quranic school	2	4	8	14	3	3	5	11	-	-	-	=25

Women's meeting	-	-	9	9	-	2	1	3	-	-	-	=	12
-----------------	---	---	---	---	---	---	---	---	---	---	---	---	----

In the CSZ most of the urban and the rural target groups voted for the radio as most commonly used channels. Out of 187 urban participants 90 persons voted for the radio and out of 162 rural participants 82 persons voted for the radio where as in nomadic settlements only three persons voted for the radio. In the urban area mobile microphone is ranked second with 29 votes and the mosque is ranked third with 16 votes where as in the rural area mosque is ranked second with 28 votes and mobile microphone is ranked third with 16 votes. In the nomadic area the highest vote is given for the mosque as most popular channel with 27 votes; community meeting is ranked second with 25 votes; and the mobile microphone is ranked third with nine votes.

In the NWZ out of 96 urban target population 52 persons voted for the radio; out of 111 rural target population only 19 persons voted for the radio where as 26 persons voted for the teashop. Out of 45 nomadic target population 10 persons voted for the radio and the mosque. Similar to the other zones the rural and nomadic target groups have chosen the teashop and the mosque as their first choice rather than the radio. Many participants added MCH as one of the strong source of communication in the NW.

**The ranking of channels have indicated that despite the high votes radio is not the first choice of the rural and the nomadic population. Radio is more popular in the urban area in all zones where as in rural and nomadic area mosque and the religious meetings are more popular. Contrary to the NE and the CSZ teashop is rather popular in the NW. Similarly mobile microphone is more popular in the CSZ than in the NE and the NW. The table assures that channels are voted depending on the accessibility, affordability, reliability of information and the convincing power of the channels etc.**

**The ranking of channels has also indicated that across the country radio is the most popular and commonly used channel in Somalia, whether or not it has been the first choice of the each target group. Depending on the settlements, access, affordability, time, and age group, each of the target groups has separate choice as their preferred channel.**

The following charts explain the high ranked, most commonly used, and preferred channels of communication for each target group and in all population groupings (urban, rural, and nomadic) and zones respectively. While listing the high ranked channels of communication only first three channels with highest number of votes are included in the chart. The chart explains the most accessible channel and the suitable time for the each target group to use the high ranked channel. The chart also reveals the reasons for voting a particular channel and specific types of information looked for from the high ranked channel. **All the charts are based on the most agreed responses of the focus group participants. Dissenting opinions are included in the analysis.**

**Chart -1: Ranking of channels as per target groups, population settings and zones:**

NE- Urban	
Question discussed	Response of the participants

	Eld. women	Adult women	Youth (G)	Youth (B)	Male
Channel with high no. of votes	<ul style="list-style-type: none"> <li>Radio (1)</li> <li>Mosque and Newspaper (2)</li> <li>TV &amp; religious meeting (3)</li> </ul>	<ul style="list-style-type: none"> <li>Religious meeting(1)</li> <li>TV and Mosque(2)</li> <li>Radio (3)</li> </ul>	<ul style="list-style-type: none"> <li>Radio (1)</li> <li>Religious meeting and mosque (2)</li> <li>TV and Newspaper (3)</li> </ul>	<ul style="list-style-type: none"> <li>Radio and Mosque(1)</li> <li>TV (2)</li> <li>Public gathering and weekly magazine (3)</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphones (1)</li> <li>Radio and Newspaper(2)</li> <li>Quranic school and formal schools(3)</li> </ul>
Reasons to vote for particular channel	<ul style="list-style-type: none"> <li>Affordable, accessible and has wide coverage</li> <li>Anybody can get info. From radio even if the person does not own it</li> <li>It has become a part of Somali life</li> <li>Gives plenty of info. From all over the world</li> </ul>	<ul style="list-style-type: none"> <li>Preference to religious info.</li> <li>Religious meeting and the Mosque give lot of info. About this world and hereafter</li> <li>To have a radio is common, but mostly info. on current affairs are useful</li> <li>TV is expensive and in affordable although it is informative and entertaining</li> </ul>	<ul style="list-style-type: none"> <li>Radio affordable</li> <li>It has become a part of culture</li> <li>Can receive new things from radio</li> <li>Religious meetings are important for every Muslim</li> <li>TV can be watched in parlors also</li> </ul>	<ul style="list-style-type: none"> <li>Radio is available everywhere</li> <li>Both illiterate and literate can use radio</li> <li>Even inside the Mosque</li> <li>TV is everywhere in the home and in the parlors</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone attracts people</li> <li>Ideal to inform about outbreak of disease and emergencies</li> <li>Radio is available every where even in the bush</li> </ul>
Most accessible channel among the high ranked channels	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>TV</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>TV</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Radio is most accessible in the households</li> <li>School</li> <li>newspaper</li> </ul>
Suitable time to use high ranked channel and frequency of use	<ul style="list-style-type: none"> <li>Afternoon and night</li> <li>Daily</li> </ul>	<ul style="list-style-type: none"> <li>Friday and prayer time</li> <li>Afternoon and night for radio</li> </ul>	<ul style="list-style-type: none"> <li>Leisure time*</li> </ul>	<ul style="list-style-type: none"> <li>Leisure time</li> <li>Any free time</li> </ul>	<ul style="list-style-type: none"> <li>Leisure time</li> <li>Afternoon and nights</li> <li>Radio is used in daily basis</li> </ul>
Any other channel you use	<ul style="list-style-type: none"> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Quranic school</li> </ul>	<ul style="list-style-type: none"> <li>Quranic school</li> <li>School</li> <li>Religious preaching</li> </ul>	<ul style="list-style-type: none"> <li>Quranic school</li> <li>School</li> <li>Health centers &amp; story books</li> <li>NGO</li> </ul>	<ul style="list-style-type: none"> <li>Responses are not clear</li> </ul>
Types of message/info. looked for from the high ranked channel	<ul style="list-style-type: none"> <li>Update news of the world</li> <li>Tracing of the missing person</li> <li>Religious speech</li> <li>Info. concerned to women</li> </ul>	<ul style="list-style-type: none"> <li>Info. About the community</li> <li>War info.</li> <li>Info. About daily problems and concerned to women</li> <li>Religious matters</li> </ul>	<ul style="list-style-type: none"> <li>Religious preaching</li> <li>Health programs</li> <li>Sports</li> <li>General knowledge</li> </ul>	<ul style="list-style-type: none"> <li>Education and health</li> <li>About dangerous disease</li> <li>Prevention of AIDS</li> </ul>	<ul style="list-style-type: none"> <li>Political and health news</li> <li>Social affairs</li> <li>Any news update</li> <li>Human rights</li> </ul>

<b>NE- Rural</b>					
Question asked	Response of the participants				
	Eld. women	Adult women	Youth (G)	Youth (B)	Male
Channel with high no. of votes	<ul style="list-style-type: none"> <li>Mosque(1)</li> <li>Religious meeting and (2)</li> <li>Radio and traditional meeting(3)</li> </ul>	<ul style="list-style-type: none"> <li>Radio (1)</li> <li>Mobile Microphone (2)</li> <li>Religious meeting and TV(3)</li> </ul>	<ul style="list-style-type: none"> <li>Radio (1)</li> <li>Posters and Quranic school(2)</li> <li>Tea shop (3)</li> </ul>	<ul style="list-style-type: none"> <li>Radio(1)</li> <li>Religious meeting and mobile microphone (2)</li> <li>Video (3)</li> </ul>	<ul style="list-style-type: none"> <li>Radio (1)</li> <li>Posters and Quranic school(2)</li> <li>Tea shop(3)</li> </ul>

Reasons to vote for particular channel	<ul style="list-style-type: none"> <li>Mosque gives only good information</li> <li>Elderly mothers like to pray together and share information</li> </ul>	<ul style="list-style-type: none"> <li>Easiest and affordable channel</li> <li>Mobile microphone gives information on current events</li> <li>One can learn many things from religious meeting</li> </ul>	<ul style="list-style-type: none"> <li>Radio is affordable</li> <li>It is the biggest source</li> <li>Many people come to the tea shop and exchange information</li> </ul>	<ul style="list-style-type: none"> <li>Radio is available everywhere</li> <li>Radio informs about general situation of the world</li> <li>Mosque religious meeting clarifies important things</li> <li>Video is interesting</li> </ul>	<ul style="list-style-type: none"> <li>Radio is available everywhere even in the bush</li> <li>It gives all kind of information</li> <li>In tea shops there is lot of sharing and exchange of information</li> </ul>
Most accessible channel among the high ranked channels	<ul style="list-style-type: none"> <li>Mosque and religious leader</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque and religious meeting</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio is most accessible</li> </ul>
Suitable time to use high ranked channel and frequency of use	<ul style="list-style-type: none"> <li>Any leisure time</li> </ul>	<ul style="list-style-type: none"> <li>Afternoon and night for radio</li> <li>Friday and prayer time</li> </ul>	<ul style="list-style-type: none"> <li>Afternoon and night</li> </ul>	<ul style="list-style-type: none"> <li>Afternoon and night</li> <li>Fridays and Feasts</li> </ul>	<ul style="list-style-type: none"> <li>Afternoon and nights</li> </ul>
Any other channel you use	<ul style="list-style-type: none"> <li>Islamic scholars</li> <li>Elder men and children</li> </ul>	<ul style="list-style-type: none"> <li>Caravan</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Mobile Micro phone</li> <li>Religious preaching</li> <li>Community meetings</li> </ul>
Types of message/info. looked for from the high ranked channel	<ul style="list-style-type: none"> <li>Religious matters</li> <li>Info. concerned to women</li> </ul>	<ul style="list-style-type: none"> <li>BBC-Somalia</li> <li>Politics</li> <li>Health</li> <li>Social affairs</li> </ul>	<ul style="list-style-type: none"> <li>Different kind of information</li> <li>Politics</li> <li>Economics</li> <li>Health</li> <li>Water information</li> </ul>	<ul style="list-style-type: none"> <li>Religious preaching</li> <li>All kind of information about the world</li> </ul>	<ul style="list-style-type: none"> <li>Political and health news</li> <li>Any news update</li> <li>Religion concerned information</li> <li>Any information about the community</li> </ul>

NE- Nomad					
Question asked	Response of the participants				
	Eld. women	Adult women	Youth (G)	Youth (B)	Male
Channel with high no. of votes	<ul style="list-style-type: none"> <li>Women's meeting(1)</li> <li>Radio and Mosque(2)</li> </ul>	<ul style="list-style-type: none"> <li>Religious meeting(1)</li> <li>Mosque (2)</li> <li>Women's meeting(3)</li> </ul>	<ul style="list-style-type: none"> <li>Mosque &amp; Quranic school(1)</li> <li>Women's meeting(2)</li> <li>Traditional meeting(3)</li> </ul>	<ul style="list-style-type: none"> <li>Radio(1)</li> <li>Quranic school &amp; Mosque (2)</li> <li>Traditional meeting &amp; religious meeting (3)</li> </ul>	<ul style="list-style-type: none"> <li>Radio (1)</li> <li>Mosque (2)</li> <li>Traditional meeting(3)</li> </ul>
Reasons to vote for particular channel	<ul style="list-style-type: none"> <li>Women's meeting help to change ideas</li> <li>share new information received from male members of the family</li> <li>consult each other and discuss problems</li> </ul>	<ul style="list-style-type: none"> <li>religion is the only pillar of life</li> <li>get more valuable information</li> <li>get best information in the religious meetings</li> <li>best for information exchange</li> </ul>	<ul style="list-style-type: none"> <li>get education from there</li> <li>learn Quranic instruction on worldly and hereafter matters</li> <li>good and bad behavior are taught</li> </ul>	<ul style="list-style-type: none"> <li>Radio is available everywhere</li> <li>Radio informs about the world</li> </ul>	<ul style="list-style-type: none"> <li>Radio is available everywhere</li> <li>Everyone can listen it</li> <li>Radio is an effective informer</li> <li>It gives all kind of information</li> </ul>

Most accessible channel among the high ranked channels	<ul style="list-style-type: none"> <li>• Women's meeting</li> <li>• Mosque and religious leader</li> <li>• Radio</li> </ul>	<ul style="list-style-type: none"> <li>• Religious meeting</li> </ul>	<ul style="list-style-type: none"> <li>• Quranic school</li> </ul>	<ul style="list-style-type: none"> <li>• Radio</li> <li>• Mosque and religious meeting</li> </ul>	<ul style="list-style-type: none"> <li>• Radio is most accessible</li> </ul>
Suitable time to use high ranked channel and frequency of use	<ul style="list-style-type: none"> <li>• Weekly meeting time</li> </ul>	<ul style="list-style-type: none"> <li>• Friday and prayer time</li> <li>• Whenever there is religious gatherings</li> </ul>	<ul style="list-style-type: none"> <li>• School time and prayer times</li> </ul>	<ul style="list-style-type: none"> <li>• Leisure time</li> <li>• When news is aired</li> </ul>	<ul style="list-style-type: none"> <li>• Afternoon and nights</li> <li>• Fridays and Feasts</li> </ul>
Any other channel you use	<ul style="list-style-type: none"> <li>• Don't know</li> </ul>	<ul style="list-style-type: none"> <li>• Radio</li> <li>• Women's meeting</li> </ul>	<ul style="list-style-type: none"> <li>• Women's meeting</li> <li>• Radio</li> </ul>	<ul style="list-style-type: none"> <li>• Mobile microphone</li> <li>• Radio</li> </ul>	<ul style="list-style-type: none"> <li>• Community meetings</li> <li>• Mosque</li> </ul>
Types of message/info. looked for from the high ranked channel	<ul style="list-style-type: none"> <li>• Religious matters</li> <li>• Info. concerned to women</li> <li>• New information from outside the community</li> </ul>	<ul style="list-style-type: none"> <li>• Part of religious obligation</li> <li>• Islamic rules and difference between good and bad</li> </ul>	<ul style="list-style-type: none"> <li>• Different kind of information</li> <li>• Politics</li> <li>• Economics</li> <li>• Health</li> <li>• Water information</li> </ul>	<ul style="list-style-type: none"> <li>• Religious news and information</li> <li>• Poems, songs, news</li> <li>• African Week</li> <li>• Health program</li> </ul>	<ul style="list-style-type: none"> <li>• All kind of news update and Somali news</li> <li>• Religion concerned information</li> <li>• Do and don'ts of Islam</li> </ul>

### CSZ-Urban

Questions Discussed	Response of the target groups				
	Eld. women	Adult women	Youth (G)	Youth (B)	Male
Channel with high no. of votes	<ul style="list-style-type: none"> <li>• Radio</li> <li>• Mosque</li> <li>• Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>• Radio</li> <li>• Mobile microphone</li> <li>• Mosque</li> </ul>	<ul style="list-style-type: none"> <li>• Radio</li> <li>• Mobile microphone</li> <li>• Mosque/ Quranic school</li> </ul>	<ul style="list-style-type: none"> <li>• Radio</li> <li>• Mobile microphone</li> <li>• TV</li> </ul>	<ul style="list-style-type: none"> <li>• Radio</li> <li>• Mobile microphone</li> <li>• Song/music</li> </ul>
Reasons to vote for particular channel	<ul style="list-style-type: none"> <li>• Affordable</li> <li>• Accessible</li> <li>• Trust in the information of the mosque</li> </ul>	<ul style="list-style-type: none"> <li>• Radio is cheap</li> <li>• Can be listened while working</li> <li>• Microphone is loud</li> </ul>	<ul style="list-style-type: none"> <li>• Radio is affordable</li> <li>• Microphone can reach everywhere in short time</li> </ul>	<ul style="list-style-type: none"> <li>• We all have radio at home</li> <li>• Even illiterate can listen radio</li> </ul>	<ul style="list-style-type: none"> <li>• Any body can listen radio</li> <li>• It can be used even in the bush</li> </ul>
Most accessible channel among the high ranked channels	No. info				
Suitable time to use high ranked channel and frequency of use	No info.				
Any other channel you use	No info				
Types of message/info. looked for from the high ranked channel	No info				

### CSZ-Rural

Channel with high no. of votes	<ul style="list-style-type: none"> <li>• Radio</li> <li>• Women's meeting</li> <li>• Mosque</li> </ul>	<ul style="list-style-type: none"> <li>• Radio</li> <li>• Mosque</li> <li>• Quranic school</li> </ul>	<ul style="list-style-type: none"> <li>• Radio</li> <li>• Mobile microphone</li> <li>• Quranic school</li> </ul>	<ul style="list-style-type: none"> <li>• Radio</li> <li>• Mobile microphone</li> <li>• Mosque</li> </ul>	<ul style="list-style-type: none"> <li>• Radio</li> <li>• Religious gathering</li> <li>• Mobile microphone</li> </ul>
Reasons to vote for particular channel	<ul style="list-style-type: none"> <li>• Similar as above</li> </ul>	<ul style="list-style-type: none"> <li>• Similar as above</li> </ul>	<ul style="list-style-type: none"> <li>• Similar as above</li> </ul>	<ul style="list-style-type: none"> <li>• Similar as above</li> </ul>	<ul style="list-style-type: none"> <li>• Similar as above</li> </ul>

### CSZ-Nomadic

Channel with high no. of votes	<ul style="list-style-type: none"> <li>• Community meeting</li> <li>• Mosque</li> <li>• Quranic school</li> </ul>	<ul style="list-style-type: none"> <li>• Community meeting</li> <li>• Mosque</li> <li>• Quranic school</li> </ul>	<ul style="list-style-type: none"> <li>• Community meeting</li> <li>• Mosque</li> <li>• Quranic school</li> </ul>	<ul style="list-style-type: none"> <li>• Religious gathering</li> <li>• Mobile microphone</li> <li>• Quranic school</li> </ul>	<ul style="list-style-type: none"> <li>• Mosque</li> <li>• Community meeting</li> <li>• Quranic school</li> </ul>
Reasons to vote for particular channel	<ul style="list-style-type: none"> <li>• Confidence on the information of the community and the mosque</li> </ul>	<ul style="list-style-type: none"> <li>• Mosque always gives good information</li> </ul>	<ul style="list-style-type: none"> <li>• Mosque and community meeting can convince people</li> </ul>	<ul style="list-style-type: none"> <li>• Have confidence on the information</li> </ul>	<ul style="list-style-type: none"> <li>• Mosque always gives reliable information</li> </ul>

NW- Urban					
Question asked	Response of the participants				
	Eld. women	Adult women	Youth (G)	Youth (B)	Male
Channels with high no. of votes	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>Community meeting</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>TV</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>TV</li> <li>Newspaper</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>Newspaper</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque / newspaper</li> <li>TV</li> </ul>
Reasons to vote for particular channel	<ul style="list-style-type: none"> <li>Being Muslim have faith on the Mosque</li> <li>It can solve many problems</li> <li>Radio gives lot of information</li> </ul>	<ul style="list-style-type: none"> <li>Radio has become part of life</li> <li>Everybody has it</li> <li>It can be used anywhere</li> <li>Illiterate can also use it</li> <li>TV gives lot of information and entertainment</li> </ul>	<ul style="list-style-type: none"> <li>Radio gives information of the world</li> <li>It is available everywhere</li> </ul>	<ul style="list-style-type: none"> <li>Easiest way of communicating information</li> <li>Mobile microphone reaches everywhere</li> </ul>	<ul style="list-style-type: none"> <li>It is common channel</li> <li>Anybody can listen to have information</li> <li>Trust the information from the mosque</li> </ul>
Most accessible channel among the high ranked channels	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Community meeting</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> </ul>
Suitable time to use high ranked channel and frequency of use	<ul style="list-style-type: none"> <li>Morning and evening</li> </ul>	<ul style="list-style-type: none"> <li>Morning</li> <li>Afternoon</li> <li>Evening</li> </ul>	<ul style="list-style-type: none"> <li>Morning and evening</li> </ul>	<ul style="list-style-type: none"> <li>Evening when the BBC is broadcasting</li> </ul>	<ul style="list-style-type: none"> <li>Evening</li> </ul>
Any other channel you use	<ul style="list-style-type: none"> <li>Men and elder's meeting</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone</li> <li>Womenfolk</li> <li>Husband</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone</li> <li>Quranic school</li> </ul>	<ul style="list-style-type: none"> <li>Newspaper</li> <li>Playground</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone</li> </ul>
Types of message/info. looked for from the high ranked channel	<ul style="list-style-type: none"> <li>News, health issues</li> </ul>	<ul style="list-style-type: none"> <li>Children program</li> <li>Health and women's issues</li> <li>Interpretation of the Qur'an</li> </ul>	<ul style="list-style-type: none"> <li>News</li> <li>Music</li> <li>Health program</li> </ul>	<ul style="list-style-type: none"> <li>News</li> <li>Health</li> <li>Education</li> <li>Quranic interpretation</li> </ul>	<ul style="list-style-type: none"> <li>News and current affairs</li> <li>Peace issues</li> <li>Health</li> </ul>

NW-Rural					
Question asked	Response of the participants				
	Eld. women	Adult women	Youth (G)	Youth (B)	Male
Channel with high no. of votes	<ul style="list-style-type: none"> <li>Mosque</li> <li>Community meeting</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Community meeting</li> <li>Mosque</li> <li>Teashop</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>Teashop</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Teashop</li> <li>Public meeting place</li> </ul>	<ul style="list-style-type: none"> <li>Teashop</li> <li>Mosque</li> <li>Radio</li> </ul>
Reasons to vote for particular channel	<ul style="list-style-type: none"> <li>For rural people mosque is reliable</li> <li>Many people can meet and share</li> </ul>	<ul style="list-style-type: none"> <li>In community meeting many information can be shared</li> <li>Men brings information from the teashop and the mosque</li> </ul>	<ul style="list-style-type: none"> <li>Easy access</li> <li>Wide use</li> <li>Teashop is frequently use by men who brings information home</li> </ul>	<ul style="list-style-type: none"> <li>Radio is cheap and any body can use it</li> <li>Teashop shares many information</li> </ul>	<ul style="list-style-type: none"> <li>Teashop is a gathering place</li> <li>Elders also come there</li> <li>Information are shared</li> <li>It is a place of union</li> </ul>
Most accessible channel among the high ranked channels	<ul style="list-style-type: none"> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Mosque</li> <li>Teashop</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Teashop</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Teashop</li> </ul>
Suitable time to use high ranked channel and frequency of use	<ul style="list-style-type: none"> <li>Afternoon</li> </ul>	<ul style="list-style-type: none"> <li>Afternoon and Friday</li> </ul>	<ul style="list-style-type: none"> <li>Afternoon and evening</li> </ul>	<ul style="list-style-type: none"> <li>Afternoon and evening</li> </ul>	<ul style="list-style-type: none"> <li>Afternoon</li> </ul>
Any other channel you use	<ul style="list-style-type: none"> <li>School</li> <li>Teashop</li> </ul>	<ul style="list-style-type: none"> <li>Quranic school</li> <li>Men</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Village meeting</li> <li>MCH</li> </ul>	<ul style="list-style-type: none"> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Community meeting</li> </ul>
Types of message/info. looked for from the high ranked channel	<ul style="list-style-type: none"> <li>Quranic interpretation</li> <li>News</li> </ul>	<ul style="list-style-type: none"> <li>Peace issues and news</li> <li>Livestock price</li> </ul>	<ul style="list-style-type: none"> <li>Peace issues</li> <li>News</li> <li>Health and education</li> <li>Songs</li> </ul>	<ul style="list-style-type: none"> <li>News</li> <li>Songs and sports</li> <li>Quranic interpretation</li> </ul>	<ul style="list-style-type: none"> <li>News and current affairs</li> <li>Health issues</li> <li>Peace matters</li> </ul>

**NW- Nomad**

Question asked	Response of the participants				
	Eld. women	Adult women	Youth (G)	Youth (B)	Male
Channel with high no. of votes	<ul style="list-style-type: none"> <li>• Mosque</li> <li>• Radio</li> <li>• Quranic school</li> </ul>	<ul style="list-style-type: none"> <li>• Radio</li> <li>• Mobile microphone</li> <li>• mosque</li> </ul>	<ul style="list-style-type: none"> <li>• Radio</li> <li>• Mosque</li> <li>• Quranic school</li> </ul>	<ul style="list-style-type: none"> <li>• Mosque</li> <li>• Folkdance</li> <li>• Quranic school</li> </ul>	<ul style="list-style-type: none"> <li>• Mosque</li> <li>• Radio</li> <li>• Quranic school</li> </ul>
Reasons to vote for particular channel	<ul style="list-style-type: none"> <li>• Radio gives all kind of information</li> <li>• Children attending Quranic school brings useful information</li> </ul>	<ul style="list-style-type: none"> <li>• It gives the news of in and outside the country</li> <li>• Do not have any other mode of communication</li> </ul>	<ul style="list-style-type: none"> <li>• Radio is the only existing channel</li> <li>• Quranic school help to learn many new things</li> </ul>	<ul style="list-style-type: none"> <li>• Mosques gives religious learning and other information</li> <li>• Folkdance gathers youth where they share information</li> </ul>	<ul style="list-style-type: none"> <li>• Mosque gives the information about this life and next</li> <li>• Radio is the source to have information from the world</li> <li>• Children brings many information from Quranic school</li> </ul>
Most accessible channel among the high ranked channels	<ul style="list-style-type: none"> <li>• Radio</li> </ul>	<ul style="list-style-type: none"> <li>• Radio</li> </ul>	Radio	Folkdance Mosque	<ul style="list-style-type: none"> <li>• Mosque</li> <li>• Radio</li> </ul>
Suitable time to use high ranked channel and frequency of use	<ul style="list-style-type: none"> <li>• Afternoon and evening</li> </ul>	Morning and evening	Evening	<ul style="list-style-type: none"> <li>• After mid day prayer</li> <li>• Evening</li> </ul>	<ul style="list-style-type: none"> <li>• Evening</li> <li>• After prayer time</li> </ul>
Any other channel you use	<ul style="list-style-type: none"> <li>• Men of the family</li> </ul>	<ul style="list-style-type: none"> <li>• Men of the family</li> </ul>	<ul style="list-style-type: none"> <li>• Mosque</li> <li>• Water source where the youth gathers</li> </ul>	<ul style="list-style-type: none"> <li>• Radio</li> </ul>	<ul style="list-style-type: none"> <li>• Community meeting</li> <li>• Mobile microphone</li> </ul>
Types of message/info. looked for from the high ranked channel	<ul style="list-style-type: none"> <li>• peace process and news</li> <li>• immunization and FGM</li> </ul>	<ul style="list-style-type: none"> <li>• News and current affairs</li> <li>• Cultural issues</li> <li>• Water and livestock</li> </ul>	Peace issues and news Livestock market situation	<ul style="list-style-type: none"> <li>• Information related with drought and conflict</li> <li>• Religious teachings</li> <li>• Information related to youth</li> </ul>	<ul style="list-style-type: none"> <li>• Current news</li> <li>• Religious matters</li> <li>• Issues concerned to the village</li> </ul>

*In the CSZ due to some technical mistake questions related with accessible channel, suitable time, and types of information looked for were missed during the focus group discussion.*

The charts have revealed that in the urban settlement of the NE, elderly women, youths- both girls and boys have chosen radio in the first rank. Whereas adult women group have chosen the religious meeting in the first rank and the adult male group has chosen the mobile microphone in the first rank. Religious meetings, television, and newspaper are other commonly mentioned channels by all target groups. All of the urban target groups except adult women have chosen most of the modern channels as commonly used channels, however, they are still acquainted with the traditional channels like the mosque and the religious meeting.

In the rural and the nomadic area mosque, community meetings, and teashop are more popular as these channels provide more interpersonal communication. This also indicates the practice that radio is more used for the news purpose rather than receiving educational messages helpful to bring a change in behavior. The rural and the nomadic populations are more depending on the mosque and community meetings for such kind of information.

Most of the target groups reasoned that radio is the cheapest, affordable, accessible channel, and has wide coverage. Anybody can listen to radio anywhere, whether in the town, in the village or in the bush. Radio can be used by any age group, literate, or illiterate people, and even by those who does not own a radio. It has become a part of Somali life style. It is the channel, which

provides all kind of information from all over the world. Those who chose mobile microphone reasoned that it is useful to inform people about the current events and outbreak of diseases as it can reach anywhere on short time. All of the participants reasoned that they have faith and trust on the information, which comes out from the mosque and the religious leaders are the people who have authoritative and convincing ability and people believe them. **This out come clearly indicates that messages and information for behavioral change need to be channeled through the religious institutions as much as possible.**

- **Elderly women:**

In the NE compared to the adult women the elderly women of the urban area have ranked radio high. Which reveals the fact that, elderly women have more leisure time to use the radio than the adult women do as they have loads of household works and petty business to do. The only leisure time the adult women have is few ours in the afternoon and night when they finish their daily work. The discussion reveals that, although adult women chose the religious meeting as an effective channel to communicate on various issues related with their lives, however, they are not ignorant with the mass access and coverage of the radio. **It is their choice to use the channel, which they feel comfortable with, in terms of time, access, possession, and package of the information of their interest.**

Both the elderly and the adult women in all population settings of the CSZ have ranked radio on the top. Contrary to elderly women of the NE and the CSZ, elderly women of the NW in general, ranked the mosque on the top however, the urban elderly women chose radio on the top like their age mates of other zones.

Unlike the urban elderly women, the elderly women in the rural settings of the NE and the NW zones ranked the mosque on the top. The religious meeting is ranked second in the NE where as the radio and the traditional meetings are ranked third. In the NW elderly women of the rural area ranked the community meeting in the second and the radio in the third place. Where as nomadic elderly women of the NW chose radio and the Quranic School in the second and the third places respectively.

The rural elderly women believe that the mosque is the holy place and gives only good information, which will help them to live a good life. Some of them mentioned that they always seek and refer information and advice from the mosque and the religious leaders for all kind of problems they face, whether it is related with health or to resolve a dispute. It was generally agreed that for the religious matters and other problems faced in daily lives they seek information from the mosque and the Imams where as other information about current events they get informed from the radio and fellow villagers. They agreed that radio is the easiest and affordable channel but they rely more on the information, which comes from the mosque or preached by the religious leaders. These rural elderly women were not very much enthusiastic being adventurous for new and exciting information, however they did not deny receiving such information, which can help to improve the quality of life. Some of the elderly women in the rural area of the NW mentioned that children going to the Quranic School gain lots of information which they share at home with the family that is how they receive information from the Quranic school.

Contrary to the urban and the rural elderly women in the NE, the nomadic elderly women voted high for the women's meeting where as the mosque and the radio are ranked second with equal votes. In the NW, the nomadic elderly women chose the mosque and in the CSZ they chose the community meeting. Although, depending on the vote counts radio, mosque and meetings

gained their different rank but all of these channels are mentioned commonly by all elderly women in all zones. The chart reveals that in the NE women's meeting plays an important role in information sharing and communicating to each other in the nomadic settlements. The discussion group reported that they change ideas, receive information from the men coming from the town through fellow women in the group. The meetings are held on weekly basis where they discuss the problems faced and try to find a solution. They share all the information concerned to their problems. Mostly the information are received from husband and other male member of the family who participates in the community meetings, listens the radio most of the time and goes to the town. Some of them mentioned that women are always busy doing household works, keeping goats, and rearing children so it is impossible to get information as they want to. **Therefore, according to the nomadic elderly women, women's meeting is the most convenient source to have/share information.** Likewise the nomadic elderly women of the NW mentioned men are one of the major sources of information receiving as they participate in the teashop meeting and discussions in the mosque, which they bring home. Community meeting and women's meetings are also mentioned by the elderly women of the CSZ as one of the important channel of information sharing, specially related with their locality. Almost all of the elderly women from all of the zones reported that most of the families do have radio but their husbands or male members of the family mostly tune it on, even if the women are at home and have leisure time. Few of the elderly women reported radio as a noisy means and they do not like it, because they want peace when there is free time.

The rural elderly women of the CSZ have ranked radio on the top, women's meeting in the second and the mosque in the third rank. The nomadic elderly women of the CSZ voted high for community meeting, mosque at the second and the Quranic School at the third rank. They reasoned that radio gives the information from all over the world, where as they have confidence on the information which comes out from the mosque, and the women's meeting is very useful to discuss and learn many new things. The nomadic elderly women of the CSZ reasoned that community meeting is the authentic source of information in their community. The mosque is the place from where one can have good and useful information for life. The chart reveals that elderly women in the CSZ are friendlier with the radio than the elderly women of the NE. It also indicates that across the country choices of elderly women are more or less alike.

From the vote cast and reasons to choose a particular channel the study reveals that elderly women in the urban settings, regardless of their age, are aware of importance of the modern channels of communication and also look for news and information on current affairs. As well as they are not departed from the traditional sources of information like the mosque and the religious leaders. On the other hand, nomadic elderly women choose women's meeting and community meeting despite the existence of the radio with most of the families, because male members of the family possess the radio most of the time and are tuned on by them. They feel comfortable in interacting communication where they have access, can discuss and gain confidence on the information they receive and exchange. **This opinion indicates that the nomadic elderly women in all zones are more receptive to the interpersonal channels, which provides two way communications. The discussion also reveals that women's meeting is an important channel for the nomadic elderly women, where as their sources of information are mainly male members of the family who have access to other channels and with the outer world. The information given by the community leaders as key informants supports this finding as they have mentioned that most of the women are**

**reached through their husbands in order to give them important information/ decision of the community meetings.**

- **Adult women:**

Differing to the urban adult women, the rural women in the NE voted high for the radio. The mobile microphone is ranked second where as the religious meeting and the TV are in the third rank. The urban and the rural women in the CSZ voted high for the radio where as the nomadic women chose the community meeting on the top. Both rural and the nomadic women of the CSZ ranked the mosque in the second place while the urban women ranked the mobile microphone in the second place. Unlike the urban and the rural women, the nomadic women groups in the NE have different choice. The chart reveals that the nomadic women have voted high for the religious meeting where as the mosque is ranked second, and the women's meeting is ranked third. The urban and the nomadic adult women of the NW voted high for the radio where as the rural women voted high for the community meeting. The urban women of the NW chose TV and the mobile microphone in the second and the third place respectively. The rural women of the NW chose the mosque and the teashop in the second and the third place; where as the nomadic women of the NW selected the mobile microphone and the mosque in the second and the third places.

**Based on the votes it can be deduced that the radio, mosque and the mobile microphones are equally popular among the women target groups. Compared to the other zones teashop has a specific place among the rural women groups of the NW, which signifies that despite the access to the radio or the community meeting men are the main sources of information for these women.**

The women groups in all of the zones and in all of the population settings are in agreement that the radio is affordable, accessible, and easiest channel. One can carry it wherever one goes and will not miss the important information. The mosque and the community meeting have the confidence of the people.

Most of the women discussants in all zones agreed that BBC- Somalia and the Radio Voice of peace are the most popular programs and they listen mostly news, Quranic interpretation, and health programs. However, many of them felt difficult to pin point any specific program they look for from the aired programs. Many of them reported that their husbands tune on the radio and women keep them listening or men share the information later with them. Only few of the young women mentioned that they look for songs, and other programs related to women's issues.

Most of the reasons given for voting high for the mosque are similar across the women target groups in all zones. Most of these women reported that the mosque and the religious meetings give the best information to heal problems they face. People believe that religion is the pillar of life and the *Islam is not only a religion it is the way of life*. The religious meeting not only talks about religion, it also gives other valuable information, which can be used to improve the way of life, to live healthy and in harmony. Religious meetings and the mosque are not only a place to listen about religion but also to exchange information, to learn new things, and to learn make differences between the good and the bad. It brings lot of people together from the community where they share lots of information with each other.

- **Youth girls:**

The groups of youth girls in all of the three zones have ranked the radio on the top in the urban and the rural settings where as the nomadic girls have ranked the mosque and the Quranic School on the top. In the CSZ, the nomadic girls have ranked community meetings on the top like their mothers. The above chart has revealed that those institutions where a person can learn cultural values and religious teachings have important place for the young girls in all population groups whether such institutions are ranked high or not. Influence of the modern channel like the TV can be seen in the chart among the urban young girls of the NE and the NW. However, the nomadic young girls are much more close to their mothers and grand mothers indicating the importance of the women's meetings and the traditional meetings. **This re enforces the fact that for women in the nomadic settlements, traditional interpersonal channels are the only source of information receiving and disseminating where access to modern channels are limited.**

The reasons explained by the youth girls does not vary much than the reasons explained by the other women groups in all of the population groups of all zones. Most of them mentioned that the radio is affordable, and from the religious institutions and the Quranic Schools they learn good behaviors and many other things. Some of them mentioned that the radio is the only existing modern channel to have news on current affairs.

- **Youth boys:**

Both urban and the rural boys in the NE and the CSZ have ranked the radio on the top. TV is ranked second by the urban youth boys in the NE where as the rural boys have ranked the religious meeting and the mobile microphones in the second place. Public gathering place and magazines are ranked third by the urban boys in the NE, however, video is ranked third by the rural boys. In the CSZ mobile microphone is ranked second in both of the urban and the rural settings and TV is ranked third in the urban settings. However, the nomadic boys ranked the religious gathering on the top, mobile microphone in the second and the Quranic School in the third rank respectively. In the NW also radio is ranked on the top by the urban and the rural boys where as the nomadic boys have ranked the mosque on the top. Deferring to the age mates of the NE and the CSZ, the rural boys of the NW have ranked teashop in the second place and public gathering (meeting) in the third place; the nomadic boys from the NW have ranked folk dance and the Quranic School in the second and the third places. The comparison of the charts of all three zones reveals that **only in the NW folk dance is indicated as one of the strong source of information receiving and sharing among the youths.**

The boys reasoned that radio is affordable, any one can use it anywhere even inside the mosque; and the TV is becoming accessible as it can be watched in the house or in the parlors. **The youth boy's ranking of the channels reveals that in the urban and the rural areas modern channels of communication like TV and video are gaining popularity because of the increased access and affordability. Information given by the video parlors as one of the key informants, also supports the above finding that most of their audiences are males from 15 to 50 age group, which like to watch satellite programs, mostly the sports channels, and action movies. Whereas among the female audiences Indian movies dubbed in Somali are more popular.**

- **Male:**

Unlike any other target groups of the NE the urban male groups ranked the mobile microphone on the top reasoning that it is loud and can attract/ reach many people. It is ideal to inform people about outbreak of disease and emergencies. Urban males of the NE have selected radio

and the newspaper in the second place and the Quranic School/formal schools in the third place. The rural and the nomadic males have ranked radio on the top reasoning that it is available everywhere and gives all kind of information. The rural males ranked the Quranic School and poster, and teashops in the second and the third places whereas the nomadic males ranked the mosque and traditional meetings in the second and the third places. The rural males have mentioned that in the teashops there is lot of sharing and exchange of information.

The urban male groups of the NW chose radio, mosque and the newspaper in the first, second and the third places respectively. The rural men chose teashop, mosque, and the radio in the first, second and the third places respectively; and the nomadic males chose mosque, radio, and the Quranic school in the first, second and the third places respectively.

The urban male groups of the CSZ ranked radio on the top; mobile microphone in the second; and songs and music in the third rank. The rural men of the CSZ also ranked the radio on the top; religious gathering in the second; and mobile microphone in the third rank. The nomadic men chose the mosque on the top; community meeting in the second and the Quranic school in the third rank.

**The voting reveals that all of the men groups in all zones have selected same channels only the ratings of the channels are different. Disparity in the rating reflects the purpose and use of the channels according to the interest of the target group.**

**Rating of the channels surprisingly reveals that non of the male target groups in all population settings and in all zones have voted for the “Chat chewing session” as their preferred channel. Whereas in Somali life style Chat chewing session is one of the major places where males gather, talk, discuss, and exchange lot of information. It indicates that whatever matters are discussed in the chat chewing sessions, people do not rely on them or the information are forgotten easily. Very few male from NWZ mentioned that teashop is the place also for chat chewing.**

### **5.1.2. Frequency of use and suitable time to use high ranked channel:**

Most of the target groups in all population groups of all zones mentioned afternoon and night as suitable time to use radio. The response corresponds with the life style of the Somalis as they work from the morning to mid-day and rest during the afternoon. In the evening most of them resume their work. Men generally spent their afternoons and evenings in the chat sessions and teashop while women spent their evening time taking care of household works. Many youth boys spent their evening time in sport fields or informal learning centers in urban area whereas youth girls helps their mother, few have opportunity to go to the learning centers. And to attend the mosque and religious meetings on Friday and the feast is mentioned as suitable time. Friday pray has important role in any Muslim’s life and that is the day they take off from their work. As most of the target groups mentioned radio as a part of their lives therefore it is used daily. Those who voted for women’s meeting mentioned that they meet on the weekly basis. Those who voted for teashop mentioned that it is a daily routine for men to sit in a teashop and listen radio and discuss many affairs of daily life and current issues.

### **5.1.3. Types of message/information looked from the high ranked channel:**

Almost all target groups in all zones reported that BBC- Somalia, and Voice of Peace Radio are the most popular radio broadcasts. Most of the target groups responded that radio is basically used for news, current affairs, politics, and religious talks. Some of the discussants from the

youth groups mentioned they look for sport news, songs, poem, and health programs etc. Few women in urban area mentioned that they look for women concerned information, Quranic interpretation, and health programs, however, many of the women discussants found difficult to specify the program of their interest. On the other hand, most of the target groups expected to learn religious matter as well as other important issues useful to solve their daily problems and new information from the religious institutions.

◆ **Main findings:**

- Rating of the existing channels reveals that radio is in common use among all of the target groups. Mosque, religious meeting, and community meetings have equally important role and space in the lives of all target groups.
- Even if radio is ranked high as commonly used channel most of the target groups use it for news updates on current affairs.
- All target groups have separate choice and prefer different channels for different types of information.
- Almost all of the female target groups in all settlements have mentioned interpersonal channels as effective one, having possibilities of cross checking and evaluation of information they receive. Only in the NE the urban elderly women have ranked the radio and the mosque in the second place. Given the condition of the existing newspaper, their access and capacity to reach the people and the female literacy rate in Somalia the ranking puts a question on its reliability. Yet many of the discussants mentioned that even if they cannot read other members of the family use to read the newspaper for them.
- Popularity of the print media like posters, magazines, newspaper, leaflets is low in all target groups. Non of the target groups have mentioned print media as their first choice. Very few proportions of the discussants have mentioned newspapers and magazines in the second or the third ranks. It assures that being an oral society; Somalis are not very much appreciative to the print materials. Whatever print/ pictorial materials are used most of them are used without the pretest and are not able to attract the target group as they think those do not belong to them and high rate of illiteracy are some of the reasons for non-popularity of the printed materials.
- In the nomadic and the rural areas men are playing an important role of messenger of information to the family even if the family own a radio.
- The Quranic School, formal school, and learning centers are effective channels to reach young generation.
- Both the elder and adult women prefer interpersonal channels with opportunity of two- way communications.
- In the rural and the nomadic areas, the traditional channels like folk dances, songs, drama etc. are loosing its popularity in the lack of financial support, outcome, and difficult access to audience. Whereas in the urban areas increasing accessibility and affordability of video

parlors and satellite program shows have affected the popularity of the traditional channels of art forms.

□ **Recommendations:**

- To bring behavioral change in negative practices, women targets should be reached intensively through interpersonal channels providing enough opportunity to evaluate the information/messages in order to build their confidence on the importance of information they receive and to incorporate into their day to day lives.
- In the nomadic and the rural areas men are sources of information for the family, therefore, men should be equally targeted while reaching with information/messages.
- Realizing the use of radio important messages should be flashed round the year using the prime time as it is basically used the news purpose.
- In the rural and the nomadic areas traditional channels of art form still can play a major role in information dissemination, especially for youths. Therefore, such channels should be encouraged, supported with financial aid and capacity building, because such channels have built-in acceptance of the community.
- Religious leaders and Imam should be supported, strengthen with information and exposure on behavior practices as the mosque and religious leaders have explicit and authoritative impact in people’s behavior.

**5.2. Health and Hygiene:**

**Chart: 2**

<b>NE-Urban</b>					
Questions discussed	Response of the target groups				
	Eld. women	Adult women	Youth(G)	Youth(B)	Male
Most common illness	<ul style="list-style-type: none"> <li>▪ Malaria</li> <li>▪ Anemia</li> <li>▪ Tuberculosis</li> <li>▪ Diarrhea</li> <li>▪ Infectious disease of women</li> </ul>	<ul style="list-style-type: none"> <li>▪ Malaria</li> <li>▪ TB</li> <li>▪ Diarrhea</li> <li>▪ Typhoid</li> </ul>	<ul style="list-style-type: none"> <li>▪ Malaria</li> <li>▪ Diarrhea</li> <li>▪ TB</li> </ul>	<ul style="list-style-type: none"> <li>▪ Malaria</li> <li>▪ TB</li> <li>▪ Cholera</li> </ul>	<ul style="list-style-type: none"> <li>▪ Malaria</li> <li>▪ TB</li> </ul>
Knowledge about the illness	Don't know much about the illness	No info.	<ul style="list-style-type: none"> <li>▪ Malaria is caused by mosquito</li> <li>▪ Unclean water and poor sanitation cause diarrhea</li> </ul>	<ul style="list-style-type: none"> <li>▪ Unsafe water cause cholera and diarrhea</li> <li>▪ Mosquito cause malaria</li> </ul>	<ul style="list-style-type: none"> <li>▪ Bad sanitation</li> <li>▪ Inadequate health service</li> </ul>
Knowledge on the prevention	<ul style="list-style-type: none"> <li>▪ To get treatment</li> <li>▪ Support each other</li> <li>▪ Give awareness</li> </ul>	<ul style="list-style-type: none"> <li>▪ Vaccination and treatment</li> <li>▪ Increase health centers</li> <li>▪ Mobilize public awareness</li> </ul>	<ul style="list-style-type: none"> <li>▪ Vaccination</li> <li>▪ Train housewives</li> <li>▪ Take advice from doctors</li> <li>▪ Eradicate insects</li> </ul>	<ul style="list-style-type: none"> <li>▪ Increase health centers</li> <li>▪ Social awareness</li> <li>▪ Strengthen hygiene</li> </ul>	<ul style="list-style-type: none"> <li>▪ Maintain good sanitation</li> <li>▪ Increase health centers</li> <li>▪ Increase financial support to health service</li> <li>▪ Use all communication channels to</li> </ul>

					inform people
Acquisition of firsthand advice/info.	<ul style="list-style-type: none"> <li>Nearest health centers</li> <li>Pharmacies/private clinic</li> <li>Doctors</li> </ul>	<ul style="list-style-type: none"> <li>Pharmacies</li> <li>Hospital</li> <li>MCH</li> <li>Religious healer</li> </ul>	<ul style="list-style-type: none"> <li>Nearest health centers</li> <li>Doctors</li> <li>Parents</li> <li>MCH</li> </ul>	<ul style="list-style-type: none"> <li>Nearest hospital, doctors</li> <li>Religious scholars</li> <li>Experienced persons</li> </ul>	<ul style="list-style-type: none"> <li>Doctors</li> <li>Health centers</li> <li>Pharmacies</li> </ul>
Usefulness of the advice	<ul style="list-style-type: none"> <li>Most of the time advice are useful</li> <li>If the instructions are followed they are useful</li> </ul>	<ul style="list-style-type: none"> <li>Information are useful to prevent the disease and to get well</li> </ul>	<ul style="list-style-type: none"> <li>Advice helps to understand causes, prevention and precaution to be taken</li> </ul>	<ul style="list-style-type: none"> <li>Advice given on prevention on disease are useful</li> </ul>	<ul style="list-style-type: none"> <li>Advice give from these places are useful because that help to fight against disease</li> </ul>
Preferred/trust channel to have info. on health	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>Newspaper</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Quranic school</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>Community meeting</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>Mosque</li> </ul>
Reasons for trust	<ul style="list-style-type: none"> <li>Many people use radio</li> <li>Lot of people can read newspaper and learn</li> <li>Mobile microphone can be heard from distance</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone is loud and people can benefit from the information</li> </ul>	<ul style="list-style-type: none"> <li>All the people can get info. From radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio can be listened everywhere</li> <li>People go to pray five times a day in the mosque and can have info.</li> </ul>	<ul style="list-style-type: none"> <li>People pay attention to mobile microphone</li> <li>Radio is widely available</li> </ul>
<b>NE-Rural</b>					
Most common illness	<ul style="list-style-type: none"> <li>Malaria</li> <li>Diarrhea</li> <li>Measles</li> <li>Prenatal death and anemia</li> </ul>	<ul style="list-style-type: none"> <li>Malaria</li> <li>Diarrhea</li> <li>Measles</li> </ul>	<ul style="list-style-type: none"> <li>Malaria</li> <li>Worms and typhoid</li> <li>Measles</li> </ul>	<ul style="list-style-type: none"> <li>Malaria</li> <li>Measles</li> <li>Anemia</li> </ul>	<ul style="list-style-type: none"> <li>Malaria</li> <li>TB</li> <li>Anemia</li> </ul>
Knowledge about the illness	<ul style="list-style-type: none"> <li>Don't have any knowledge about the illness</li> </ul>	<ul style="list-style-type: none"> <li>Malaria has fever, bitterness and body ache</li> <li>Measles have fever and spots on the body</li> </ul>	<ul style="list-style-type: none"> <li>Malaria has sever fever</li> </ul>	<ul style="list-style-type: none"> <li>These are serious disease</li> <li>Malaria has fever, bitterness and head ache</li> <li>Measles have fever and spots on the body</li> </ul>	<ul style="list-style-type: none"> <li>Don't know about the disease</li> </ul>
Knowledge on the prevention	<ul style="list-style-type: none"> <li>Mostly traditional healing are used</li> </ul>	<ul style="list-style-type: none"> <li>Enhance hygiene of the house</li> <li>Chlorinate water</li> <li>Use mosquito nets</li> <li>Wash hands properly</li> <li>Measles can be prevented by vaccine</li> </ul>	<ul style="list-style-type: none"> <li>Use insecticides</li> <li>Use nets</li> <li>Chlorinate water</li> <li>Wash hands well</li> </ul>	<ul style="list-style-type: none"> <li>Insecticide the house to prevent malaria</li> <li>Vaccine can prevent measles</li> <li>Chlorinate and putting lime in water source can prevent other diseases</li> </ul>	<ul style="list-style-type: none"> <li>Don't know about prevention</li> </ul>
Acquisition of firsthand advice/info.	<ul style="list-style-type: none"> <li>Nearest town</li> <li>Islamic scholars</li> </ul>	<ul style="list-style-type: none"> <li>Doctor and MCH</li> <li>Islamic scholars</li> </ul>	<ul style="list-style-type: none"> <li>MCH</li> <li>TBA</li> </ul>	<ul style="list-style-type: none"> <li>MCH and health workers</li> </ul>	<ul style="list-style-type: none"> <li>MCH</li> <li>Religion and religious healer</li> </ul>
Usefulness of the advice	<ul style="list-style-type: none"> <li>Don't have detail information</li> </ul>	<ul style="list-style-type: none"> <li>Usually advice from MCH and health centers are useful</li> </ul>	<ul style="list-style-type: none"> <li>Advice given are important to keep health</li> <li>Patients get recovered</li> </ul>	<ul style="list-style-type: none"> <li>MCH and health workers provide good information which are useful to cure disease</li> </ul>	<ul style="list-style-type: none"> <li>Cannot say about usefulness because advice are not seek directly</li> </ul>
Preferred/trust channel to have info. on health	<ul style="list-style-type: none"> <li>Islamic scholars and the Mosque</li> <li>Men</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>MCH</li> <li>Religious healer</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Doctors</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>MCH worker</li> </ul>
Reasons for trust	<ul style="list-style-type: none"> <li>Mosque is the only place to have reliable</li> </ul>	<ul style="list-style-type: none"> <li>Radio gives reliable info.</li> <li>Have confidence</li> </ul>	<ul style="list-style-type: none"> <li>Doctors are knowledgeable persons</li> </ul>	<ul style="list-style-type: none"> <li>There is no any other communication</li> </ul>	<ul style="list-style-type: none"> <li>Religious leader preaches good</li> </ul>

	information	on MHC	<ul style="list-style-type: none"> <li>Everybody can hear mobile microphone</li> </ul>	channels	<ul style="list-style-type: none"> <li>info. In the mosque</li> <li>Radio can be heard every where</li> </ul>
<b>NE-Nomadic</b>					
Most common illness	<ul style="list-style-type: none"> <li>Malaria</li> <li>TB</li> <li>Evil spirit</li> <li>Diarrhea</li> </ul>	<ul style="list-style-type: none"> <li>Malaria</li> <li>TB</li> <li>Typhoid</li> <li>Anemia</li> </ul>	<ul style="list-style-type: none"> <li>Malaria</li> <li>TB</li> <li>Measles</li> <li>Diarrhea</li> <li>Anemia</li> </ul>	<ul style="list-style-type: none"> <li>Malaria</li> <li>TB</li> <li>typhoid</li> </ul>	<ul style="list-style-type: none"> <li>Malaria</li> <li>TB</li> <li>Typhoid</li> <li>Anemia</li> </ul>
Knowledge about the illness	<ul style="list-style-type: none"> <li>Do not know much</li> </ul>	<ul style="list-style-type: none"> <li>Malaria has inconstant fever</li> <li>TB cause weight loss</li> <li>Diarrhea has lot of fluid loss and stomach ache</li> <li>Typhoid has joints pain, fever, and loose motion</li> </ul>	<ul style="list-style-type: none"> <li>Malaria is caused by mosquito</li> <li>Anemia is caused by blood deficiency</li> </ul>	<ul style="list-style-type: none"> <li>Don't have much info. About these disease</li> </ul>	<ul style="list-style-type: none"> <li>Malaria has fever and weakness</li> <li>TB cause lot of cough and rapid breathing</li> </ul>
Knowledge on the prevention	<ul style="list-style-type: none"> <li>Read the Qura'n</li> <li>Pray and be obedient to Allah</li> </ul>	<ul style="list-style-type: none"> <li>Recite the Qura'n</li> <li>Consult nearest doctors</li> </ul>	<ul style="list-style-type: none"> <li>Malaria can be prevented by tablets and mosquito nets</li> <li>Measles are prevented by vaccine</li> <li>TB can be prevented isolating the infected person</li> </ul>	<ul style="list-style-type: none"> <li>Good sanitation can prevent typhoid</li> <li>Isolation of TB infected person, not to sleep with the patient, properly cleaning the utensils used by the patient can prevent others from TB</li> </ul>	<ul style="list-style-type: none"> <li>From health awareness</li> </ul>
Acquisition of firsthand advice/info.	<ul style="list-style-type: none"> <li>Religious healing</li> <li>Traditional healer</li> <li>Doctors</li> </ul>	<ul style="list-style-type: none"> <li>Religious healer</li> <li>Doctor</li> <li>Husband's advice</li> </ul>	<ul style="list-style-type: none"> <li>Any one having better experience</li> <li>Nearest doctor</li> </ul>	<ul style="list-style-type: none"> <li>Religion and religious healers</li> <li>Doctors</li> <li>Experienced person in the community</li> <li>Mothers</li> </ul>	<ul style="list-style-type: none"> <li>Health centers</li> <li>The Qura'n</li> <li>Traditional medicine</li> </ul>
Usefulness of the advice	<ul style="list-style-type: none"> <li>Medicines are useful</li> <li>Religious healing are useful many times</li> </ul>	<ul style="list-style-type: none"> <li>Their advice are useful to control the disease</li> </ul>	<ul style="list-style-type: none"> <li>Mostly the info. are useful</li> </ul>	<ul style="list-style-type: none"> <li>The advice gives health awareness</li> <li>It only helps when practiced</li> </ul>	<ul style="list-style-type: none"> <li>The advice has many advantage if practice well</li> </ul>
Preferred/trust channel to have info. on health	<ul style="list-style-type: none"> <li>Doctors</li> <li>Religious healers</li> <li>Health centers</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Community and religious meetings</li> <li>Health centers and doctors</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>The Qura'n and religious healers</li> <li>Doctors</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>Mosque</li> <li>Community meeting</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Health center</li> </ul>
Reasons for trust	<ul style="list-style-type: none"> <li>Doctor's information are useful</li> <li>One can get what the person understands</li> </ul>	<ul style="list-style-type: none"> <li>Information of community and religious meetings are reliable</li> <li>Health centers and doctors give good info.</li> </ul>	<ul style="list-style-type: none"> <li>Religion practiced properly keep people healthy</li> </ul>	<ul style="list-style-type: none"> <li>Microphone is the easiest channel to attract and gather people</li> <li>Radio gives many health info.</li> </ul>	<ul style="list-style-type: none"> <li>Radio gives many new info. On health</li> <li>Info. On how to prevent disease</li> </ul>
<b>CSZ-Urban</b>					
Questions discussed	Eld.Women	Adult women	Youth (G)	Youth (B)	Male
Most common illness	<ul style="list-style-type: none"> <li>Malaria</li> <li>Water related disease</li> </ul>				
Knowledge about the illness	<ul style="list-style-type: none"> <li>Mosquito</li> <li>Polluted water</li> </ul>				
Knowledge on the prevention	<ul style="list-style-type: none"> <li>Medicine, mosquito net, clean water</li> </ul>				
Acquisition of firsthand advice/info.	<ul style="list-style-type: none"> <li>Health center</li> <li>Religious leader</li> <li>Doctor</li> </ul>	<ul style="list-style-type: none"> <li>Health centers</li> <li>Pharmacy if the sickness is not serious</li> <li>Sheikh/traditiona</li> </ul>	<ul style="list-style-type: none"> <li>Health center</li> <li>Religious Ullema</li> <li>Parents</li> </ul>	<ul style="list-style-type: none"> <li>Health center</li> <li>Doctor</li> <li>Religious sheikh</li> <li>MCH</li> <li>TV</li> </ul>	<ul style="list-style-type: none"> <li>Health center</li> <li>Religious leader</li> <li>Physician</li> <li>Parents</li> </ul>

		l healer			
Usefulness of the advice	<ul style="list-style-type: none"> <li>Mostly useful</li> <li>Helps to recover</li> <li>Helps to consult proper place</li> </ul>	<ul style="list-style-type: none"> <li>Useful enough to recover</li> </ul>	<ul style="list-style-type: none"> <li>Mostly physician's advice is useful</li> <li>Ullema's advice helps</li> </ul>	<ul style="list-style-type: none"> <li>Useful</li> <li>Useful if properly applied</li> </ul>	<ul style="list-style-type: none"> <li>Physicians have good advice</li> <li>Reciting of the Qura'n helps to feel good</li> </ul>
Preferred/trust channel to have info. on health	<ul style="list-style-type: none"> <li>Mobile microphone</li> <li>Radio</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>TV</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>Newspaper</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>Video/TV</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>TV</li> <li>Community chief</li> </ul>
Reasons for trust	<ul style="list-style-type: none"> <li>Affordable</li> <li>All have radio at home</li> <li>Mosque is reliable</li> </ul>	<ul style="list-style-type: none"> <li>Radio is available everywhere</li> <li>Mobile microphone is speedy, can help even those who does not have radio</li> </ul>	<ul style="list-style-type: none"> <li>Everybody has radio</li> <li>Mobile microphone can be heard easily</li> </ul>	<ul style="list-style-type: none"> <li>Everybody has radio</li> <li>Like to watch video</li> <li>Mobile microphone attracts people/speedy/loud</li> </ul>	<ul style="list-style-type: none"> <li>Everybody has radio</li> <li>Mobile microphone can be heard easily</li> <li>Community chief are responsible for wellbeing of people</li> </ul>
CSZ-Rural					
Most common illness	No info.				
Knowledge about the illness	No info.				
Knowledge on the prevention	No info.				
Acquisition of firsthand advice/info.	<ul style="list-style-type: none"> <li>Religious Sheikh</li> <li>Health worker</li> <li>Pharmacies</li> <li>Elders and son</li> </ul>	<ul style="list-style-type: none"> <li>Nearest doctor</li> <li>Health center</li> <li>Sheikh</li> <li>Traditional healer</li> <li>Women's tea party</li> </ul>	<ul style="list-style-type: none"> <li>Physician</li> <li>Religious leader</li> <li>Elders</li> <li>Health centers</li> </ul>	<ul style="list-style-type: none"> <li>Nearest physician</li> <li>Religious leader</li> <li>Pharmacy</li> <li>Qura'n</li> <li>Parents</li> </ul>	<ul style="list-style-type: none"> <li>Health center</li> <li>Religious leader</li> <li>Pharmacy</li> <li>CHW</li> </ul>
Usefulness of the advice	<ul style="list-style-type: none"> <li>Mostly useful</li> <li>If followed useful</li> </ul>	<ul style="list-style-type: none"> <li>Mostly useful</li> <li>Medical persons advice help to what medicine to take</li> </ul>	<ul style="list-style-type: none"> <li>Enough to know the treatment</li> </ul>	<ul style="list-style-type: none"> <li>Useful</li> <li>Helpful to know the prevention/treatment</li> </ul>	<ul style="list-style-type: none"> <li>Helps to recover from their advice</li> </ul>
Preferred/trust channel to have info. on health	<ul style="list-style-type: none"> <li>Sheikh/mosque</li> <li>Radio</li> <li>Physician</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>Sheikh</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>MCH</li> <li>Mobile microphone</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>Community elders</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>village chief</li> </ul>
Reasons for trust	<ul style="list-style-type: none"> <li>Radio and microphone are the simplest way to receive information</li> <li>Have trust on Sheikh and mosque</li> </ul>	<ul style="list-style-type: none"> <li>Available</li> <li>Speedy and loud</li> <li>Advice of the Sheikh is important</li> </ul>	<ul style="list-style-type: none"> <li>Radio is every where</li> <li>MCH have enough knowledge</li> <li>Loud voice of microphone attracts people</li> </ul>	<ul style="list-style-type: none"> <li>Available everywhere</li> <li>Community elders are responsible person</li> </ul>	<ul style="list-style-type: none"> <li>Available everywhere</li> <li>Loud voice of microphone can be heard easily</li> </ul>
CSZ-Nomadic					
Questions discussed	Eld.Women	Adult women	Youth (G)	Youth (B)	Male
Most common illness	No info.				
Knowledge about the illness	No info.				
Knowledge on the prevention	No info.				
Acquisition of firsthand advice/info.	<ul style="list-style-type: none"> <li>Sheikh</li> <li>Physician</li> <li>Experienced person/relative</li> <li>Local chief</li> </ul>	<ul style="list-style-type: none"> <li>Sheikh</li> <li>Town</li> <li>Doctor</li> </ul>	<ul style="list-style-type: none"> <li>Sheikh</li> <li>Town</li> <li>Traditional medicine</li> <li>Husband</li> </ul>	<ul style="list-style-type: none"> <li>Qura'n recitation</li> <li>Physician</li> <li>Health worker</li> <li>Religious leader/mosque</li> </ul>	<ul style="list-style-type: none"> <li>Sheikh</li> <li>Physician</li> <li>Health center/CHW</li> <li>Kill an animal to heal the sick</li> </ul>
Usefulness of the advice	<ul style="list-style-type: none"> <li>Useful until the recovery</li> </ul>	<ul style="list-style-type: none"> <li>Useful enough to recover</li> </ul>	<ul style="list-style-type: none"> <li>Mostly useful</li> </ul>	<ul style="list-style-type: none"> <li>Useful</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Enough to recover</li> </ul>

				and the Qura'n is very important	▪ Satisfies the problem
Preferred/trust channel to have info. on health	▪ Mosque ▪ Microphone ▪ Men	▪ Local chief ▪ Radio ▪ Mobile microphone ▪ Mosque/teacher	▪ Local chief ▪ Radio ▪ Mobile microphone ▪ Water source	▪ Mobile microphone ▪ Radio	▪ Radio ▪ Mobile microphone ▪ Mosque ▪ Community chief
Reasons for trust	▪ Mobility and loudness of microphone ▪ Trust in the mosque ▪ Men are resourceful	▪ Radio is available ▪ Loud and mobility ▪ Mosque and Sheikh are closure and respect for them	▪ Local chief is responsible person ▪ Radio is available ▪ Many people come to water source	▪ Loud and mobile ▪ In remote area radio is the only source	▪ Radio is available ▪ Loud and mobile
<b>NWZ-Urban</b>					
Most common illness	▪ Malaria ▪ Malnutrition ▪ Measles ▪ Diarrhea	▪ Poor health ▪ Anemia ▪ Malnutrition ▪ Diarrhea ▪ Flu	▪ Malaria ▪ Measles ▪ Diarrhea	▪ TB ▪ Malaria ▪ Women's health problem ▪ Flu	▪ Measles ▪ Eye disease ▪ Women's problem ▪ Malaria ▪ Diarrhea
Knowledge about the illness	▪ No info.	▪ No info.	▪ No info.	▪ There is lack of knowledge on health matter ▪ TB infected person tries to hide ▪ Constipation id believed the cause of malaria	▪ Poor health
Knowledge on the prevention	▪ No info.	▪ ORS for Diarrhea ▪ Fill the stomach and increase the bowel on flu	▪ Mothers give traditional treatment	▪ Cleanliness of house and surroundings	▪ Malaria tablets ▪ ORS for diarrhea
Acquisition of firsthand advice/info.	▪ Doctor ▪ Religious healer ▪ Pharmacy	▪ Nearest health post or doctor ▪ Knowledgeable person ▪ Pharmacy ▪ Sheikh	▪ Nearest doctor ▪ Health post ▪ MCH ▪ Sheikh	▪ Nearest doctor ▪ MCH ▪ Traditional healer	Doctor Sheikh Herbal medicine Pharmacy
Usefulness of the advice	▪ Generally useful ▪ Helps to understand the problem ▪ Helps how to take care of health	▪ In lack of experience doctor people have to rely on the other advice ▪ Doctor's advice is useful	▪ Doctor's advice is useful ▪ Quranic treatment useful	▪ Medical advice are always useful	▪ Mostly useful
Preferred/trust channel to have info. on health	▪ Radio ▪ Mobile microphone	▪ Doctor ▪ Mobile microphone ▪ Radio	▪ Radio ▪ Mobile microphone ▪ Newspaper/journals	▪ Radio ▪ Mobile microphone ▪ Sheikh ▪ TV	▪ Radio ▪ Mobile microphone ▪ TV ▪ Newspaper
Reasons for trust	▪ Many have radio ▪ Mobile microphone is fast and reaches every where	▪ Confidence ▪ Easily heard and known ▪ People like to listen radio	▪ Radio broadcasts daily ▪ Mobile microphone is quick ▪ Youth like to read	▪ Radio listening is common ▪ Mobile microphone is quick	▪ Everybody listens radio ▪ Mobile microphone reaches every where ▪ TV gives audio-visual information
<b>NWZ-Rural</b>					
Most common illness	• Measles • Whooping cough • malaria	▪ Malaria ▪ Malnutrition ▪ Measles ▪ Miscarriage ▪ TB	▪ Malaria ▪ Malnutrition ▪ Measles ▪ Pneumonia	▪ TB ▪ Malaria ▪ Malnutrition ▪ Anemia	▪ Malaria ▪ Measles ▪ TB
Knowledge about the illness	▪ No info.	No info.	▪ No knowledge about disease	▪ No info.	▪ No info.
Knowledge on the	▪ No info.	▪ No. info	Do not have	Do not have knowledge	▪ Malaria can be

prevention			knowledge		prevented cultivating fish in stagnant water ▪ Vaccine for measles
Acquisition of firsthand advice/info.	▪ Nearest town/doctor ▪ Religious Shaikh ▪ Mosque	▪ Sheikh ▪ Nearest town/pharmacy	Sheikh Nearest town/ health post Pharmacy	Nearest town/Doctor Sheikh	Nearest town/doctor Religious healer
Usefulness of the advice	▪ Have to trust on God ▪ If doctor is available advice is useful	▪ We just trust them ▪ Helps to feel better	▪ Some times useful	▪ Have confidence on Sheikh's advice	▪ Mostly useful
Preferred/trust channel to have info. on health	▪ MCH ▪ Mosque ▪ Local administration ▪ Teashop	▪ Radio ▪ Mobile microphone ▪ School ▪ Community meeting (village)	▪ Radio ▪ MCH ▪ Teashop	▪ MCH ▪ Radio ▪ Mobile microphone ▪ Community leader	▪ Mosque ▪ MCH ▪ Community meeting ▪ School
Reasons for trust	▪ Those are available channels ▪ Trust	▪ Many people comes in the School and meeting place ▪ Radio and microphone are easiest	▪ Many have radio ▪ From Teashop men brings information	▪ Availability ▪ Trust	▪ MCh is the nearest available place in need
<b>NWZ-Nomadic</b>					
Most common illness	Malaria Jaundice Diarrhea	▪ Malaria ▪ Hepatitis ▪ Flu	▪ Malaria ▪ Jaundice ▪ Whooping cough ▪ Reproductive problems of women	▪ TB ▪ Malaria ▪ Flu	▪ Malaria ▪ Whooping cough ▪
Knowledge about the illness	▪ Do not have knowledge	▪ No info.	▪ Do not have knowledge	▪ Do not have knowledge	▪ Mosquito is the cause of malaria
Knowledge on the prevention	▪ Do have knowledge	▪ Camel milk for malaria ▪ Burn the skin on hepatitis	▪ Use traditional herbal medicine ▪ Cauterization for jaundice	▪ Do not have knowledge	▪ People use animal fat for prevention
Acquisition of firsthand advice/info.	▪ Mosque ▪ Sheikh	▪ Sheikh ▪ Relatives ▪ Experienced person	♦ Experienced/knowledgeable person in the community	▪ Religious healer ▪ Nearest doctor	▪ Nearest doctor ▪ Religious healer ▪ TBAs
Usefulness of the advice	▪ Useful unless some one is dying, because the patient recovers	▪ Advice of experience person is useful ▪ Help to decide where to take the sick person	▪ Some times useful ▪ Helps to decide	▪ In lack of doctor, advice are not much useful	▪ Mostly useful ▪ People suffer a lot in lack of doctor
Preferred/trust channel to have info. on health	▪ Head of the family (men)	▪ Radio ▪ Religious leader ▪ Mobile microphone	▪ Radio ▪ Health center ▪ Doctor ▪ Quranic school	▪ Radio	▪ Radio ▪ People coming form town
Reasons for trust	▪ Do not have any other choice	▪ Radio is available and health service is not available ▪ Sheikh knows religious treatment	▪ In lack of health professional people are suffering ▪ Many have radio ▪ Quranic school is a learning place	▪ It can reach to many people	▪ Many have radio ▪ In coming brings new information

The above charts have revealed that **malaria, anemia, malnutrition, tuberculosis, and diarrhea are the most common diseases across the country**. In the NE the rural and the nomadic target groups have added **measles** as another common disease. In the NW problems of

**reproductive health and measles** were also included in the common illness. Most of the target groups in all settlements are more or less aware of causes and symptoms of the common diseases even though **they have not clearly mentioned about the required precaution for prevention of the disease. MCH, hospital, pharmacies, religious healer, and experienced fellow persons are the sources of first hand information in need of advice on health for the urban target groups. Where as MCH, religious leader/healer, TBAs are the first source for the rural and the nomadic target groups where they seek advice in need. Some of the target groups mentioned that seeking of advice depends on the type of illness. If the illness is due to some evil spirit then they seek advice from the religious healer who recites relevant verses of the Qura'n. All the target groups mentioned if the symptoms persist then they look for the doctors or near by hospitals in the town especially in the rural and the nomadic areas.**

Regarding the usefulness of the advice majority of the target groups in all settlements mentioned that generally the given advice/information are useful, if the sick person follows the advice properly. Most of the target groups mentioned that mostly the advice of health institutions and workers are useful. Whereas advice of the religious and traditional healers are useful for minor and spiritual problems.

### **5.2.1. Most Common Illness:**

- **Elderly women:**

The elderly women in all population groupings of all three zones mentioned Malaria, Anemia, TB, and diarrhea as the most common disease in their community. Measles, malnutrition, whooping cough, and jaundice are some other additions made by the elderly women of the NW. Few of the urban elderly women in the NE and the CSZ mentioned about the infectious disease of women, as one of the common diseases among women. Although they did not like to mention the disease openly however, it clearly indicates the rampant problem of sexually transmitted disease and other venereal diseases in Somalia. UNICEF/WHO conducted KAP survey and Zero prevalence survey on HIV/AIDS also has revealed the wide spread problem of STDs in Somalia.

The rural elderly women of the NE have mentioned pre-natal death as a common problem of the rural women. Where as measles is mentioned as one of the common diseases in the rural and the nomadic settlements.

- **Adult women:**

Alike the elderly women, the adult women in all population settlements of all zones mentioned malaria, diarrhea, TB, and measles as the common illness. Miscarriage and jaundice are some other common health problems reported by women of the NW.

- **Youth Girls:**

The entire groups of youth girls in all three zones mentioned the same malaria, diarrhea, and TB as the most common disease like their mothers and grandmother. Similarly the rural and the nomadic girls of the NE added anemia and measles in the list. Young girls of the NW added whooping cough and problem of reproductive health.

- **Youth Boys:**

In all zones young boys' opinion on the common illness corresponds with the other groups' opinion as well.

- **Male:**

Male target groups in all population grouping of all zones opined same as other target groups about the common illness.

### **5.2.2. Knowledge about the illness:**

- **Elderly Women:**

The elderly women in all three settlements of the NE reported that they do not know much about the common illness. Whereas in the CSZ they mentioned that mosquito causes malaria and diarrhea and cholera are caused by polluted water. *No information is given in the NW.*

- **Adult women:**

The adult women in all population groupings of the NE explained some of the causes and symptoms of the common illness that malaria has fever, bitterness, and body ache, and mosquito causes it; measles have fever and spots on the body; TB has weight loss and cough. *No information is given in the NW and the CSZ.*

- **Youth Girls:**

Above chart reveals that young girls in the NE are more informed than the adult and elder women about the causes, symptoms, and prevention of the common diseases in all settlements. *No information is given in the NW and the CSZ.*

- **Youth Boys:**

All of the young boys groups expressed same knowledge like other groups about the illness in the NE. In the NW, the urban boys mentioned that there is ignorance about the disease like constipation is believed the cause of malaria. Furthermore, a TB infected person tries to hide it rather than to look for treatment. Most of the rural and the nomadic boys responded that they do not have adequate knowledge of the common illness.

- **Male:**

Alike all other groups, men in the NE also have the same level of knowledge about the common illnesses in their community. Male in the NW reported that poor health and sanitation and malnutrition are the causes of the common diseases. *No information is given in the CSZ.*

**The discussion reveals that target groups are aware of the causes and symptoms of the common illness to a certain level.**

### **5.2.3. Knowledge on the prevention:**

- **Elderly women:**

In the urban areas of the NE and the CSZ, the elderly women opined that treatment, support, medicine, mosquito nets, awareness about the disease etc. are the way to prevent the commonly prevalent diseases. The rural and the nomadic elderly women in all zones opined to seek traditional healing, reading the *Qura 'n* and prayer of the *Allah* are the way to prevent diseases.

- **Adult women:**

Most of the adult women mentioned that mosquito nets; cleanliness of house; vaccines; chlorinating of drinking water; washing hands properly are some of the preventive methods to control the existing common diseases. Some of the nomadic adult women mentioned that recital of the *Qura 'n* can prevent many diseases. **The response reveals that most of the adult women**

**are aware of the prevention of the existing common diseases to some extent but tend to follow the traditional practice due to their belief and also because of economic condition.**

▪ **Youth Girls:**

The young girls in the NE have mentioned that mosquito causes malaria which can be prevented from use of nets; unclean water and poor sanitation cause diarrhea which can be prevented by chlorinating drinking water; and vaccines can prevent measles. Besides doctor's advice, insecticide, and awareness of housewives are the prevention mentioned by the youth girls in general.

In the NW most of the girls said parents are the one who takes preventive measures and gives traditional herbs and treatments. Some of the nomadic girls mentioned the cauterization or burning of skin is used as jaundice treatment. Others mentioned they do not have knowledge on prevention.

▪ **Youth Boys:**

Alike the female age mates young boys also mentioned almost same kinds of preventive know how about the common illness in the NE. In the NW almost all of the boys groups mentioned that they do have knowledge on prevention of the common diseases. While some of the rural and the nomadic boys said that there is no health post in their area where they can learn about prevention.

**It can be deduced from the discussions that youths are aware about the preventive methods of the common illness, however, implementations depends so much on the parents and the resources of the family indicating that young boys and girls have less say in the health practice of the family.**

▪ **Male:**

The urban men groups in the NE have different opinion on prevention than others. They responded that maintaining good sanitation, increasing health centers and financial support to health services, and informing people using all communication channels can prevent all kind of diseases. The Rural and the nomadic male groups mentioned they do not know about the prevention.

The urban men in the NW mentioned that ORS and the tablets are given for diarrhea and malaria, where as the rural men mentioned malaria could be prevented cultivating fish in the stagnant water ponds, and vaccines can prevents measles. However, nomadic men mentioned use of animal fat on the body can protect mosquito bite and would prevent from malaria.

**The discussion indicates that generally the urban target groups are aware of the medical preventive methods whereas the rural and the nomadic target groups still have faith and practice the traditional/ religious methods and many of them do not have enough knowledge on prevention of the common illness.**

#### **5.2.4. Acquisition of firsthand advice/information:**

▪ **Elderly women:**

The charts have clearly indicated that the urban elderly women in all zones seek even the first hand advice from the nearest health center, pharmacies/ private clinic or doctors. Where as the rural elderly women have to go to the nearest town or the Islamic scholar (religious leader/healer); and the nomadic elderly women will prefer to seek advice of the religious healer or traditional healer in need. Many rely on the advice of the fellow villagers, elders, or the male members of the family. Only few of them have mentioned doctors as the source of first hand

advice. Some of the urban elderly women in the CSZ mentioned that acquisition of advice depends on the type of sickness. If the disease is related with superstitions they would seek advice from the religious/ traditional healers.

▪ **Adult women:**

In all zones the urban adult women reported that pharmacies, hospital, MCH, and religious healers are the sources of the first hand advice in need. For the rural adult women doctor, MCH, religious leader, and women's traditional meeting are the sources of firsthand advice. The nomadic women seek firsthand advice from the religious healer, husbands, experienced person, and doctor. Most of the rural and the nomadic women mentioned that they would first go to the religious Sheikh for advice. If the problem persists, then only health centers or health workers are contacted. For the nomadic women fellow men of the community and male members of the family are also the sources of information. **Some of the urban adult women in the CSZ even mentioned that there are people who do not consult doctors, which is bad, because the Prophet has ordered to treat the sickness.**

▪ **Youth Girls:**

The urban and the rural young girls of all zones are close to the adult and elderly women seeking firsthand information in need. They reported that health workers (doctor, MCH, TBA), religious leader, and parents are the sources of the firsthand information. However, for the nomadic young girls any experienced person other than the parents and health worker could also be the source of the firsthand information depending on the situation. Some of them mentioned their husband as firsthand source of advice. Few of them expressed deep faith in the recital of the *Qura'n* and religious leader. Additionally, some of the rural girls in the CSZ mentioned women's tea party as the source of their information where they discuss the problem and get advice. The nomadic girls in all zones reported that they would go to the religious leader at first then to the town for medicine.

▪ **Youth Boys:**

The urban young boys of all zones commonly mentioned the hospital, doctor, parents and experienced person, and health centers as the sources of the firsthand information in need. The rural boys generally mentioned MCH, health worker and pharmacy as the sources of the firsthand information in need in all zones. However, the rural young boys of the CSZ added Sheikh in their list. Whereas the nomadic boys seek firsthand information from the doctors, experienced person in the community, and mothers. Some of the nomadic boys in the NE mentioned religious leaders also as the firsthand source of information, however, in CSZ religious leader is mentioned as an important source.

▪ **Male:**

The urban males in all zones reported that the firsthand information is acquired from the doctor, health center, pharmacies and parents. Some of them mentioned religious leaders also. Whereas the rural and the nomadic males mentioned that MCH, community health worker, religious healer, and traditional healer are the sources of the firsthand information in need. Some of the nomadic males in the CSZ mentioned that they believe on the *Allah only because the Allah can cure and make people sick*, therefore they go to the religious healer. Some others mentioned killing of an animal for healing the sick person. Some of the nomadic men in the NW mentioned TBAs also as their source of information in need.

**The discussions have indicated that target groups of all age groups are dependent on religious and traditional healing, notwithstanding the availability of health services in all zones.**

### **5.2.5. Usefulness of the advice:**

- **Elderly women:**

Regarding the usefulness of the advice received the urban elderly women in all zones responded that advice are generally useful, and if the instructions given are followed they are very useful for the recovery. Contrary to the urban elderly women the rural and the nomadic elderly women found difficult to indicate the usefulness of the advice received, as most of the time it is matter of faith. They also mentioned that there are many new diseases so the advice given by the traditional healers may not be helpful. Many of them reported that they do not have ability to send the patient to the doctors all the time, therefore, they have to consult the religious healers or traditional healers. Most of the elderly women in the CSZ also mentioned likewise that if the advice is followed properly then it is useful. Further, advice of the health center and health workers are helpful to recover and decide if consultation with the doctor or the hospital is necessary. Some others reported that medical advice helps to identify the wrongs of traditional healers.

**The response reveals that the urban elderly women despite their age are positive to the medical treatment where as the rural and the nomadic elderly women are still following the traditional way because of their limitations. The response also indicates that the urban elderly women are much more in access to the medical facilities than the rural and the nomadic elderly women, which is apparently causing persistence of the traditional practices whether or not useful to keep the health of the people. Further, from the response it can be deduced that “access” is not limited to the physical presence of the health facilities but also extended to the capacity of the people to use the facilities in terms of distance, money, and time required. The traditional and the religious healers have important role and space in the rural and the nomadic health system, although people are aware that medical advice can even improve the mistakes of these traditional healing.**

- **Adult women:**

Almost all of the women groups in all zones clearly mentioned that advice received are useful to prevent the disease and to get well, as well as to decide where to take the patient for the treatment. Where as the rural women mentioned that usually the advice from the MCH and the health center are useful although they have mentioned religious healer as one of the source of the first hand advice. Some of the nomadic women in all zones mentioned that they would go to the Sheikh first then only to the town to consult the doctor or the health center. The response indicates that mostly nomadic women are not in easy access to the health centers and have to

consult religious leaders for immediate advice in need. However, some of the nomadic women in the NE explained that **it is important to consult the doctors because they have important information, *only those being next to death will not benefit from doctors.*** Few others mentioned if the *Allah wishes you could get good advice from the doctors.*

**The discussion indicates that in the rural and the nomadic areas, religious healer/leaders have common space as doctors and other health workers on health problems. The rural and the nomadic women are on the crossroads of modern and traditional treatment pattern, which they chose as per their convenience and seriousness of the problem.**

▪ **Young Girls:**

The young girls in all population groupings of all zones emphasized the usefulness of the received advice in need as they mentioned such advice helps to understand causes, prevention, and precaution to be taken and to recover from the illness. Some of the urban girls in the CSZ mentioned that they would go to their parents at first, however, most of them mentioned that doctors are the skilled people, they know the disease and always provide useful advice. But the nomadic girls from the CSZ reported that the advice are not that much helpful however, ***they do not have much choice in lack of adequate medical care.*** In the NW also most of the rural and the nomadic girls complained about the lack of health facilities and mentioned ***in lack of that people have to go for the advice of traditional healer whether or not useful.***

**The response indicates that young girls trust that their parents also have useful advice and have to depend on them. According to the discussion with the elderly and adult women they mostly seek advice from the religious leader/ traditional healers at first, specially, in the rural and the nomadic areas. That signifies the perpetuation of the traditional practices may or may not be useful for their health due to the perceptions of older generation, access, affordability, availability of health facilities, and time.**

▪ **Young Boys:**

All of the young boys in all zones expressed that received advice/ information are found useful to recover and prevent diseases. Some of them mentioned that advice also helps to decide whether the patient needs to see the doctor. **Some of them expressed their agony that in lack of adequate health service and medicine whatever information and advice they receive becomes useless.**

▪ **Male:**

Most of the urban male groups in all zones are positive about the usefulness of the firsthand advice and mentioned that it helps to recover from illness. However, rural males are unclear about the usefulness of advice. Nomadic male group mentioned that advice are useful if practiced properly. Some of the urban males in CSZ mentioned that consulting health centers etc is always helpful and regulating the contact with doctors will wash out the misperceptions about the health workers and professionals. Some others indicated the ignorance of people about their health problems. They expressed that even if men advice their wives to visit health centers women generally like to consult traditional healer at first. Some of the nomadic men in NW mentioned mostly the received advises are useful but people are suffering in lack of doctor and health services.

**The response divulges that presence, access of physical facilities, and ignorance of people has direct impact on the health practice and behavior of people. For instance the chart reveals that the urban male are using/consulting available health services more than the rural and the nomadic males. Despite the awareness that medical services even could correct**

the mistakes of the traditional and religious healing the rural and the nomadic people are using this traditional methods of healing.

### **5.2.6. Preferred channel to receive information on health and reasons for preference:**

#### **▪ Elderly women:**

The chart indicates that the urban elderly women in the NE prefer radio, mobile microphone, and newspaper to get information on health as radio is listened by many, and microphone can be heard even from distance. The rural elderly women preferred religious leader, mosque, and radio because mosque is the only place to have reliable information and religious leader always talks what is good for the people. Some of them mentioned they prefer their husband and other men in the community, as men have access to many information. The nomadic elderly women prefer doctor, religious healer, and health center to get information on health. They reasoned that doctor's information are useful. Some of them mentioned that religious healer makes them feel good. Few of them mentioned women's meeting as their preferred channel to receive information because that is the place where they can discuss and learn many things.

In the NW, the urban elderly women preferred radio and mobile microphone reasoning that many people have radio and mobile microphone is fast and reach everywhere. The rural elderly women preferred MCH, mosque, teashop, and local administration reasoning that those are the available channels and have trust on them. The nomadic elderly women preferred head of the family reasoning that they do not have other choice and have trust on their information.

**The response reveals the disparities of choices of preferred channels to receive information on health among the urban, rural, and nomadic elderly women, which is also reflecting the access, availability, and existence of the various channels in the respective area.**

#### **▪ Adult Women:**

The urban adult women of the NE preferred mobile microphone and radio to receive information on health. The urban women of the CSZ added TV and newspapers in the list and the urban women of the NW added doctors in the list. Except radio and mobile microphone the rural women in the NE have preferred MCH, community health workers, and religious healer and the rural women in the CSZ added women's tea party and elders in the list. Where as in the NE, the nomadic women have preferred community and religious meeting, health center, and radio. In the CSZ the nomadic women preferred radio, mobile microphone, and community leader to receive information on health. The rural women in the NW preferred radio, mobile microphone, school and community meeting; and the nomadic women preferred radio, religious leader, and mobile microphone. Loudness and mobility are the reasons commonly given for preferring mobile microphone. Reliability, confidence, usefulness, respect and trust on the information are the reasons given for the health center and the religious healer, and community leaders/meetings by the rural and the nomadic adult women.

**The response assures that radio and mobile microphone are the commonly preferred channels of all women groups in all zones. Apart from radio, MCH, religious and community leaders/meetings are also among the preferred channels among the rural and the nomadic women, which indicates the necessity to well inform the latter channels as sources of information.**

#### **▪ Youth Girls:**

In all zones the young girls preferred radio, school (Quranic and formal), mobile microphone, health centers, and health professionals depending on the availability of these channels to receive information on health. In addition to adult women's choices the urban girls chose schools as one of the preferred channel which indisputably has important role in any young person's life. Some of them mentioned Islamic preaching (religious meeting) as their preferred channel. Many rural and nomadic girls in the NW preferred teashop also.

They reasoned that all people can get information from radio; mobile microphone reaches every where; and from school one can learn lots of things. Those who mentioned religious leader/meeting reasoned that religious leaders are respected/trusted persons in the community and always give true information and the meeting is useful for all, teaching good things. The rural girls added that doctors are knowledgeable persons and people have confidence on them. These responses indicate that the rural girls are one step forward than the rural adult and elderly women. Contrary to the urban and the rural young girls, the nomadic young girls chose religious healers, doctors, and teashop as their preferred channel with the reasons that religion practiced properly keeps people healthy and men bring useful information from the teashops. **The response correlates the existing situation and practice of seeking traditional advice at the beginning, if the symptoms persist or the patient becomes serious then only the doctor or the health center would be looked. On the other hand, the Islamic religion contents lot of directions and instruction on health of people, which in fact can help people to be healthy if followed with proper understanding.**

▪ **Youth boys:**

In the NE, the urban boys preferred radio, mosque, and community meeting to receive information on health reasoning about the accessibility of radio, its package of information on health, and importance of community meeting for the people. Some of them chose mobile microphone as it can attract people easily. The urban boys of the CSZ added religious leader and video in the list of preferred channels reasoning that they like to watch it as it gives lot of information. *As mentioned earlier in the urban areas mushrooming video parlors showing various movies and satellite programs are gaining its popularity.* The rural boys chose radio and mobile microphone as their preferred channel and the nomadic boys, in addition to radio and mobile microphone chose mosque and community meeting also as their preferred channels to receive information on health. Reasoning same as urban and rural boys.

Urban boys in NW preferred radio, TV, mobile microphone and Sheikh; rural boys preferred MCH, radio, mobile microphone, and community meeting; and nomadic boys preferred radio reasoning availability, common practice of listening radio, trust and reliability of information.

▪ **Male:**

In the NE the urban male groups preferred radio, mobile microphone, and mosque to receive information on health reasoning exactly same as other groups who have chosen these channels. The rural and the nomadic male groups added MCH and the mosque along with radio as their preferred channels saying that religious leader preaches good information in the mosque and radio gives new information about the disease. The preference of the urban males in the CSZ and the NW is more or less similar to the preference of the males of the NE whereas the rural male in the CSZ added community leader/meeting and leaflets in the list. Likewise, the rural and the nomadic men of the NW, included school and incoming person from the town reasoning that children can learn health education in the school and bring the information home, and incoming person from the town comes with new information.

□ **Main findings:**

- The study reveals that there is not much disparity in preference of channels, use of the existing channels and health practices among the zones.
- Malaria, diarrhea, TB, anemia, malnutrition and measles are the most common illness in all settlements. Response of the key informant (community leader and religious leader) also confirms this finding as they have informed the same diseases as the common disease of their area/community in all population groupings of all zones.
- Most of the target groups in all of the population groupings are generally aware/informed about the common illness of their community, its causes, and prevention. Furthermore, youths (both boys and girls) are more informed/aware about the causes and prevention of common illness than their elders and mothers. Despite the adequate information on prevention the diseases are rampant. The response of the target groups suggests couple of reasons in this regard.
  - To be informed about the disease is not enough to bring changes in health practice and behavior. Accessibility, affordability, and physical presence of health services have direct impact on health practice and behavior; and are major causes of non-implementation of the knowledge they have. For instance, knowledge of how to control malaria is not enough; people should have ability to buy mosquito net, medicine, and insecticide as well.
  - Knowledge and awareness of youths are either not heard or they have less decisive role in the family and society. Response of the youths suggests that in Somali social values and responsibility, taking care of family health is considered as adult's business. Hence, advice or initiation of younger generation is not valued. On the other hand, youths are more dependent on their elders in terms of the resources and decision-making.
- Radio, mobile microphone, health centers, and religious leader are commonly preferred channel of all target groups. However, in the rural and the nomadic areas experienced fellow persons for adult groups and parents for young groups have important role in providing firsthand information in need.
- Specially, in the rural and the nomadic settlements religious healer and traditional healer have specific space, and are in need of reliable information on health.
- Men are one of the important sources of information for women in the rural and the nomadic settlements as they are more in access to other information sources.

□ **Recommendations:**

- Radio and mobile microphone should be massively used for information dissemination and health education and campaigning.
- To reach the rural and the nomadic population both modern and traditional channels should be used. Since the channels of art form are not preferred channels to receive information on health, use of such channels could be useful for campaigning and mobilization rather than providing health education.
- Firsthand sources of information should be equipped with adequate and appropriate information on health.

- To bring positive changes in health practice and behavior, along with appropriate information capacity of people to use the information should be built.
- Islamic teachings on health need to be included in awareness messages.
- Mosque, religious leader, and community leaders should be empowered and mobilized on health teachings/information sharing, and increasing people's confidence.
- Youths should be encouraged and empowered to make space in decision making and access to the resources.
- Realizing the popularity of TV and video parlors such channels should be provided appropriate package of information on health awareness and education. During the interview most of the video parlors have shown their interest to include such educational videos in their shows if available.
- Health awareness messages should focus basically on the common illness and its prevention. Health centers and workers should be targeted with appropriate information in order to empower them as the sources of the firsthand information.
- A survey should be conducted to identify the locally available methods of prevention, so that acquired knowledge could be applied as well. For instance to prevent malaria women in small groups in many areas can be trained to prepare mosquito net in collaboration of other organizations to minimize the cost of the mosquito net and to make it affordable. This can be a source of income generation as well.

### 5.3. Immunization: Chart: 3

NE-Urban					
Questions discussed	Response of the target groups				
	Eld. women	Adult women	Youth(G)	Youth(B)	Male
Whether children of the target groups were immunized	<ul style="list-style-type: none"> <li>▪ Yes</li> </ul>	Yes	Yes *	Yes	Yes
What is known about immunization & how	<ul style="list-style-type: none"> <li>▪ It is to prevent children from disease</li> <li>▪ Heard from mobile teams</li> </ul>	<ul style="list-style-type: none"> <li>▪ It is for prevention of disease</li> <li>▪ Heard from radio and mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>▪ It is for prevention from dangerous disease</li> <li>▪ Heard from radio and newspaper</li> </ul>	<ul style="list-style-type: none"> <li>▪ Vaccine is to prevent from dangerous disease</li> <li>▪ It is to protect community from disease</li> <li>▪ Heard it from radio and international agencies like UNICEF, WHO, and mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>▪ Vaccination gives children resistance to all communicable disease, protects and fight with disease</li> <li>▪ Heard from radio and health centers</li> </ul>
Source of first hand info. in need of immunization	<ul style="list-style-type: none"> <li>▪ Health centers and MCH</li> </ul>	<ul style="list-style-type: none"> <li>▪ MCH</li> <li>▪ Doctors</li> </ul>	<ul style="list-style-type: none"> <li>▪ Health center</li> <li>▪ Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>▪ Doctors</li> <li>▪ Health centers</li> </ul>	<ul style="list-style-type: none"> <li>▪ MCH</li> <li>▪ Health centers</li> </ul>
Best channel to convince people about advantage of immunization	<ul style="list-style-type: none"> <li>▪ Mobile microphone</li> <li>▪ Radio</li> <li>▪ Newspaper</li> </ul>	<ul style="list-style-type: none"> <li>▪ Mobile microphone</li> <li>▪ Health centers</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Mobile microphone</li> <li>▪ Health centers</li> <li>▪ Newspaper</li> </ul>	<ul style="list-style-type: none"> <li>▪ Mobile microphone</li> <li>▪ Radio</li> <li>▪ Newspaper</li> </ul>	<ul style="list-style-type: none"> <li>▪ Mobile microphone</li> <li>▪ Radio</li> <li>▪ Newspaper</li> <li>▪ Community meeting</li> </ul>
Reasons to trust particular channel	<ul style="list-style-type: none"> <li>▪ mobile microphone can be heard every where</li> <li>▪ Most of the people have radio</li> </ul>	<ul style="list-style-type: none"> <li>▪ Mobile microphone can be heard every where</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio is everywhere</li> <li>▪ Newspaper is cheap</li> <li>▪ Mobile microphone can reach even the remote area</li> </ul>	<ul style="list-style-type: none"> <li>▪ Mobile microphone can reach every where</li> <li>▪ Radio is everywhere</li> </ul>	<ul style="list-style-type: none"> <li>▪ People like mobile microphone</li> <li>▪ Radio is for everybody</li> </ul>

<b>NE-Rural</b>					
Whether children of the target groups were immunized	<ul style="list-style-type: none"> <li>Yes</li> </ul>	Yes	Yes	Yes	Yes
What is known about immunization & how	<ul style="list-style-type: none"> <li>Don't know much about vaccination</li> </ul>	<ul style="list-style-type: none"> <li>Vaccination is prevention from killing disease that affect the children</li> <li>It is good for children</li> <li>Heard from the vaccination team, radio, and MCH</li> </ul>	<ul style="list-style-type: none"> <li>Vaccination is important for children</li> <li>Heard it from the radio</li> </ul>	<ul style="list-style-type: none"> <li>Heard about the advantage of vaccination from vaccination team and radio</li> </ul>	<ul style="list-style-type: none"> <li>Vaccine is good for children</li> <li>It is good only if Allah is willing to treat someone</li> <li>Heard about it from MCH</li> </ul>
Source of first hand info. in need of immunization	<ul style="list-style-type: none"> <li>MCH</li> </ul>	<ul style="list-style-type: none"> <li>Mobile health team</li> <li>MCH</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>MCH</li> <li>Health team</li> <li>Religious scholar</li> </ul>	<ul style="list-style-type: none"> <li>Village health worker</li> <li>Vaccinating team</li> </ul>	<ul style="list-style-type: none"> <li>MCH</li> <li>Vaccination team</li> <li>Local teacher</li> </ul>
Best channel to convince people about advantage of immunization	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>MCH and health worker</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Give community awareness</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone</li> <li>Radio</li> <li>Health centers</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone</li> <li>Mosque</li> <li>Community meeting</li> </ul>
Reasons to trust particular channel	<ul style="list-style-type: none"> <li>Not available</li> </ul>	<ul style="list-style-type: none"> <li>Have confidence on MCH and health worker of the area</li> </ul>	<ul style="list-style-type: none"> <li>People pay attention to mobile microphone when there is important info.</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone can be heard every where</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone can be easily heard</li> <li>Religious leader gives lot of info. in the mosque</li> </ul>
<b>NE-Nomadic</b>					
Whether children of the target groups were immunized	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Yes (some)</li> <li>No (others), mentioned never faced problem without vaccine, have phobia with vaccination</li> </ul>	<ul style="list-style-type: none"> <li>Yes (some)</li> <li>No (others)</li> </ul>	<ul style="list-style-type: none"> <li>Yes (some)</li> <li>No (others)</li> </ul>	<ul style="list-style-type: none"> <li>Yes, if vaccinator reach in the area</li> </ul>
What is known about immunization & how	<ul style="list-style-type: none"> <li>Heard from vaccination groups that it protects from disease</li> <li>Some reported they do not know about immunization</li> </ul>	<ul style="list-style-type: none"> <li>It is for prevention of disease, heard it from the doctor,</li> <li>In the community</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Vaccination is good for children</li> <li>Heard it from experienced people and in the community</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Vaccination is good for communicable disease</li> <li>Children get better health after vaccinated</li> <li>Heard it from people coming from village</li> <li>From vaccinating team</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>It is used for prevention purpose</li> </ul>
Source of first hand info. in need id immunization	<ul style="list-style-type: none"> <li>Experienced person</li> <li>Islamic scholar</li> </ul>	<ul style="list-style-type: none"> <li>Doctors</li> <li>Experienced people</li> </ul>	<ul style="list-style-type: none"> <li>Parents</li> <li>Doctors</li> <li>Elder men</li> </ul>	<ul style="list-style-type: none"> <li>Person with experience</li> <li>Doctor</li> <li>Parents</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Doctors</li> </ul>
Best channel to convince people about advantage of immunization	<ul style="list-style-type: none"> <li>Radio</li> <li>Women's meeting</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Health centers</li> <li>Community meetings</li> </ul>	<ul style="list-style-type: none"> <li>Community meetings</li> <li>Parents and relatives</li> <li>Radio</li> <li>Quranic School</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>Community meeting</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Traditional leader</li> </ul>
Reasons to trust particular channel	<ul style="list-style-type: none"> <li>Those are the available channel</li> </ul>	<ul style="list-style-type: none"> <li>All people listen to radio</li> </ul>	<ul style="list-style-type: none"> <li>Community meeting gives lot of information to people</li> <li>Quranic school teaches many things</li> </ul>	<ul style="list-style-type: none"> <li>Many people listen to radio</li> <li>People rely on the info. Given by the mosque</li> </ul>	<ul style="list-style-type: none"> <li>Radio is always hanged with the shoulder of the nomads</li> </ul>

<b>CSZ-Urban</b>					
Questions discussed	Response of the target groups				
	Eld. women	Adult women	Youth(G)	Youth(B)	Male
Whether children of target groups were immunized	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Yes (from EPI)</li> </ul>	<ul style="list-style-type: none"> <li>Yes (from health center)</li> </ul>	<ul style="list-style-type: none"> <li>Yes (EPI, health center)</li> </ul>
What is known about immunization & how	<ul style="list-style-type: none"> <li>It is for prevention of disease</li> </ul>	<ul style="list-style-type: none"> <li>It is for prevention of disease</li> </ul>	<ul style="list-style-type: none"> <li>To protect children from disease</li> <li>It prevents six killer diseases</li> <li>It increases resistance</li> </ul>	<ul style="list-style-type: none"> <li>It is for prevention of disease</li> <li>Children under five need the vaccines</li> </ul>	<ul style="list-style-type: none"> <li>To protect children from six killer disease</li> </ul>
Source of first hand info. in need of immunization	<ul style="list-style-type: none"> <li>Vaccinating team</li> <li>EPI team</li> <li>Doctors</li> </ul>	<ul style="list-style-type: none"> <li>Doctors</li> <li>UNICEF</li> <li>Vaccinators</li> </ul>	<ul style="list-style-type: none"> <li>Physician</li> <li>Health worker</li> <li>Health center</li> </ul>	<ul style="list-style-type: none"> <li>Health center</li> </ul>	<ul style="list-style-type: none"> <li>Health center</li> <li>Physician</li> <li>MCH</li> </ul>
Best channel to convince people about advantage of immunization	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>Religious leader</li> <li>MCH</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>TV</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>MCH</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>TV</li> <li>Mobile microphone</li> </ul>
Reasons to trust particular channel	<ul style="list-style-type: none"> <li>Radio is with everybody</li> <li>Mobile microphone is loud and reaches everywhere</li> </ul>	<ul style="list-style-type: none"> <li>Radio is available</li> <li>Microphone reaches everywhere and sensitizes people</li> </ul>	<ul style="list-style-type: none"> <li>All have own radio</li> <li>TV is available</li> <li>Radio gives the message repeatedly</li> <li>Microphone can be heard easily</li> </ul>	<ul style="list-style-type: none"> <li>Radio gives many information</li> <li>It is easy to hear mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>All have radio</li> <li>TV is becoming available</li> <li>Easiest communication</li> </ul>
<b>CSZ-Rural</b>					
Whether children of the target groups were immunized	<ul style="list-style-type: none"> <li>Yes (most)</li> <li>No (few)</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>No (all from Gagadud)</li> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>
What is known about immunization & how	<ul style="list-style-type: none"> <li>Preventive for disease</li> <li>Learnt from EPI team, health worker</li> </ul>	<ul style="list-style-type: none"> <li>For prevention</li> </ul>	<ul style="list-style-type: none"> <li>It prevents from disease</li> </ul>	<ul style="list-style-type: none"> <li>Do not know anything (Galgadud)</li> <li>It is for prevention</li> </ul>	<ul style="list-style-type: none"> <li>It is for prevention of disease</li> </ul>
Source of first hand info. in need of immunization	<ul style="list-style-type: none"> <li>EPI team</li> <li>MCH</li> <li>Hospital</li> <li>Village chief</li> </ul>	<ul style="list-style-type: none"> <li>CHW</li> <li>MCH</li> <li>Elders</li> <li>Community chief</li> </ul>	<ul style="list-style-type: none"> <li>EPI team</li> <li>MCH</li> <li>Brothers</li> </ul>	<ul style="list-style-type: none"> <li>Physician</li> <li>Religious leader</li> <li>Community leader</li> <li>Parents</li> </ul>	<ul style="list-style-type: none"> <li>Doctor</li> <li>Health center</li> <li>MCH</li> <li>Religious leader</li> </ul>
Best channel to convince people about advantage of immunization	<ul style="list-style-type: none"> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>Mobile microphone</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>MCH</li> <li>Radio</li> <li>Mobile microphone</li> <li>Women's tea party</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone</li> <li>Radio</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Community leader</li> </ul>
Reasons to trust particular channel	<ul style="list-style-type: none"> <li>Could be listened from distance</li> </ul>	<ul style="list-style-type: none"> <li>Radio is affordable</li> <li>Microphone can easily inform everyone</li> <li>Respect on the religious leader</li> </ul>	<ul style="list-style-type: none"> <li>They have better knowledge</li> <li>It is easy to get info. from the radio and microphone</li> <li>Women come from different place</li> </ul>	<ul style="list-style-type: none"> <li>Easily heard</li> <li>Most of the people have radio</li> <li>Respect</li> </ul>	<ul style="list-style-type: none"> <li>It is trusted</li> <li>Believe community leader</li> </ul>
<b>CSZ-Nomadic</b>					
Whether children of the target groups were immunized	<ul style="list-style-type: none"> <li>Yes</li> <li>No (all from Fafah Dun nomad in Gedo region)</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Yes (some) No</li> <li>Cannot tell</li> </ul>	<ul style="list-style-type: none"> <li>Yes (many)</li> <li>No (some)</li> </ul>	<ul style="list-style-type: none"> <li>Yes (many)</li> <li>No (some)</li> </ul>
What is known about immunization & how	<ul style="list-style-type: none"> <li>Do not know much (some)</li> <li>It is for prevention</li> </ul>	<ul style="list-style-type: none"> <li>To prevent children from disease</li> <li>Good for children's health</li> </ul>	<ul style="list-style-type: none"> <li>It is treatment of polio and measles</li> <li>Cannot tell(all from Fafah Dun nomad in Gedo)</li> </ul>	<ul style="list-style-type: none"> <li>It is prevention of disease</li> </ul>	<ul style="list-style-type: none"> <li>It is the prevention of six killer diseases</li> <li>Do not know</li> </ul>

			region)		
Source of first hand info. in need of immunization	<ul style="list-style-type: none"> <li>Health worker</li> <li>Health staff</li> <li>Community chief</li> <li>Men</li> </ul>	<ul style="list-style-type: none"> <li>Physician</li> <li>CHW</li> <li>Vaccinators</li> </ul>	<ul style="list-style-type: none"> <li>Vaccinating team</li> <li>Health worker</li> <li>Pharmacies</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Health worker</li> </ul>	<ul style="list-style-type: none"> <li>Health center</li> <li>Religious leader</li> <li>Doctor</li> </ul>
Best channel to convince people about advantage of immunization	<ul style="list-style-type: none"> <li>Mosque</li> <li>Mobile microphone</li> <li>Radio</li> <li>Men</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone</li> <li>Radio</li> <li>CHW</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>Mosque</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Community leader</li> <li>Mobile microphone</li> <li>Radio</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone</li> <li>Radio</li> <li>Community leader</li> </ul>
Reasons to trust particular channel	<ul style="list-style-type: none"> <li>Mosque is a meeting place and reliable info. comes out</li> <li>Everyone has radio</li> <li>Microphone can be heard everywhere</li> </ul>	<ul style="list-style-type: none"> <li>Loud and reaches everywhere</li> <li>Have trust on CHW</li> </ul>	<ul style="list-style-type: none"> <li>It is available everywhere</li> <li>Accessible</li> <li>Respect</li> <li>Everybody listens radio</li> </ul>	<ul style="list-style-type: none"> <li>Community leader is responsible person</li> <li>Loud voice</li> <li>Respect</li> </ul>	<ul style="list-style-type: none"> <li>Easy to hear</li> <li>Many have radio</li> <li>Trust</li> </ul>
<b>NW-Urban</b>					
Whether children of the target groups were immunized	<ul style="list-style-type: none"> <li>Yes</li> </ul>	Yes	Yes	Yes (few) No (many)	Yes
What is known about immunization & how	<ul style="list-style-type: none"> <li>Prevention against six killer disease</li> <li>Vaccine carries AIDS virus</li> </ul>	<ul style="list-style-type: none"> <li>It is a tool for prevention of disease</li> <li>Have seen death and illness because of it</li> <li>It is for birth control</li> </ul>	<ul style="list-style-type: none"> <li>Prevention for many diseases</li> </ul>	<ul style="list-style-type: none"> <li>Do not know much</li> </ul>	<ul style="list-style-type: none"> <li>It is to prevent disease</li> <li>Mentioned problems caused by vaccination</li> </ul>
Source of first hand info. in need of immunization	<ul style="list-style-type: none"> <li>Health professional</li> <li>Doctor</li> </ul>	<ul style="list-style-type: none"> <li>Doctor</li> <li>Health post</li> <li>MCH</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone</li> <li>Vaccinating team</li> <li>Radio</li> <li>MCH</li> </ul>	<ul style="list-style-type: none"> <li>Doctor</li> <li>Mobile microphone</li> <li>Poster</li> </ul>	<ul style="list-style-type: none"> <li>Doctor</li> <li>Radio</li> </ul>
Best channel to convince people about advantage of immunization	<ul style="list-style-type: none"> <li>Mobile microphone</li> <li>Ministry of health</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Health post</li> <li>Newspaper</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Doctor</li> <li>UNICEF</li> <li>Radio</li> <li>Mobile microphone</li> </ul>
Reasons to trust particular channel	<ul style="list-style-type: none"> <li>Microphone is heard easily</li> <li>Authority gives reliable information</li> </ul>	<ul style="list-style-type: none"> <li>Microphone reaches every where</li> <li>Many have radio</li> </ul>	<ul style="list-style-type: none"> <li>Available</li> <li>Loud and quick</li> </ul>	<ul style="list-style-type: none"> <li>Radio can be listed by any one</li> </ul>	<ul style="list-style-type: none"> <li>Mother can be reached by radio and mobile microphone</li> </ul>
<b>NW-Rural</b>					
Whether children of the target groups were immunized	<ul style="list-style-type: none"> <li>Yes</li> </ul>	Yes	Yes	Yes	Yes
What is known about immunization & how	<ul style="list-style-type: none"> <li>Protection from disease</li> <li>Children under five need it</li> </ul>	<ul style="list-style-type: none"> <li>Immunize children from diseases</li> </ul>	<ul style="list-style-type: none"> <li>Do not have knowledge</li> </ul>	<ul style="list-style-type: none"> <li>It is to prevent from disease</li> </ul>	<ul style="list-style-type: none"> <li>It is against six diseases of children</li> </ul>
Source of first hand info. in need of immunization	<ul style="list-style-type: none"> <li>Mobile microphone</li> <li>Vaccinating team</li> <li>MCH</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone</li> <li>MCH</li> <li>Midwives</li> </ul>	<ul style="list-style-type: none"> <li>Nearest health post</li> <li>Vaccinating team</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Community meeting</li> <li>Sheikh</li> </ul>	<ul style="list-style-type: none"> <li>Vaccinating team</li> <li>Teashop</li> <li>Mosque</li> <li>Elders</li> </ul>
Best channel to convince people about advantage of immunization	<ul style="list-style-type: none"> <li>Mobile microphone</li> <li>Teashop</li> <li>MCH</li> </ul>	<ul style="list-style-type: none"> <li>Teashop</li> <li>Mosque</li> <li>Mobile microphone</li> <li>Local authority</li> </ul>	<ul style="list-style-type: none"> <li>Teashop</li> <li>Health post</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone</li> <li>Radio</li> <li>Vaccinating team</li> </ul>	<ul style="list-style-type: none"> <li>Mosque</li> <li>Teashop</li> <li>Elders</li> </ul>
Reasons to trust particular channel	<ul style="list-style-type: none"> <li>Loud and heard easily</li> <li>Men brings</li> </ul>	<ul style="list-style-type: none"> <li>Those are the available one</li> </ul>	<ul style="list-style-type: none"> <li>Men meet their and brings news home</li> </ul>	<ul style="list-style-type: none"> <li>All people are not literate but all listen radio</li> </ul>	<ul style="list-style-type: none"> <li>Place of union and sharing</li> <li>Men takes</li> </ul>

	information from teashop		▪ Mobile microphone is loud		information to their home
<b>NW-Nomadic</b>					
Whether children of the target groups were immunized	▪ Yes	Yes	Yes	Yes (some)	Yes (most)
What is known about immunization & how	▪ Prevents children from many diseases	▪ It good for children ▪ Many told negative stories	▪ Preventive measure against six diseases of children	▪ Told negative stories	▪ Do not know much
Source of first hand info. in need of immunization	▪ Doctor ▪ Experience person	▪ Radio ▪ Doctor ▪ Vaccinating team	▪ Mobile microphone ▪ Nearest town	Doctor	▪ UNICEF ▪ Knowledgeable person
Best channel to convince people about advantage of immunization	▪ Mobile health team ▪ Radio	▪ Mobile microphone ▪ Health professional	▪ Mobile microphone ▪ Awareness to mothers	▪ Radio ▪ Mobile microphone	▪ UNICEF ▪ Trained local person
Reasons to trust particular channel	▪ People have radio ▪ Mobile health team can reach many places	▪ It reaches every where ▪ They are knowledgeable parson on health	▪ Mobile microphone can reach everywhere ▪ Women can tell each other	▪ Both can reach to many people	▪ UNICEF has experience ▪ Local person can convince easily

*\* Youth groups were asked separate set of questions on immunization as ice- breaker. Viz., do you remember if you were vaccinated? Are your little sisters or brothers are vaccinated?*

The charts on immunization have demonstrated that most of the target groups in all population settings have vaccinated their children, younger siblings and themselves. Some of the participants reported that they have some reservations regarding the vaccine and have not vaccinated some of their children. Most of them are generally aware of the advantage of vaccination that it is for prevention from disease and increasing immunity. However, there is lack of specific information explaining the types of vaccines and their benefits. Radio and mobile microphone are the common channels both for receiving and disseminating information on immunization in all population groupings. In addition mosque, religious leaders, and health centers are the channels used as the firsthand information.

### **5.3.1. Whether children of the target groups were immunized:**

#### **▪ Elderly Women:**

Most of the elderly women in all settlements of all zones mentioned that their children have been immunized. In the CSZ, most of the rural and the nomadic elderly women reported negative. In the NW many elderly women despite their positive response mentioned some stories that *six children died after the vaccine during the first immunization campaign carried out in the Sanag region. Some others mentioned that these vaccines carry HIV/AIDS virus and immunization is a means to spread AIDS in the Horn of Africa.*

#### **▪ Adult women:**

In the NE most of the urban and the rural adult women responded that they have vaccinated their children. Only some of the nomadic women responded positively while others said that they have phobia and have not immunized all of their children. Those who responded negative also mentioned that they never faced problem without vaccine. In the CSZ most of the women

groups said that they have immunized their children. In the NW also most of the women groups said that they have immunized their children. *However, some of them stated that many people believe that vaccine for women is for birth control and women are divorced because of the vaccine. Some of the nomadic women mentioned that children suffered from diarrhea and fever after being vaccinated and even died after three days of vaccination. Therefore, they do not have confidence in the vaccines and vaccinating teams. Furthermore, in lack of qualified doctor they could not verify the problem. They also agreed that such things are happening because of the lack of understanding and adequate knowledge.*

▪ **Youth Girls:**

Most of the urban and the rural youth girls in the NE reported that they and their younger siblings have been immunized. Only some of the nomadic young girls responded positively while others were negative. Similarly some of the urban and the rural young girls could not recall if they were immunized but they mentioned that their younger siblings have been immunized. Most of the young girls of the CSZ reported positive that they and their younger siblings have been immunized. Those girls who had children also responded positive. In the NW almost all of the young girls responded positively.

▪ **Youth boys:**

Many young boys from all three settlements of the NE mentioned that they and their siblings been immunized. Some of them who have children also reported being immunized. Few of the nomadic young boys mentioned that they were not immunized but their siblings are immunized. Where as in the CSZ most of the urban boys responded positive while most of the rural and the nomadic boys responded negative. *Many of them said that they do not take children for immunization and the vaccinating team had never come to their area.* In the NW most of the young boys responded positive. Only some of the urban and the nomadic boys responded negative and some of them could not recall whether they were immunized.

▪ **Male:**

In the NE, the urban and the rural male groups stated that their children have been immunized. Whereas the nomadic men *mentioned they immunize their children when the vaccinating teams reach to their area. Which signifies that in the monadic areas children are not taken for immunization intuitively, people wait for vaccinating teams to come in their area.* In the CSZ most of the men groups responded positive. Only some of the nomadic men said that they have not immunized their children. In the NW almost all of the men groups responded positively. *While some of them said that vaccine has caused many problems like fever, makes the child cripple and even dies after vaccination. Some other mentioned that Somalis are being used as guinea pig to test new vaccines and the vaccinating teams are not trained professionals, therefore, cannot be trusted.*

**The discussion indicates that despite the stories against immunization most of the target groups have responded positively. However, there is a need of building confidence of the people to achieve aimed target.**

### **5.3.2. Knowledge about the importance of immunization:**

▪ **Elderly Women:**

In the NE, most of the urban and the nomadic elderly women reported that immunization is to prevent from disease, however, most of the rural elderly women and some of the nomadic elderly women mentioned that they do not know much about the advantage of immunization.

Most of them heard about it from the mobile vaccinating team and MCH in all population groupings. In the CSZ most of the urban and the rural elderly women mentioned that immunization is for prevention of disease and heard from the EPI team, vaccinating team and health worker in the village. However, most of the nomadic elderly women said they do not know about the immunization. Only some of them mentioned it is to prevent children from disease.

In the NW, most of the elderly women reported that it is to prevent from six killer diseases of children and children of under-five years need it. Some of them mentioned that *vaccines carry HIV/AIDS virus*.

▪ **Adult Women:**

Most of the adult women in all population groupings of all zones are aware of advantage of immunization. They reported that it is for prevention of disease, it protects children from many dangerous diseases. Most of them have heard about it from radio, mobile vaccinating team, and MCH etc., while in the NW many adult women told the negative stories against vaccine as mentioned above.

▪ **Youth Girls:**

Most of the girls in the NE also expressed that immunization protects children from many diseases. Few of the rural and the nomadic young girls mentioned that they do not know much about the advantage however, they always brought their children for vaccination whenever they have been called for the vaccination. Both the urban and the rural young girls said that they heard about immunization from radio, and newspaper, however nomadic girls heard about it from the community and other experienced persons. In the CSZ and the NW most of the girls groups mentioned that it is to protect children from six killer diseases. Some of the girls in the NW mentioned that they do not have much knowledge about it. Most of them have heard from EPI teams, radio, mobile microphone, and from the community.

▪ **Youth Boys:**

Almost all of the boys in the NE mentioned that immunization is for prevention of children from dangerous diseases. Most of the urban and the rural boys said that they heard about immunization from radio and mobile microphone. Some of the urban boys mentioned they heard about it from international agencies like UNICEF and WHO. Some rural boys have heard about it from the vaccinating team. Most of the nomadic boys have heard from mobile microphone and other fellow villagers.

In the CSZ most of the urban boys mentioned that immunization is for prevention of diseases, and children under five are vulnerable to disease and need vaccination. While many rural and nomadic boys said they do not know about immunization. Most of the urban boys have heard from health center. In the NW, young boys generally mentioned same kind of knowledge like other groups. Some of them reported that they do not have knowledge while others told the negative stories of vaccination.

▪ **Male:**

Most of the men in the urban and the rural groupings of the NE, mentioned that immunization gives children resistance to all communicable disease, protects and fights with disease. Some men in the rural groups said that vaccine is good only if the *Allah* is willing to treat somebody. Many men in the nomadic groups mentioned they do not know much about importance of immunization but they took their children for vaccination when the teams were in their area. Some others said that vaccination is used for the birth control.

The urban men reported that they heard from radio and health centers; the rural men heard from MCH, while the nomadic men heard from the radio and fellow villagers.

Most of the men in the CSZ also reported the same kind of knowledge on the importance of immunization. Only some of the nomadic men said they do not know about it.

In the NW except some nomadic men most of the men groups reported having same kind of knowledge about immunization. Some men like in other groups mentioned some problems faced after vaccination as fever, diarrhea etc.

**The discussion indicates that the rural and the nomadic target groups are not reached properly with the information of the importance of immunization.**

### **5.3.3. Source of firsthand information in need of immunization:**

#### **▪ Elderly Women:**

Both the urban and the rural elderly women of the NE mentioned that they would seek advice from the health center and MCH in need of immunization. The nomadic elderly women said that they would go to the experienced fellow person and religious leader for advice. The urban elderly women of the CSZ reported that they would go to the doctors and vaccinating team for advice; the rural elderly women would go to the MCH, village chief, and hospital; whereas the nomadic elderly women would go to health worker, fellow men and community leader for advice. In the NW, the urban elderly women mentioned they would seek advice from the health professional and doctor in need; the rural elderly women would look for vaccinating team, MCH, and mobile microphone; and the nomadic elderly women would go to nearest doctor and experienced person in the community.

#### **▪ Adult women:**

MCH, doctor, religious leader, vaccinator, community leaders are the sources of advice for the urban, rural, and nomadic adult women in the NE and the CSZ respectively. In the NW the urban adult women would go to the doctor, health post, and MCH; the rural women would go to MCH, midwives, and mobile microphone; and the nomadic women would go to doctor and vaccinating team for advice in need.

#### **▪ Youth Girls:**

In the NE, the urban girls mentioned that health center and mobile microphone are the sources of firsthand information/advice in need. The rural girls mentioned they would seek advice from MCH, and religious leader, while the nomadic young girls would seek advice from parents, doctor, and elder men in the community. In the CSZ, the urban girls said they would go to the physician and health center; the rural girls would go to the MCH and brothers; while the nomadic girls would go to the health worker, religious leader, and vaccinator for advice in need. In the NW, according to the urban girls they would seek advice from the vaccinating team, MCH, and mobile microphone in need. The rural girls would go to the nearest health post and vaccinating team; and the nomadic girls would rely on nearest town and mobile microphone for advice in need.

#### **▪ Youth boys:**

In the NE and the CSZ, the urban boys reported that they would go to the doctor and health center for the firsthand advice/information on immunization. The rural boys reported they would go to the health worker and vaccinating team, community leader, and religious leader for advice in need. Similar as the nomadic girls, the nomadic boys also mentioned that they would

look firsthand advice from parents, health worker, doctor, and experienced person in the community.

In the NW, young boys reported that they would seek advice from the doctor and mobile microphone; the rural boys would go to the community meeting and Sheikh; and the nomadic boys would seek advice from the nearest doctor.

▪ **Male:**

In the NE, radio, health centers, MCH and doctor are some of the sources of firsthand advice for the urban, rural, and nomadic men. In the CSZ, urban men suggested that they would go to the health center, MHC, and physician; the rural and the nomadic men would go to the doctor, MCH, and religious leader for advice. In the NW, the urban men mentioned they would rely on the doctor and radio; the rural men would go to the vaccinating team, teashop, mosque and elder; and the nomadic men would go to knowledgeable person in the community for advice in need.

**The response reveals that some one from the family or close to the family are more reliable for the nomadic youths in need of advice on vaccination. Some one experienced from the family can easily convince the young girls and boys about the importance and advantage or even the negative perception on immunization. Furthermore, all of the target groups in the rural and the nomadic areas have mentioned the vaccinating team as a source of the firsthand information. Considering the presence of the vaccinating teams in the rural and the nomadic areas, the response indicates the meager availability of the necessary information.**

**The nomadic youths specially, the girls have limited access to other communication channels and information sources, consequently they are less informed and have less discretion on health matters.**

**Further, religious leader and community leaders are very much trusted entity for advice for any type of problem in the rural and the nomadic areas. The interview with these entities as the key informants also supported the practice that community leaders are responsible to look after the health of their people and religious leader are one of the prominent source for the treatment as well.**

### **5.3.4. Best channel to convince people about advantage of immunization:**

▪ **Elderly Women:**

In the NE and the CSZ, the urban elderly women suggested radio, mobile microphone, newspapers, and religious leader as best channels to convince people about the advantage of immunization. The rural elderly women of the NE added the mosque in the suggestion, the nomadic elderly women added women's meeting in their suggestion. And the nomadic elderly women of the CSZ added fellow men and community leader as the best channels to convince people about immunization. In the NW radio is the commonly suggested channel by the elderly women in all of three population settings in which the urban elderly women included mobile microphone, and ministry of health; the rural elderly women included teashop, and MCH; and the nomadic elderly women included the mobile health team.

▪ **Adult women:**

In the NE, both the urban and the rural women preferred mobile microphone and health center as the best channels to convince people about immunization while the nomadic women preferred radio, health center, and community meeting. In the CSZ, the urban women preferred radio and mobile microphone in which the rural women added the mosque and religious leader,

and the nomadic women added community health worker. In the NW also the urban women preferred radio and mobile microphone in which the rural women added teashop, mosque and local authority, and the nomadic women added health professional.

**The response reveals that unlike the NE and the CSZ people in the NW have realized the responsibility of ministry and local authority to keep the people informed about their health.**

▪ **Youth Girls:**

Radio, mobile microphone, physician, MCH, and health center are some of the commonly suggested best channels to convince people about immunization by the young girls of the NE and the CSZ. The rural girls of the NE additionally preferred awareness raising at the community level and the nomadic girls favored community meeting along with radio and Quranic School, and the mosque. In the NW teashop is the only distinct channel preferred by the rural girls apart from the above mentioned channels.

▪ **Youth boys:**

In the NE and the CSZ, the urban boys preferred radio, mobile microphone, MCH, and newspaper as the best channel to convince people. The rural boys added health center and religious leader in the list where as the nomadic boys preferred mosque and community meeting/leader including the radio. In the NW most of the boy's groups commonly preferred radio and mobile microphone.

▪ **Male:**

The urban men chose radio, mobile microphone, newspaper, and TV; the rural men chose mobile microphone, mosque, and community meeting/leader; and the nomadic men chose radio and community meeting as the best channels to convince people about importance of immunization in the NE and the CSZ. In the NW, the urban men preferred doctor, radio, UNICEF, and mobile microphone; the rural men preferred mosque, teashop, and elders; and the nomadic men preferred UNICEF and trained local person as the best channels to convince people.

### **5.3.5. Reasons to trust particular channel:**

▪ **Elderly Women:**

According to the elderly women, availability and wide spread reach are the reasons for their preference to radio and mobile microphone. And from the teashops where men sitting together share lots of information and in the evening they will bring the information back to home. Any information left at the teashop will reach to women also.

**It can be deduced from the response compared to the elderly women in the CSZ, the rural and the nomadic elderly women in the NE, and many in the NW are still not well convinced with the advantage of the vaccination. Some of them have reservations, which are barring these women and their children to be benefited from immunization.**

**Contrary to the urban and the rural elderly women, religious leader and experienced person are the first available sources of information to get advice on immunization for the nomadic elderly women rather than the health center or MCH. And in the NW teashop where men gathers has specific role as information source for many rural and the nomadic women.**

- **Adult women:**

Adult women reasoned that they have confidence on MCH and health center, radio is everywhere, people have respect and trust on community leader and religious leader, and microphone can be heard easily even if someone misses the information from other channels.

**Discussion reveals that despite some exceptions adult women are more aware of advantages of immunization. Women have confidence on information provided from the health centers. The religious leader and community meeting can play a major role to convince people for immunization.**

- **Youth Girls:**

Reasons given by the young girls for choosing radio and mobile microphone are same as given by other groups. The nomadic girls reasoned that community meeting gives so much information to people and people believe on that. Similarly, the Quranic School is the place where young people learn new things.

**Response indicates that the urban girls can be reached through modern channels where as to reach the rural and the nomadic girls, traditional channels also have important roles.**

- **Youth boys:**

Reasons given by the young boys for the preferred channels do not vary much with the reasons given by other target groups for radio, mobile microphone, and community meetings etc.

**It can be deduced from the response that most of the young boys (except some in the nomadic areas of the CSZ and the NW) are aware of the importance of immunization. Alike other urban target groups the urban boys could be reached through modern channels where as for the rural and the nomadic boys traditional channels need to be used as well. Specially, in the rural and nomadic areas, vaccinating teams, parents, and fellow villagers in the teashops need to be well informed about the importance and advantage of immunization, for young generation they are the sources of firsthand advice in need.**

- **Male:**

Reasons given by all men group are similar to the reasons of other groups for those channels.

**The discussion indicates that compared to the urban and the rural men, the nomadic men are less informed about the importance and necessity of immunization. The nomadic children are not intuitively taken to the near by health centers for vaccination. This response corresponds with the response of the nomadic adult women. Which also signifies that the nomadic parents wait for the vaccinating teams to come in their area. On the other hand, the response also correlates the needs to well inform parents about the importance and advantage of immunization as the youths of the nomadic areas depend on their parents and elder relatives for advice in need.**

- **Main findings:**

- Target groups in all population groupings are more or less aware of the importance of immunization. However, their information are so general and are in need of specific information covering the types of vaccines, their importance, benefits, and dangers to be faced in the lack of vaccination.
- Compared to the urban men, the rural and the nomadic men are less aware of the importance of immunization.
- Many women target groups from the rural and the nomadic areas have reservation and misperception on immunization.

- Young generation, except in the urban areas, relies more on their parents or close relative for the firsthand advice/information.
- Specially, in the rural and the nomadic areas traditional channels like religious leader, community meetings, Quranic School, teashops have specific role to convince people.
- Radio, mobile microphone, health center and religious leaders have equal preference of the target groups to receive information on vaccination.

□ **Recommendations:**

- The rural and the nomadic areas still need awareness on immunization to eradicate misperception about immunization and also to build confidence of the people.
- Firsthand information sources like parents, experienced person of the community, religious leaders, and also health center should be well informed to help younger generation receiving right and appropriate advice/information.
- Radio and mobile microphones are the main channels informing people about immunization, however, traditional channels should be strengthened with appropriate information.
- Specific package of information should be developed and disseminated on regular basis targeted to build the confidence of the people and to mitigate the misperceptions.

#### 5.4. Reproductive Health: Chart: 4

<b>NE-Urban</b>					
Questions discussed	Response of the target groups				
	Eld. women	Adult women	Youth(G)	Youth(B)	Male
Knowledge about reproductive health	<ul style="list-style-type: none"> <li>▪ Reproductive health is related with giving care to mothers</li> </ul>	<ul style="list-style-type: none"> <li>▪ FGM cause a lot of problem</li> <li>▪ (Reluctant to discuss more on the issue)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Pharaonic circumcision cause many problems during the girlhood and marriage</li> </ul>	<ul style="list-style-type: none"> <li>▪ It is an important issue</li> </ul>	<ul style="list-style-type: none"> <li>▪ Reproductive health is the source from where all human being came from</li> <li>▪ It is the problem which mothers face everyday</li> </ul>
Most commonly faced problems during pregnancy	<ul style="list-style-type: none"> <li>▪ Anemia</li> <li>▪ Malnutrition</li> <li>▪ Heart pain</li> </ul>	<ul style="list-style-type: none"> <li>▪ Malnutrition</li> <li>▪ Swelling</li> <li>▪ Anemia</li> </ul>	<ul style="list-style-type: none"> <li>▪ Anemia</li> <li>▪ Swelling</li> <li>▪ Malnutrition and heart pain</li> </ul>	<ul style="list-style-type: none"> <li>▪ Anemia</li> <li>▪ Malnutrition</li> <li>▪ Pre-natal death</li> </ul>	<ul style="list-style-type: none"> <li>▪ Anemia</li> <li>▪ Malnutrition</li> <li>▪ Swelling</li> </ul>
Pre and post natal care for women	<ul style="list-style-type: none"> <li>▪ Nutritious diet</li> <li>▪ Appropriate treatment</li> <li>▪ Contact MCH and specialized doctors</li> </ul>	<ul style="list-style-type: none"> <li>▪ Constant care</li> <li>▪ Vaccinate from dangerous disease</li> </ul>	<ul style="list-style-type: none"> <li>▪ Enough and nutritious food</li> <li>▪ Consult health centers</li> <li>▪ Vaccinate the expecting woman</li> </ul>	<ul style="list-style-type: none"> <li>▪ Consult doctors and good food</li> </ul>	<ul style="list-style-type: none"> <li>▪ All required care are provided to the possible extent</li> </ul>
Info. received from	<ul style="list-style-type: none"> <li>▪ Health centers</li> <li>▪ Radio</li> <li>▪ Exchange of ideas</li> </ul>	<ul style="list-style-type: none"> <li>▪ MCH and doctors</li> <li>▪ NGO</li> <li>▪ Radio and newspaper</li> </ul>	<ul style="list-style-type: none"> <li>▪ House</li> <li>▪ Radio</li> <li>▪ School</li> <li>▪ TV</li> <li>▪ Health centers</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ MCH</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Experienced person</li> <li>▪ Midwives</li> </ul>
Sources of first hand info. in need	<ul style="list-style-type: none"> <li>▪ Experienced person in the community</li> <li>▪ MCH and gynecologist</li> <li>▪ Nearest health centers</li> </ul>	<ul style="list-style-type: none"> <li>▪ Gynecologist</li> <li>▪ Midwives</li> </ul>	<ul style="list-style-type: none"> <li>▪ Midwives and doctors</li> <li>▪ Health center</li> <li>▪ Hospital</li> </ul>	<ul style="list-style-type: none"> <li>▪ Midwives</li> <li>▪ Doctors</li> </ul>	<ul style="list-style-type: none"> <li>▪ Midwives</li> <li>▪ Doctors</li> <li>▪ Hospital</li> </ul>
Preferred/trust	<ul style="list-style-type: none"> <li>▪ Health centers</li> </ul>	<ul style="list-style-type: none"> <li>▪ Health center</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> </ul>	<ul style="list-style-type: none"> <li>▪ MCH</li> </ul>

channel to receive info.	<ul style="list-style-type: none"> <li>and doctors</li> <li>Mobile microphone</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone</li> <li>Include in</li> </ul>	<ul style="list-style-type: none"> <li>School Health centers</li> </ul>	<ul style="list-style-type: none"> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>
<b>NE-Rural</b>					
Knowledge about reproductive health	<ul style="list-style-type: none"> <li>No info. given</li> <li>Passed the age of reproductive health</li> </ul>	<ul style="list-style-type: none"> <li>If the expecting women is not cared properly they face many problems</li> </ul>	<ul style="list-style-type: none"> <li>Ask experienced mothers</li> </ul>	<ul style="list-style-type: none"> <li>Don't know anything</li> </ul>	<ul style="list-style-type: none"> <li>It is related with married men and women</li> </ul>
Most commonly faced problems during pregnancy	<ul style="list-style-type: none"> <li>Malnutrition and foot swelling</li> <li>Anemia</li> <li>Loss of weight</li> </ul>	<ul style="list-style-type: none"> <li>Swelling</li> <li>Blood pressure</li> <li>Anemia</li> </ul>	<ul style="list-style-type: none"> <li>Swelling</li> <li>Anemia</li> </ul>	<ul style="list-style-type: none"> <li>Anemia</li> <li>Malnutrition</li> </ul>	<ul style="list-style-type: none"> <li>Anemia</li> <li>Swelling</li> </ul>
Pre and post natal care for women	<ul style="list-style-type: none"> <li>Good care</li> <li>Consult nearest health center</li> <li>Nutritious diet</li> </ul>	<ul style="list-style-type: none"> <li>Nutritious food</li> <li>Adequate rest</li> <li>Slaughter a goat after delivery to feed the mother</li> <li>If there is pain consult doctor</li> </ul>	<ul style="list-style-type: none"> <li>Don't have any information</li> </ul>	<ul style="list-style-type: none"> <li>Slaughter goat for mother</li> </ul>	<ul style="list-style-type: none"> <li>Given nutritious food and special care depending on the economical capacity of the husband</li> </ul>
Info. received from	<ul style="list-style-type: none"> <li>Self experience</li> <li>Doctors</li> </ul>	<ul style="list-style-type: none"> <li>Elder mothers</li> <li>Health centers</li> <li>Radio</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>MCH</li> <li>Religious scholar</li> <li>Elder people</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>MCH</li> </ul>	<ul style="list-style-type: none"> <li>Self experience</li> <li>Mothers</li> <li>MCH</li> <li>Religious scholar</li> </ul>
Sources of first hand info. in need	<ul style="list-style-type: none"> <li>Midwives</li> <li>Experienced person in the community</li> </ul>	<ul style="list-style-type: none"> <li>MCH</li> <li>Midwives</li> </ul>	<ul style="list-style-type: none"> <li>Midwives</li> <li>MCH</li> </ul>	<ul style="list-style-type: none"> <li>Ask this to mothers</li> </ul>	<ul style="list-style-type: none"> <li>MCH</li> <li>Doctors</li> </ul>
Preferred/trust channel to receive info.	<ul style="list-style-type: none"> <li>No specific response</li> </ul>	<ul style="list-style-type: none"> <li>MCH</li> <li>Religious scholar</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Religious scholars</li> <li>Elder mother</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Midwives</li> <li>MCH</li> </ul>	<ul style="list-style-type: none"> <li>MCH</li> <li>Midwives</li> <li>Religious scholars</li> </ul>
<b>NE-Nomadic</b>					
Knowledge about reproductive health	<ul style="list-style-type: none"> <li>Agreed upon having knowledge but did not specify</li> </ul>	<ul style="list-style-type: none"> <li>No info. given</li> </ul>	<ul style="list-style-type: none"> <li>No info. given</li> </ul>	<ul style="list-style-type: none"> <li>Know nothing about it</li> </ul>	<ul style="list-style-type: none"> <li>Agreed upon knowing something but did not like to discuss</li> </ul>
Most commonly faced problems during pregnancy	<ul style="list-style-type: none"> <li>Anemia</li> <li>Feet swelling</li> <li>Hardship during pregnancy and in delivery</li> </ul>	<ul style="list-style-type: none"> <li>Anemia</li> <li>Malnutrition</li> </ul>	<ul style="list-style-type: none"> <li>Anemia</li> <li>Swelling</li> <li>Difficulty in delivery</li> </ul>	<ul style="list-style-type: none"> <li>Difficulty during delivery</li> </ul>	<ul style="list-style-type: none"> <li>Anemia</li> <li>Hardship in delivery</li> </ul>
Pre and post natal care for women	<ul style="list-style-type: none"> <li>Better care</li> <li>Nutritious food</li> <li>Slaughter goat after delivery to feed the mother</li> </ul>	<ul style="list-style-type: none"> <li>No adequate care is provided</li> <li>Slaughter a goat after delivery</li> </ul>	<ul style="list-style-type: none"> <li>Nutritious diet and vitamins</li> <li>Rest</li> <li>Slaughter goat</li> </ul>	<ul style="list-style-type: none"> <li>Nutritious food</li> <li>Vitamins</li> <li>Slaughter goat for mother</li> </ul>	<ul style="list-style-type: none"> <li>Nutritious food</li> <li>Consult to hospital</li> <li>Slaughter a goat</li> </ul>
Info. received from	<ul style="list-style-type: none"> <li>Self experience of long time</li> <li>Women meeting</li> </ul>	<ul style="list-style-type: none"> <li>Self experience</li> <li>Experienced mothers</li> <li>Midwives</li> </ul>	<ul style="list-style-type: none"> <li>Midwives</li> <li>Elder mothers</li> <li>Community meeting</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Elder women</li> <li>Radio</li> <li>MCH</li> </ul>	<ul style="list-style-type: none"> <li>Experienced person</li> <li>Mothers</li> <li>Midwives</li> </ul>
Sources of first hand info. in need	<ul style="list-style-type: none"> <li>Other experienced person</li> <li>Allah</li> <li>Midwives</li> </ul>	<ul style="list-style-type: none"> <li>Midwives</li> <li>Doctors</li> <li>Mothers</li> </ul>	<ul style="list-style-type: none"> <li>Experienced person</li> <li>Parents</li> </ul>	<ul style="list-style-type: none"> <li>Experienced people</li> <li>Religious scholar</li> <li>Elder men</li> </ul>	<ul style="list-style-type: none"> <li>Midwives</li> <li>Mothers</li> </ul>
Preferred/trust channel to receive info.	<ul style="list-style-type: none"> <li>Women meeting</li> </ul>	<ul style="list-style-type: none"> <li>Health center</li> <li>Community meeting</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Women's meeting</li> </ul>	<ul style="list-style-type: none"> <li>Religious meeting</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Community meeting</li> <li>Radio</li> </ul>
<b>CSZ-Urban</b>					
Questions discussed	Response of the target groups				

	Eld. women	Adult women	Youth(G)	Youth(B)	Male
Knowledge about reproductive health	<ul style="list-style-type: none"> <li>It is about child bearing, marriage, and women's health</li> <li>Reproduction of human being</li> </ul>	<ul style="list-style-type: none"> <li>It is related with marriage, sex, and child bearing</li> </ul>	<ul style="list-style-type: none"> <li>Related to new born, marriage and sex</li> <li>Relation of men and women</li> </ul>	<ul style="list-style-type: none"> <li>Increasing number of population</li> <li>Do not know</li> </ul>	<ul style="list-style-type: none"> <li>It is related to child bearing</li> </ul>
Most commonly faced problems during pregnancy	<ul style="list-style-type: none"> <li>Hemorrhage during delivery</li> <li>Candidiasis *</li> <li>Anemia</li> <li>Swelling</li> </ul>	<ul style="list-style-type: none"> <li>Anemia</li> <li>Loss of appetite</li> <li>Malnutrition</li> <li>Difficult delivery</li> <li>STDs</li> </ul>	<ul style="list-style-type: none"> <li>Candidiasis</li> <li>Anemia</li> <li>Swelling</li> <li>Anemia</li> </ul>	<ul style="list-style-type: none"> <li>Anemia</li> <li>Hemorrhage</li> <li>Miscarriage</li> </ul>	<ul style="list-style-type: none"> <li>Swelling</li> <li>Anemia</li> <li>Malnutrition</li> <li>Candidiasis</li> </ul>
Pre and post natal care for women	<ul style="list-style-type: none"> <li>Adequate food and care</li> <li>Slaughter a sheep to compensate the loss of blood during delivery</li> </ul>	<ul style="list-style-type: none"> <li>Adequate food and care</li> <li>Slaughter a sheep</li> </ul>	<ul style="list-style-type: none"> <li>Adequate food and care</li> </ul>	<ul style="list-style-type: none"> <li>Adequate food and care</li> </ul>	<ul style="list-style-type: none"> <li>Adequate food and care</li> <li>They suffer a lot in lack of care and medicine</li> </ul>
Info. received from	<ul style="list-style-type: none"> <li>Health center</li> <li>Self experience</li> <li>Community</li> <li>MCH</li> <li>Midwives</li> <li>TBA</li> </ul>	<ul style="list-style-type: none"> <li>Self experience</li> <li>Elderly women</li> <li>Health center</li> </ul>	<ul style="list-style-type: none"> <li>Mother</li> <li>Self experience</li> <li>Health book</li> <li>MCH</li> </ul>	<ul style="list-style-type: none"> <li>Health center</li> <li>School</li> <li>Radio</li> <li>TV</li> <li>Elderly ladies</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Health centers</li> <li>Health book</li> <li>Self experience</li> </ul>
Sources of first hand info. in need	<ul style="list-style-type: none"> <li>Physician</li> <li>MCH</li> <li>Health center</li> </ul>	<ul style="list-style-type: none"> <li>Elderly women</li> <li>Religious Llama</li> <li>Doctors and TBAs</li> <li>Midwives</li> </ul>	<ul style="list-style-type: none"> <li>MCH</li> <li>Doctor</li> <li>Experienced person in the community</li> </ul>	<ul style="list-style-type: none"> <li>TBAs</li> <li>Elderly person</li> <li>Physician</li> <li>MCH</li> </ul>	<ul style="list-style-type: none"> <li>Doctor</li> <li>Religious llema</li> <li>Health center</li> </ul>
Preferred/trust channel to receive info.	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>TBA</li> <li>Women's tea party</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>TBAs</li> <li>Health center</li> </ul>	<ul style="list-style-type: none"> <li>TV</li> <li>Radio</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>Physician</li> </ul>	<ul style="list-style-type: none"> <li>TV</li> <li>Radio</li> <li>MCH</li> <li>Midwives</li> <li>Physician</li> </ul>
<b>CSZ-Rural</b>					
Knowledge about reproductive health	<ul style="list-style-type: none"> <li>It is related with child bearing</li> <li>Marriage</li> <li>Relation of men and women</li> <li>Do not know much(Middle Jubba, Shabelle)</li> <li>Related with population growth</li> </ul>	<ul style="list-style-type: none"> <li>It is related with child bearing</li> <li>Do not know</li> <li>It is matter of God</li> <li>Related with population growth</li> </ul>	<ul style="list-style-type: none"> <li>Increasing number of population</li> <li>It is related with marriage and child bearing</li> </ul>	<ul style="list-style-type: none"> <li>It is well being of married people</li> <li>Related with marriage and child bearing</li> </ul>	<ul style="list-style-type: none"> <li>Multiplication of people</li> <li>Related with marriage and sex</li> </ul>
Most commonly faced problems during pregnancy	<ul style="list-style-type: none"> <li>Anemia</li> <li>Loss of appetite</li> <li>Swelling</li> <li>Malnutrition</li> <li>Candidiasis of mouth and vagina</li> </ul>	<ul style="list-style-type: none"> <li>Swelling</li> <li>Malnutrition</li> <li>Anemia</li> </ul>	<ul style="list-style-type: none"> <li>Loss of appetite</li> <li>Miscarriage</li> <li>Swelling</li> </ul>	<ul style="list-style-type: none"> <li>Malnutrition</li> <li>Anemia</li> <li>Prolonged pain during delivery</li> </ul>	<ul style="list-style-type: none"> <li>Malnutrition</li> <li>Anemia</li> <li>Candidiasis</li> </ul>
Pre and post natal care for women	<ul style="list-style-type: none"> <li>Adequate food, medicine and care</li> </ul>	<ul style="list-style-type: none"> <li>Adequate food, medicine and care</li> </ul>	<ul style="list-style-type: none"> <li>No special care is given</li> <li>Nutritious food and care</li> </ul>	<ul style="list-style-type: none"> <li>Balanced diet and care</li> <li>No special care is given</li> </ul>	<ul style="list-style-type: none"> <li>Balanced diet and care</li> </ul>
Info. received from	<ul style="list-style-type: none"> <li>Hospital</li> <li>Doctor</li> <li>Midwives</li> <li>Women's tea party</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Health worker</li> <li>Self experience</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Midwives</li> <li>Health worker</li> <li>Women's party</li> </ul>	<ul style="list-style-type: none"> <li>Grand mother</li> <li>Radio</li> <li>Religious leader</li> <li>Health center</li> </ul>	<ul style="list-style-type: none"> <li>Health center</li> <li>Doctor</li> <li>Religious leader</li> </ul>
Sources of first hand info. in need	<ul style="list-style-type: none"> <li>Self experience</li> <li>Hospital</li> <li>Health center</li> <li>Midwives</li> </ul>	<ul style="list-style-type: none"> <li>Physician</li> <li>Mid wives</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Mother</li> <li>Midwives</li> <li>Health worker</li> </ul>	<ul style="list-style-type: none"> <li>Parents</li> <li>Religious leader</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Religious leader</li> <li>Health center</li> <li>Midwives</li> <li>Mothers</li> </ul>

				<ul style="list-style-type: none"> <li>Physician</li> </ul>	
Preferred/trust channel to receive info.	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Mosque</li> <li>Radio</li> <li>Midwives</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>MCH</li> <li>Midwives</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Mosque</li> <li>Radio</li> <li>Mothers</li> <li>Doctor</li> </ul>
<b>CSZ-Nomadic</b>					
Knowledge about reproductive health	<ul style="list-style-type: none"> <li>Do not know much</li> <li>Production of human being</li> </ul>	<ul style="list-style-type: none"> <li>Human being will not increase without it</li> </ul>	<ul style="list-style-type: none"> <li>Increasing the number of people</li> </ul>	<ul style="list-style-type: none"> <li>It is related with marriage and giving birth</li> </ul>	<ul style="list-style-type: none"> <li>Something increasing the number of people</li> </ul>
Most commonly faced problems during pregnancy	<ul style="list-style-type: none"> <li>Canadiasis of mouth and vagina</li> <li>Swelling</li> <li>Anemia</li> </ul>	<ul style="list-style-type: none"> <li>Anemia</li> <li>Malnutrition</li> <li>Candidiasis of mouth and vagina</li> </ul>	<ul style="list-style-type: none"> <li>Candidiasis of mouth and vagina</li> <li>Anemia</li> <li>Loss of appetite</li> </ul>	<ul style="list-style-type: none"> <li>Candidiasis</li> <li>Anemia</li> <li>Do not know</li> </ul>	<ul style="list-style-type: none"> <li>Anemia</li> <li>Malnutrition</li> <li>Candidiasis of mouth and vagina</li> </ul>
Pre and post natal care for women	<ul style="list-style-type: none"> <li>Enough food</li> <li>As usual not different</li> <li>Slaughter a goat to feed the mother</li> </ul>	<ul style="list-style-type: none"> <li>Enough food</li> <li>As usual not different</li> <li>Slaughter a goat to feed the mother</li> </ul>	<ul style="list-style-type: none"> <li>Food as liking of the pregnant woman</li> <li>Necessary medicine</li> </ul>	<ul style="list-style-type: none"> <li>Balanced diet</li> <li>Medicine if available</li> </ul>	<ul style="list-style-type: none"> <li>Depends on the situation of life</li> <li>Adequate food</li> <li>Slaughter a sheep</li> </ul>
Info. received from	<ul style="list-style-type: none"> <li>Self experience</li> <li>Elders</li> </ul>	<ul style="list-style-type: none"> <li>Elder mothers</li> <li>Fellow women</li> <li>Midwives</li> </ul>	<ul style="list-style-type: none"> <li>Custom</li> <li>Elder mothers</li> <li>Midwives</li> </ul>	<ul style="list-style-type: none"> <li>Mother</li> <li>Health worker</li> <li>Experienced person</li> </ul>	<ul style="list-style-type: none"> <li>Parents</li> <li>Physician</li> <li>Custom</li> </ul>
Sources of first hand info. in need	<ul style="list-style-type: none"> <li>Mothers</li> <li>If available physician</li> <li>Midwives</li> </ul>	<ul style="list-style-type: none"> <li>Midwives</li> <li>Pharmacies</li> <li>Mothers</li> </ul>	<ul style="list-style-type: none"> <li>Midwives</li> <li>Experienced woman</li> <li>Pharmacies</li> </ul>	<ul style="list-style-type: none"> <li>Parents</li> <li>Health worker</li> <li>Midwives</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Religious leader</li> <li>Physician</li> <li>Health center</li> </ul>
Preferred/trust channel to receive info.	<ul style="list-style-type: none"> <li>Mosque</li> <li>Radio</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio mobile microphone</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Midwives</li> <li>Mobile microphone</li> <li>Radio</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>Physician</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone</li> <li>Radio</li> <li>Community leader</li> </ul>
<b>NW-Urban</b>					
Knowledge about reproductive health	<ul style="list-style-type: none"> <li>Mother and child health</li> <li>Birth spacing</li> </ul>	<ul style="list-style-type: none"> <li>Reproductive health is a planning of family</li> </ul>	<ul style="list-style-type: none"> <li>No info.</li> </ul>	<ul style="list-style-type: none"> <li>No idea</li> </ul>	<ul style="list-style-type: none"> <li>Have little knowledge on this matter</li> </ul>
Most commonly faced problems during pregnancy	<ul style="list-style-type: none"> <li>Hemorrhage</li> <li>Malnutrition</li> <li>Still-birth</li> <li>Anemia</li> <li>Infection</li> </ul>	<ul style="list-style-type: none"> <li>Anemia</li> <li>Malnutrition</li> <li>Infection</li> </ul>	<ul style="list-style-type: none"> <li>Anemia</li> <li>Malnutrition</li> <li>Bleeding</li> <li>Vitamin deficiency</li> </ul>	<ul style="list-style-type: none"> <li>Malnutrition</li> <li>Anemia</li> <li>Infection</li> </ul>	<ul style="list-style-type: none"> <li>Still birth</li> <li>Anemia</li> <li>Hemorrhage</li> <li>Malnutrition</li> </ul>
Pre and post natal care for women	<ul style="list-style-type: none"> <li>Adequate food, rest, and medicine</li> </ul>	<ul style="list-style-type: none"> <li>No adequate care is given</li> <li>Most of the people cannot afford</li> </ul>	<ul style="list-style-type: none"> <li>Balanced diet</li> <li>Contact to health post</li> </ul>	<ul style="list-style-type: none"> <li>No enough care is given</li> </ul>	<ul style="list-style-type: none"> <li>Nutritious food, care and rest</li> <li>In lack of specialized doctor required health care is difficult</li> </ul>
Info. received from	<ul style="list-style-type: none"> <li>From each other</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>MCH</li> <li>Doctor</li> </ul>	<ul style="list-style-type: none"> <li>Family</li> <li>Health post</li> <li>Radio</li> <li>School</li> </ul>	<ul style="list-style-type: none"> <li>Family</li> <li>MCH</li> <li>School</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>TV</li> </ul>
Sources of first hand info. in need	<ul style="list-style-type: none"> <li>MCH</li> <li>Experienced person</li> <li>Fellow women</li> </ul>	<ul style="list-style-type: none"> <li>MCH</li> <li>Health post</li> <li>Experience women</li> </ul>	<ul style="list-style-type: none"> <li>Doctor</li> <li>MCH</li> <li>Parents</li> </ul>	<ul style="list-style-type: none"> <li>Women's meeting</li> <li>Doctor</li> <li>Health post</li> </ul>	<ul style="list-style-type: none"> <li>MCH</li> <li>Doctor TBAs</li> </ul>
Preferred/trust channel to receive info.	<ul style="list-style-type: none"> <li>Radio</li> <li>TV</li> <li>Mobile microphone</li> <li>MCH</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>MCH</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Newspaper</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>Women's meeting</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>TV</li> </ul>
<b>NW-Rural</b>					
Knowledge about reproductive health	<ul style="list-style-type: none"> <li>No info.</li> </ul>	<ul style="list-style-type: none"> <li>No info.</li> </ul>	<ul style="list-style-type: none"> <li>Do not know</li> </ul>	<ul style="list-style-type: none"> <li>Related with giving birth</li> </ul>	<ul style="list-style-type: none"> <li>Reproduction is will of Allah</li> <li>No know nothing, we just give birth</li> </ul>
Most commonly	<ul style="list-style-type: none"> <li>Anemia</li> </ul>	<ul style="list-style-type: none"> <li>Anemia</li> </ul>	<ul style="list-style-type: none"> <li>Swelling</li> </ul>	<ul style="list-style-type: none"> <li>Loss of</li> </ul>	<ul style="list-style-type: none"> <li>Anemia</li> </ul>

faced problems during pregnancy	<ul style="list-style-type: none"> <li>▪ Hemorrhage</li> <li>▪ Infection</li> </ul>	<ul style="list-style-type: none"> <li>▪ Malnutrition</li> </ul>	<ul style="list-style-type: none"> <li>▪ Anemia</li> <li>▪ Vitamin deficiency</li> </ul>	<ul style="list-style-type: none"> <li>▪ appetite</li> <li>▪ Anemia</li> <li>▪ Bleeding</li> </ul>	<ul style="list-style-type: none"> <li>▪ Lack of vitamin</li> <li>▪ Bleeding</li> </ul>
Pre and post natal care for women	<ul style="list-style-type: none"> <li>• Nutritious food</li> <li>• Proper care is not available</li> </ul>	<ul style="list-style-type: none"> <li>• Balanced diet</li> <li>• Medicine</li> <li>• Slaughtering a goat</li> </ul>	<ul style="list-style-type: none"> <li>▪ Adequate food</li> </ul>	<ul style="list-style-type: none"> <li>▪ Nutritious food and care</li> <li>▪ Depends on person's economy</li> </ul>	<ul style="list-style-type: none"> <li>▪ If problem occur herbs are used</li> <li>▪ Nutritious food and care</li> <li>▪ Slaughter a goat</li> </ul>
Info. received from	<ul style="list-style-type: none"> <li>• Doctor</li> <li>• Experienced fellow women</li> </ul>	<ul style="list-style-type: none"> <li>▪ Elder and experienced person</li> <li>▪ Doctor</li> <li>▪ MCH</li> </ul>	<ul style="list-style-type: none"> <li>▪ Hospital</li> <li>▪ Religious leader</li> <li>▪ Radio</li> </ul>	<ul style="list-style-type: none"> <li>• Midwives</li> <li>• Elder women</li> <li>• Radio</li> <li>• Health post</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Doctor</li> </ul>
Sources of first hand info. in need	<ul style="list-style-type: none"> <li>▪ Nearest town</li> <li>▪ Doctor</li> <li>▪ Experienced fellow women</li> </ul>	<ul style="list-style-type: none"> <li>▪ Midwives</li> <li>▪ Health post</li> <li>▪ Pharmacy</li> </ul>	<ul style="list-style-type: none"> <li>• Hospital</li> <li>• Sheikh</li> <li>• Nearest doctor</li> </ul>	<ul style="list-style-type: none"> <li>• Doctor</li> <li>• Health post</li> </ul>	<ul style="list-style-type: none"> <li>▪ Religious leader</li> <li>▪ Nearest health post</li> </ul>
Preferred/trust channel to receive info.	<ul style="list-style-type: none"> <li>▪ Mosque</li> <li>▪ Teashop</li> <li>▪ MCH</li> </ul>	<ul style="list-style-type: none"> <li>▪ MCH</li> <li>▪ Mosque</li> <li>▪ Radio</li> <li>▪ Teashop</li> </ul>	<ul style="list-style-type: none"> <li>• Teashop</li> <li>• School</li> <li>• Radio</li> <li>• Health post</li> </ul>	<ul style="list-style-type: none"> <li>• MCH</li> <li>• Radio</li> <li>• Meeting place</li> </ul>	<ul style="list-style-type: none"> <li>• MCH</li> <li>• Teashop</li> <li>• Radio</li> <li>• Doctor</li> </ul>
<b>NW-Nomadic</b>					
Knowledge about reproductive health	<ul style="list-style-type: none"> <li>▪ No info.</li> </ul>	<ul style="list-style-type: none"> <li>▪ No info.</li> </ul>	<ul style="list-style-type: none"> <li>▪ No info.</li> </ul>	<ul style="list-style-type: none"> <li>▪ No info.</li> </ul>	<ul style="list-style-type: none"> <li>▪ No info.</li> </ul>
Most commonly faced problems during pregnancy	<ul style="list-style-type: none"> <li>▪ Poor appetite</li> <li>▪ Morning sickness</li> </ul>	<ul style="list-style-type: none"> <li>▪ Morning sickness</li> <li>▪ Difficult delivery</li> </ul>	<ul style="list-style-type: none"> <li>▪ Poor health</li> <li>▪ Vomiting</li> </ul>	<ul style="list-style-type: none"> <li>▪ No info</li> </ul>	<ul style="list-style-type: none"> <li>▪ No info.</li> </ul>
Pre and post natal care for women	<ul style="list-style-type: none"> <li>• No enough health care</li> <li>• Adequate food</li> </ul>	<ul style="list-style-type: none"> <li>• Milk and meat</li> <li>• Depends on the condition of cattle</li> </ul>	<ul style="list-style-type: none"> <li>▪ Adequate care is not available</li> <li>▪ A goat is slaughtered</li> </ul>	<ul style="list-style-type: none"> <li>▪ Available care is provided</li> </ul>	<ul style="list-style-type: none"> <li>▪ Milk and meet is the only available nutritious food</li> <li>▪ Vitamins and other medicines are not available</li> </ul>
Info. received from	Mother and grand mother are experienced do not need information	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Fellow folk</li> </ul>	<ul style="list-style-type: none"> <li>▪ Mother</li> </ul>	Elderly people MCH Health post	<ul style="list-style-type: none"> <li>▪ UNICEF</li> <li>▪ Radio</li> </ul>
Sources of first hand info. in need	<ul style="list-style-type: none"> <li>▪ Men folk</li> <li>▪ Experienced fellow women</li> <li>▪ Doctor</li> </ul>	<ul style="list-style-type: none"> <li>▪ Health post</li> <li>▪ Experienced women</li> </ul>	<ul style="list-style-type: none"> <li>• Nearest doctor</li> <li>• Sheikh</li> <li>• Elderly women</li> </ul>	Experienced person	<ul style="list-style-type: none"> <li>▪ Self experience</li> <li>▪ Experienced women</li> </ul>
Preferred/trust channel to receive info.	<ul style="list-style-type: none"> <li>▪ Doctor</li> </ul>	<ul style="list-style-type: none"> <li>▪ Health post</li> <li>▪ Nearest town</li> </ul>	<ul style="list-style-type: none"> <li>• Radio</li> <li>• Doctor</li> <li>• MCH</li> </ul>	<ul style="list-style-type: none"> <li>• Radio</li> <li>• MCH</li> </ul>	<ul style="list-style-type: none"> <li>• Radio</li> </ul>

***\* Candidiasis (Thrush) is an overgrowth of a yeast (fungus) called “Candida.” Candida is normally found on the skin, in the stomach, colon, vagina, rectum, mouth, and throat. Candida causes health problems only when there is an over growth in one of these areas of the body. It is also a common early symptom of HIV disease, usually occurring in the mouth and/or vagina. People living with AIDS can also develop candidiasis deeper within their bodies and in their windpipe, esophagus (throat) or lungs (<http://www.gmhc/living/treatment/thrush.html>).***

The charts demonstrate that target groups have different perceptions regarding reproductive health. Some have tried to relate it with the whole process of reproduction of human beings while others specifically mentioned about the problem of expecting mothers. Some other mentioned as something to increase number of people. Furthermore, women target groups linked female genital mutilation (FGM) with reproductive health. However, many from the youth groups have less information either because they have less knowledge or they were reluctant to discuss the issue in detail. The entire target groups mentioned anemia, malnutrition,

loss of appetite, candidiasis, and swelling are the common problems faced during pregnancy; and infection and bleeding are the problems commonly faced after the delivery. Nutritious food (milk, vegetables, oil, and meat), adequate rest, consultation with health professionals, and slaughtering of a goat are some of the common pre and anti-natal care provided to women in all target groups of all zones depending on the economic situation of the family. However, in many rural and nomadic areas medical consultation is not looked until the problem is serious. Generally religious and traditional healer are the most available and used entity for the advice because of unavailability of medical health service in the approachable distance, money, and time.

#### **5.4.1. Knowledge about the reproductive health:**

- **Elderly women:**

The urban elderly women of the NE said that reproductive health is related with giving care to mothers. Some of the urban elderly women mentioned about pharaonic circumcision as the part of reproductive health. It signifies that these elderly women know about the impact of FGM on reproductive health of women. Both the rural and the nomadic elderly women agreed upon having knowledge about reproductive health but they could not specify their knowledge. Some of them mentioned they have passed the age of reproduction so do not want to talk about it. In the CSZ most of the elderly women mentioned it is related with marriage, child bearing, women's health, and relation of men and women. Some of the rural and the nomadic elderly women said they do not know much about reproductive health, they just produced children. In the NW only the urban elderly women have mentioned that it is related with mother and child's health and birth spacing.

- **Adult women:**

Most of the adult women in the urban area in the NE mentioned FGM is causing lot of reproductive health problem, however, they were reluctant to discuss more about the issue. The rural adult mothers said that if the expecting woman is not cared properly she would face many problems. Unlike the urban and the rural women, the nomadic women could not mention any knowledge about reproductive health. Most of the adult women in the CSZ mentioned same as the elderly women that reproductive health is related with human production. In the NW, the urban adult women reported that reproductive health is planning of family.

- **Youth Girls:**

In the NE, the urban young girls mentioned about pharaonic circumcision causing lot of problem during the girlhood and also in married life. But the rural and the nomadic young girls denied discussing on the knowledge of the reproductive health and said to ask this issue with mothers. However, in the CSZ, the young girls closer to their mothers and grand mother mentioned similar knowledge about the reproductive health.

Compared to the NE, in the CSZ none of the female target groups mentioned about relation of FGM and reproductive health. *No information is given in the NW.*

- **Youth Boys:**

Young boys in all population settings of the NE denied having any knowledge about reproductive health. Deferring to young boys of the NE, most of the young boys in the CSZ reported having similar understanding of reproductive health alike other target groups of the zone. In the NW some of the boys mentioned that it is related with giving birth.

- **Male:**

In the NE, the urban men group referred that reproductive health is related with producing human being. It is the problem which mothers have to face every day. Yet they did not like much to talk about the issue. But the rural men mentioned that it is related with married men and women. The nomadic men expressed that they know something about the issue but did not like to discuss in detail. All of the men groups in the CSZ mentioned same knowledge about the reproductive health like other groups. However, some of the rural and the nomadic men said they do not know much about it. Most of the men groups in the NW said that they do not know much about reproductive health where as some of them mentioned that reproduction is will of the Allah but good health is necessary.

#### **5.4.2. Most commonly faced problems during pregnancy:**

- **Elderly women:**

The elderly women of all zones mentioned anemia, malnutrition, hemorrhage, candidiasis, swelling, and infection as the common problem faced by women during pregnancy. Some others discussed about the hardship and difficulties faced during pregnancy and delivery.

- **Adult women:**

Alike the elderly women most of the adult women in all zones mentioned same problems faced during the pregnancy.

- **Youth Girls:**

The entire groups of the young girls mentioned same commonly faced problems during pregnancy like their mothers. They also added miscarriage as one of the common problem.

- **Youth Boys:**

Most of the young boys denied having any knowledge on reproductive health in the NE and the NW but they mentioned same problems of pregnancy as mentioned by women target groups. Some of the urban and the nomadic young boys reported that pre-natal death and difficulty in delivery are common problems faced by the pregnant women in their areas. In the CSZ, alike their female age mates of the zone most of the boys mentioned same common problems.

- **Male:**

All of the men groups of all zones confirmed the same problems faced during and after the pregnancy as other target groups have mentioned.

#### **5.4.3. Pre and post-natal care:**

- **Elderly women:**

According to the elderly women good care, consultation with the nearest health center or doctor, nutritious diet, and slaughtering of a goat are some of the common care provided during and after the pregnancy.

- **Adult women:**

Adult women also mentioned same kinds of care provided during and after pregnancy in all population groupings. Some of the rural and the nomadic women mentioned that no adequate

care is provided to women. In the rural and the nomadic areas of the NW reported that women are dying in lack of health post in these areas.

- **Youth Girls:**

Regarding the care that provided during and after pregnancy, the urban and the nomadic girls in the NE stated the same types of care that their mothers mentioned, where as the rural girls said they do not know much about this. Most of the young girls in the CSZ and the NW mentioned similar care provided during and after pregnancy as other women groups.

- **Youth Boys:**

Most of the young boys' groups mentioned same types of care provided during and after pregnancy as mentioned by the other women target groups. Some of the rural and the nomadic boys mentioned **special care and medicine depends on the money and availability of medicine.**

- **Male:**

Although most of the men in all population groupings stated same kinds of care provided during and after the pregnancy, however, many of them mentioned that required care is provided depending on the economic capacity of the husband. Many of the rural and the nomadic men mentioned that women in their areas suffer a lot in lack of adequate care and medicine.

**The response denotes that the capacity of the family determines the required need of an expecting woman. This response also correlates with the commonly faced problems malnutrition, anemia, pre and anti-natal death in lack of adequate care and high rate of maternal-infant death in Somalia.**

#### **5.4.4. Information received from:**

- **Elderly women:**

In the NE, urban elderly women learnt about reproductive health from radio, health center, and exchange of ideas among themselves. Some of them mentioned that they learnt from their own experience. The rural elderly women mentioned that they received information from doctor and experience sharing among them as every other day they encounter a delivering mother in their community. Few of them mentioned that they have passed the age of reproduction so they do not look for any information. The nomadic elderly women said that this is something which, they have been hearing, facing, and experiencing through out their lives, therefore it is their experience they learnt from. Some of them mentioned the women's meeting as the source of information.

Health center, self-experience, community, and MCH are some of the sources from where the urban elderly women of the CSZ received information of reproductive health. The rural elderly women received information from midwives, doctor, and women's party; and the nomadic elderly women received information from elders and self- experience. Alike the elderly women of other zones, in the NW also they mentioned radio, fellow peers, and doctors as their sources of information whereas some of the nomadic elderly women said that mothers and grandmother are experienced in these matter and do not need any information.

- **Adult women:**

In the NE, the urban women stated they received information from MCH, radio, and midwives. The rural women mentioned that they received information from elder mothers, health center, and radio. Some of them mentioned religious leaders also. The nomadic women reported that

they received information from experienced mothers, midwives and self- experience. In the CSZ self- experience, elderly women, and health center are the sources of the urban adult women; health worker, radio, and self-experience are the sources of the rural women; and the nomadic women received information from elder mother and midwives. In the NW, radio and MCH are the common sources of information for adult women in which the rural and the nomadic women included elders and the experienced women of the community.

- **Youth Girls:**

The urban girls of the NE have received information about reproductive health from radio and MCH; the rural girls added religious leader and elder people in the list; and the nomadic girls added midwives and community meeting in the list.

In the CSZ, the urban girls received information from radio, TV, School, and elderly mother; the rural girls received from MCH and TBAs; and the nomadic girls received from mother, health worker, and experienced person in the community.

In the NW, the urban girls mentioned that the family, health post, and radio are their sources of information. The rural girls mentioned nearest hospital, religious leader, and radio; and the nomadic girls mentioned mother as their sources of information.

- **Youth Boys:**

All young boys in all of the three population settings of the NE commonly mentioned radio and MCH from where they learnt about reproductive health. The rural and the nomadic boys added midwives and elder women also as their sources of information. Radio, health center, TV, and elderly women are the sources of the urban boys of the CSZ; the rural boys mentioned TBAs, elderly person, MCH, and physician; the nomadic boys mentioned grand mother, radio, and religious leader as their sources of information.

In the NW, the urban boys received information from radio, TV, MCH, and doctor; the rural boys mentioned radio and doctor; and the nomadic boys mentioned elderly people, MCH, and health post as their sources of information.

- **Male:**

In the NE, most of the men groups in all population settings mentioned that they received information from midwives, radio, and MCH on reproductive health. Many of them mentioned self-experience, other experienced persons and religious leader also.

Radio, health center, religious leader, parents, doctor, and customs are some of the information sources mentioned by the men groups in the CSZ. In the NW, most of the men commonly mentioned radio as their information source, including TV, doctor, UNICEF for the urban, rural and the nomadic men respectively.

**Response of the target groups indicates that in the urban areas of all zones radio and health center/professional are the basic sources from where the target groups learnt about reproductive health. Whereas experience of elderly mothers, fellow peers, and religious leaders are the basic sources of information in the rural and the nomadic areas. Disparity of the urban, rural and the nomad's sources of information reflect the access to the available channels, trust and applicability of the information received.**

#### **5.4.5. Sources of firsthand information:**

- **Elderly women:**

In the NE, the urban elderly women mentioned that they would seek advice from the doctor and MCH in need. For the rural and the nomadic elderly women midwives and experienced person from the community are the sources of firsthand advice in need.

In the CSZ, the urban elderly women stated that they would seek advice of doctor, MCH and health center in need. The rural elderly women would go to the hospital, midwives, and health center depending on time and necessity and the nomadic elderly women would go to the experienced mother, physician (if available), and midwives for advice in need.

In the NW, the urban elderly women would seek advice from MCH and experienced fellow women. The rural elderly women would go to nearest town/doctor and experienced fellow women; and the nomadic elderly women would seek advice from men in the family, experienced women and doctors depending on the advice of men and experienced person.

- **Adult women:**

The urban women of the NE stated that they would go to the specialist and midwives for firsthand advice in need. The rural women mentioned midwives and MCH as the sources of firsthand information in need, while nomadic women included elder mothers in the list of firsthand information sources.

In the CSZ, the urban adult women reported that they would seek advice from the elderly women, religious llema (healer), midwives, and doctor depending on their availability. The rural women would go to the religious leader/healer, midwives, and physician; and the nomadic women would go to experienced mother, midwives, and pharmacies for advice. In the NW, the urban women would seek advice from MCH, health post and experienced women; the rural women would go to the elders and experienced person, MCH and doctor; and the nomadic women would go to the health post and experienced person for advice in need.

- **Youth Girls:**

In the NE, the urban girls would go to the midwives, hospital, and health center to seek advice in need; the rural girls mentioned that they would go to the midwives and MCH; and the nomadic girls mentioned that they would seek firsthand advice from experienced person and parents.

In the CSZ, the urban girls mentioned MCH, doctor, experience person for advice; the rural girls mentioned mother, midwives, and health worker; and the nomadic women mentioned midwives, pharmacies and experienced women where they would go for advice in need. In the NW, the urban girls mentioned that they would go the parents, doctor, and MCH for advice; the rural and the nomadic girls said they would go to the nearest doctor, hospital, Sheikh and the elderly women respectively for advice.

- **Youth Boys:**

The urban young boys in the NE said that they would go to the midwives and doctor for advice in need; the rural boys suggested asking with their mothers about the issue; and the nomadic boys mentioned that they would seek advice from experienced person, elders, and religious leader.

In the CSZ, the urban boys said they would go to TBAs, elderly person, and physician; the rural and the nomadic boys would go to the parents, religious leader, mosque, physician and midwives for advice in need. The urban boys of the NW said that they would go to the women's meeting, doctor, and health post; the rural boys would seek advice from the nearest doctor and hospital; and the nomadic boys said they would go to the experienced person in the community.

- **Male:**

In NE, the urban men said that they would seek advice from the MCH and radio in need; the rural men would go to the MCH and doctor; the nomadic men would go to the midwives and mothers in need of advice.

In the CSZ, the urban men would go to the doctor, religious llema, and health center for advice; the rural men would go to the religious leader, health center, midwives, and mother; the nomadic men would go to the religious leader, physician and health center.

In the NW, the urban men would go to the MCH and doctor/ TBAs; the rural men would go to the religious leader and nearest health post; and the nomadic men would go to the experienced women and would use self-experience in need of advice. Many of the rural and the nomadic target groups mentioned that women in their area gives birth in bushes while looking after the cattle, therefore health services in distance have no use for them. Consequently, they have to rely on experienced person unless the case is very serious.

**The response implies that along with MCH and midwives experienced person (not necessarily with health education) and mothers have important role in information sharing in the nomadic areas.**

**The discussion also indicates that religious leader/healer, health institutions and professionals, and parent or elderly person with experience are the common sources for seeking advice in need for all target groups depending on necessity and availability. The response indicates that the entire target groups have similar limitations.**

#### **5.4.6. Preferred channels to receive information:**

- **Elderly women:**

In the NE, the urban elderly women preferred radio, mobile microphone, and doctor to receive information. Contrary to them the rural elderly women limited the discussion and mentioned that they have crossed the age to be interested on reproductive health matters so do not have any preference. The nomadic elderly women preferred a woman's meeting to receive information where they feel comfortable to discuss the problem. Some of them expressed that they are the elder women so people supposed to learn from them rather than they learning from others, it is like "**the children who said we will teach our mothers how to deliver.**"

In the CSZ, the elderly women commonly preferred radio, mobile microphone, and mosque in which the urban elderly women added TBAs and women's party. Many of them said that they have passed the age of reproduction so do not look for information.

In the NW, the urban elderly women preferred radio, mobile microphone, and MCH; the rural elderly women preferred mosque, teashop, and MCH; and the nomadic women preferred doctor. Some of them mentioned that in their area there is no health post where they can verify the information received from other channels, so do not have confidence on information of other channels.

**The indifferent attitude of the rural and the nomadic elderly mothers has direct impact on the reproductive health of young women and mothers, as elderly mothers are the preservers of the tradition.**

**The response indicates that elderly women are some how reluctant to discuss about reproductive health as they consider themselves above the age groups dealing with the issue. On the other hand, to look for information/advice on reproductive health is something like undermining their long experience.**

- **Adult women:**

In the NE, the urban women preferred the health center and mobile microphone to receive information; the rural women chose MCH, radio, and religious leader; and the nomadic women chose health center and community meeting to receive information on the reproductive health.

The urban adult women of the CSZ preferred radio, TBAs, and health center; the rural women preferred mosque, radio, and midwives; and the nomadic women preferred radio, mobile microphone, and mosque.

Radio, MCH, and mobile microphone; MCH, mosque, and teashop; health post and nearest town are the preferred channels of the urban, rural and the nomadic adult women in the NW respectively.

▪ **Youth Girls:**

In the NE, the urban girls preferred health center, doctor, and radio to receive information on the reproductive health; the rural girls preferred religious leader, elder mother, and radio; the nomadic girls preferred radio and women's meeting to receive information on reproductive health.

In the CSZ, the urban girls preferred TV, radio, mobile microphone; the rural girls preferred radio, mobile microphone, MCH and midwives; and the nomadic girls chose midwives, mobile microphone, radio and the mosque to receive information on the reproductive health.

In the NW, the urban girls preferred radio and newspaper; the rural girls preferred teashop, school, radio, and health post; and the nomadic girls preferred health post and nearest town (doctor, pharmacy). Some of them stated that *at this moment they are in need of educational information rather than information on reproductive health.*

▪ **Youth Boys:**

In the NE, the urban boys preferred radio, mosque, and health book; the rural boys preferred midwives, and MCH; the nomadic boys preferred radio and religious meeting to receive information on reproductive health.

In the CSZ most of the boys preferred radio, mobile microphone in which the urban boys added TV and physician, the rural and the nomadic boys added the mosque.

In the NW, radio, mobile microphone, MCH and meeting places are the preferred channels of the boys groups.

▪ **Male:**

In the NE, the urban men preferred the MCH and radio to receive information on the reproductive health; the rural men chose MCH, midwives, and religious leader; and the nomadic men preferred radio and community meeting.

In the CSZ, the urban men preferred TV, radio, MCH, midwives, and physician; the rural men chose mosque, radio, mother, and doctors; and the nomadic men preferred mobile microphone, radio, and community leader.

In the NW, most of the men preferred radio, mobile microphone, and MCH to receive information on the reproductive health.

**The discussion indicates that there is similarities between the sources used for information and preferred channels to receive information. There is also similarities between the firsthand information sources and preferred channels. This closeness of sources and channels signifies the changing roles of the information sources and communication channels, which need to be focused in strategies of communication for intensive interventions of educating messages.**

□ **Main findings:**

- The response indicates that level of knowledge on reproductive health, among all target groups are more or less same. Young generation is more dependent on elder generation in terms of information, resources, and advice. As the charts indicate dissemination of information comes from elder to the younger perpetuating the unfavorable traditional attitude even though the elders are receiving lots of useful but new information. Which once again reinforces the finding that young generation does not have access to decision making and their knowledge is not heard.
- The discussion reveals that experience of elderly mothers has specific role in the reproductive health. The rural and the nomadic women are less informed about the reproductive health than the urban women are. There is general lack of adequate pre and post-natal care.
- There are varieties in preferred information receiving channels, however, only those channels in easy access and confidence would be contacted to seek advice in need.
- Good care, consultation with nearest health center or doctor, nutritious diet, and slaughtering of a goat are some of the common care mentioned by the entire target groups in all population settings provided to the expecting and mothers in the pre and neo-natal stages.
- This response contradicts with the common problem faced by the women during pregnancy and post-natal period. The charts have revealed that all target groups have mentioned anemia and malnutrition as most common problems faced during the pregnancy. Further, pre-natal death and difficult delivery are some other problems mentioned by many of the target groups. Anemia and malnutrition is directly linked with the inadequate and lack of nutritious food and because of that a difficult delivery. High rate of mother and infant (MMR- 1600/ 1000 live birth; IMR- 125/1000 live birth) death in Somalia reflects lack of adequate care, nutrition and health services provided during antenatal and post natal stages. From another point of view, all the target groups mentioned the necessary pre and post-natal care to be provided, yet they are unable to provide the care due to inadequate health facilities, and economic condition of the family.
  
- The experience of the elderly mothers has specific role in the reproductive health. the rural and the nomadic women are less informed about reproductive health than the urban women are. Despite their important role the elderly women are not very much concerned to enhance their limited knowledge on the reproductive health. They believe that the knowledge they have is enough and adequate to deal the problems of the reproductive health and to seek for new information is like undermining their long experience. Consequently, they are supporting the perpetuation of the unfavorable tradition.
- All the target groups in all population groupings mentioned about slaughtering a goat after delivery of a baby as post-natal care for the mother, which is directly related with the Islamic teaching. It is mentioned in one of the Hadith of the Prophet that when a mother gives birth she should be given adequate food and birth of a baby should be celebrated slaughtering the goat. Therefore, the slaughtering of a goat is more practiced as the religious ritual than the required care for the mother. And again, slaughtering depends so much on the economic capacity of the family.
  
- Many women mentioned men as the ultimate sources of advice and women would follow their advice in need indicates the enormous dependence of women limiting their access to available health services. Use of health service depends how the man of the family perceives it.

□ **Recommendation:**

- Elder generation should be targeted more with appropriate information on reproductive health, focused to convince them about the importance and usefulness of the information they are receiving, so that their know how will be helpful for the younger generation and to bring a change in health practice.
- Young generation needs empowerment and access to resources so that they can hold a decisive role in the health matters at least concerned with them.
- Elder mothers, community elders, religious leader, and midwives should be well informed on reproductive health issues.
- The rural and the nomadic areas need more intervention with specific information on reproductive health using their preferred channels. People should be educated that it is an important matter to build a healthy future rather than something shameful to talk about.
- The nomadic youths are in less access to information and health facilities, consequently there is a gap in their knowledge. Therefore, a specific package of information for the nomadic youth target groups should be developed and dissemination flow in the nomadic areas should be enhanced using the preferred channels.
- Information on pre and post-natal care should be enhanced including religious teaching, as people feels more obliged to fulfill the religious teachings.
- Men in all population setting should be given reproductive health education using their preferred channels.

**5.5. HIV/AIDS: Chart: 5**

<b>NE-Urban</b>					
Questions discussed	Response of the target groups				
	Eld. women	Adult women	Youth(G)	Youth(B)	Male
If heard about HIV/AIDS	Yes	Yes	Yes	Yes	Yes
Knowledge about HIV/AIDS	<ul style="list-style-type: none"> <li>▪ It is a new killer disease</li> <li>▪ Young generation transmits each other</li> <li>▪ It transmits syringe, sexual intercourse, operation</li> <li>▪ Muslims do not get infected with it</li> </ul>	<ul style="list-style-type: none"> <li>▪ It is a dangerous disease</li> <li>▪ It has no cure</li> <li>▪ It spreads through sexual relation</li> </ul>	<ul style="list-style-type: none"> <li>▪ It has no cure</li> <li>▪ It can be prevented</li> <li>▪ Transmits through sex, syringe, hair cutting place</li> </ul>	<ul style="list-style-type: none"> <li>▪ It is a dangerous disease that destroys body resistance</li> <li>▪ Transmits from sexual intercourse</li> <li>▪ Syringe</li> </ul>	<ul style="list-style-type: none"> <li>▪ It is dangerous disease</li> <li>▪ It affect all sort of human beings</li> <li>▪ It has no cure</li> <li>▪ It is common in the western countries</li> </ul>
Source of info.	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Health centers and doctors</li> <li>▪ Educated people</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Newspapers</li> <li>▪ Doctors</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Books</li> <li>▪ Community meeting</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ School</li> <li>▪ TV</li> <li>▪ Books doctors</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Newspapers</li> <li>▪ Books</li> </ul>
Why should people know about HIV/AIDS	<ul style="list-style-type: none"> <li>▪ It is a serious and new disease</li> <li>▪ It should given special consideration</li> </ul>	<ul style="list-style-type: none"> <li>▪ People should have more knowledge about it</li> <li>▪ It is dangerous and has no treatment</li> <li>▪ To be careful about it</li> </ul>	<ul style="list-style-type: none"> <li>▪ It is a killer disease it is important to know about prevention</li> <li>▪ To raise awareness about it</li> </ul>	<ul style="list-style-type: none"> <li>▪ People are attentive about it</li> <li>▪ Good to know about prevention</li> </ul>	<ul style="list-style-type: none"> <li>▪ To be alert from it</li> <li>▪ It is good to know more about it</li> </ul>
Preferred channel to know about	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Newspaper</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Health centers</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ School</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Mosque</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Mosque</li> </ul>

HIV/AIDS	<ul style="list-style-type: none"> <li>Health centers</li> </ul>	<ul style="list-style-type: none"> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>/Quranic School</li> <li>Community meeting</li> </ul>	<ul style="list-style-type: none"> <li>School</li> <li>Newspapers</li> </ul>	<ul style="list-style-type: none"> <li>Health centers</li> </ul>
Types of info. Needed	<ul style="list-style-type: none"> <li>How to prevent</li> <li>How to recognize its symptoms</li> <li>How does it transmit</li> </ul>	<ul style="list-style-type: none"> <li>Treatment of AIDS</li> <li>How to prevent symptoms</li> </ul>	<ul style="list-style-type: none"> <li>How to detect its symptoms</li> <li>Prevention</li> <li>Awareness</li> </ul>	<ul style="list-style-type: none"> <li>The way it transmits</li> <li>Where the disease comes from</li> <li>How get medicine</li> </ul>	<ul style="list-style-type: none"> <li>Awareness raising info.</li> <li>How to identify the disease</li> </ul>
<b>NE-Rural</b>					
If heard about HIV/AIDS	Yes	Yes	Yes	Yes	Yes
Knowledge about HIV/AIDS	<ul style="list-style-type: none"> <li>Patient dies soon</li> <li>It is a dangerous disease</li> </ul>	<ul style="list-style-type: none"> <li>It effect only non-Muslims</li> </ul>	<ul style="list-style-type: none"> <li>It is a serious killer disease</li> </ul>	<ul style="list-style-type: none"> <li>It is a killer disease</li> </ul>	<ul style="list-style-type: none"> <li>It is dangerous disease</li> <li>Transmits from sex</li> </ul>
Source of info.	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Everyone talks about it</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Fellow villagers</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Fellow villagers</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Health centers</li> </ul>
Why should people know about HIV/AIDS	<ul style="list-style-type: none"> <li>Good to have knowledge about the dangerous disease</li> <li>To know what cause it and how it transmits</li> </ul>	<ul style="list-style-type: none"> <li>To learn how it kill and transmits</li> </ul>	<ul style="list-style-type: none"> <li>To learn more about it</li> </ul>	<ul style="list-style-type: none"> <li>Since it is a killer disease it is important to tell people</li> <li>The whole world is complaining about it</li> <li>To ensure its existence in the community</li> </ul>	<ul style="list-style-type: none"> <li>People should have knowledge about the disease</li> </ul>
Preferred channel to know about HIV/AIDS	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>MCH</li> <li>Religious scholar</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>MCH</li> </ul>
Types of info. Needed	<ul style="list-style-type: none"> <li>Its effects</li> <li>How it transmits</li> <li>What causes it</li> </ul>	<ul style="list-style-type: none"> <li>Prevention, causes, and it transmits</li> </ul>	<ul style="list-style-type: none"> <li>Awareness about its problems and risk</li> </ul>	<ul style="list-style-type: none"> <li>Prevention</li> <li>Why it spreads and how it transmits</li> </ul>	<ul style="list-style-type: none"> <li>How it transmits</li> <li>How to prevent</li> <li>All information relating to this disease</li> </ul>
<b>NE-Nomadic</b>					
If heard about HIV/AIDS	Yes	Yes	Yes	Yes	Yes
Knowledge about HIV/AIDS	<ul style="list-style-type: none"> <li>Evil gotten people get infected</li> <li>Dose not effect Muslims</li> <li>Should seek protection from Allah</li> </ul>	<ul style="list-style-type: none"> <li>It is a killer disease</li> <li>Does not have any cure</li> </ul>	<ul style="list-style-type: none"> <li>It is a very dangerous disease</li> <li>It affects only non-believers</li> <li>It is caused by illegal intercourse</li> </ul>	<ul style="list-style-type: none"> <li>It is a killer disease</li> <li>It is evil gotten disease</li> <li>It is caused by illegal intercourse</li> <li>Muslims don't get infected it only effects non-believers</li> </ul>	<ul style="list-style-type: none"> <li>It effects only non-Muslims</li> <li>It has come to Somalia also</li> <li>It has no cure</li> <li>It is sexually transmitted</li> </ul>
Source of info.	<ul style="list-style-type: none"> <li>Radio</li> <li>Islamic scholar</li> <li>Rumor of the community</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Community</li> <li>Health center</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Rumors in the community</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Elders</li> <li>Doctors</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Community</li> <li>Islamic scholar</li> <li>Health center</li> </ul>
Why should people know about HIV/AIDS	<ul style="list-style-type: none"> <li>Since it does not have cure it is good to know about it for prevention</li> </ul>	<ul style="list-style-type: none"> <li>It is a killer disease and cure is not available</li> </ul>	<ul style="list-style-type: none"> <li>To defend from the disease</li> <li>It is good to inform community about this dangerous disease</li> </ul>	<ul style="list-style-type: none"> <li>It is good to have knowledge about it</li> <li>To take better care from it</li> </ul>	<ul style="list-style-type: none"> <li>It is good to know for prevention because it has no cure</li> </ul>
Preferred channel to know about HIV/AIDS	<ul style="list-style-type: none"> <li>Radio</li> <li>Community meeting</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Community meeting</li> <li>Religious scholar</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Women's meeting</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>community meetings</li> <li>Religious congregation</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Doctors</li> <li>Community awareness programs</li> </ul>
Types of info.	<ul style="list-style-type: none"> <li>Prevention</li> </ul>	<ul style="list-style-type: none"> <li>What is it</li> </ul>	<ul style="list-style-type: none"> <li>How it</li> </ul>	<ul style="list-style-type: none"> <li>How it kills the</li> </ul>	<ul style="list-style-type: none"> <li>How to prevent</li> </ul>

Needed	<ul style="list-style-type: none"> <li>What is it</li> </ul>	<ul style="list-style-type: none"> <li>How to prevent</li> </ul>	<ul style="list-style-type: none"> <li>transmits</li> <li>Prevention</li> <li>Common place of the disease</li> <li>What helps to spread the disease</li> </ul>	<ul style="list-style-type: none"> <li>people</li> <li>How it develops</li> <li>Prevention</li> <li>How to manage infected person</li> </ul>	<ul style="list-style-type: none"> <li>Reasons why it happens</li> </ul>
<b>CS-Urban</b>					
If heard about HIV/AIDS	<ul style="list-style-type: none"> <li>Yes</li> <li>Bad and killer disease</li> <li>It affects non-believers</li> <li>Contagious disease</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> <li>Never seen it so do not believe its existence in Somalia</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> <li>Killer disease</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> <li>Bad disease</li> <li>Ape passed the disease to human being</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> <li>Killer disease</li> <li>Not found in Somalia</li> </ul>
Knowledge about HIV/AIDS	<ul style="list-style-type: none"> <li>Sexually transmitted</li> <li>Transmits from needles, and dentist's equipment</li> </ul>	<ul style="list-style-type: none"> <li>Has serious health problems</li> <li>A dangerous disease</li> </ul>	<ul style="list-style-type: none"> <li>It cuts human flesh</li> <li>Contagious disease</li> <li>Without treatment</li> </ul>	<ul style="list-style-type: none"> <li>Transmitted sexually and by used syringe, and shaving blade</li> <li>Has no treatment</li> </ul>	<ul style="list-style-type: none"> <li>Contagious disease</li> <li>Transmits from sex, syringe, shaving blades</li> </ul>
Source of info.	<ul style="list-style-type: none"> <li>Radio</li> <li>Sons</li> <li>Community</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Community</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>TV</li> <li>Magazine</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Community</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>TV</li> <li>Public places</li> </ul>
Why should people know about HIV/AIDS	<ul style="list-style-type: none"> <li>To know more about it</li> <li>To understand and be prevented from it</li> </ul>	<ul style="list-style-type: none"> <li>To understand properly</li> <li>Prevention and care</li> </ul>	<ul style="list-style-type: none"> <li>For prevention</li> <li>People have little knowledge</li> <li>Not common disease in Somalia</li> </ul>	<ul style="list-style-type: none"> <li>To prevent people</li> <li>It poses serious threat to human being</li> </ul>	<ul style="list-style-type: none"> <li>To learn how to prevent</li> <li>To identify it</li> <li>People are shocked of this disease</li> </ul>
Preferred channel to know about HIV/AIDS	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>TV</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>TV</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>TV</li> <li>Mobile microphone</li> <li>Seminar and debate</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Newspaper</li> <li>TV</li> <li>Doctors</li> </ul>
Types of info. Needed	<ul style="list-style-type: none"> <li>Prevention</li> <li>Transmission</li> <li>Its origin and care to be provided to the infected person</li> </ul>	<ul style="list-style-type: none"> <li>How to prevent</li> <li>Its symptoms</li> <li>To know if it exists in Somalia</li> </ul>	<ul style="list-style-type: none"> <li>Origin</li> <li>Prevention and treatment</li> <li>Care to be given</li> </ul>	<ul style="list-style-type: none"> <li>What it is</li> <li>How to prevent</li> <li>To identify the symptoms</li> </ul>	<ul style="list-style-type: none"> <li>Awareness about it</li> <li>Transmission</li> <li>Symptoms and problems</li> <li>Prevention</li> <li>Treatment</li> </ul>
<b>CS-Rural</b>					
If heard about HIV/AIDS	<ul style="list-style-type: none"> <li>Yes (few)</li> <li>No (most)</li> <li>Bad disease</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> <li>Infected by Christians</li> <li>Disease of prostitutes</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> <li>Bad disease</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> <li>Bad disease</li> <li>Non-Muslim disease</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> <li>Dangerous disease</li> </ul>
Knowledge about HIV/AIDS	<ul style="list-style-type: none"> <li>Do not know what it is</li> </ul>	<ul style="list-style-type: none"> <li>A killer disease</li> </ul>	<ul style="list-style-type: none"> <li>Do not have much knowledge about it</li> </ul>	<ul style="list-style-type: none"> <li>Killer disease</li> </ul>	<ul style="list-style-type: none"> <li>Killer disease</li> </ul>
Source of info.	<ul style="list-style-type: none"> <li>Radio</li> <li>Rumors of the community</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>People coming from neighboring countries</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Health center</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>
Why should people know about HIV/AIDS	<ul style="list-style-type: none"> <li>To properly about it</li> </ul>	<ul style="list-style-type: none"> <li>To know the disease and to prevent</li> <li>To know its origin</li> <li>To identify the case and isolate the infected</li> <li>It is a new disease</li> </ul>	<ul style="list-style-type: none"> <li>How it happens</li> <li>How to prevention it</li> </ul>	<ul style="list-style-type: none"> <li>So that people can prevent themselves</li> <li>It is spreading fast</li> </ul>	<ul style="list-style-type: none"> <li>Only heard do not know much about it</li> <li>To learn how to prevent and how it transmits</li> </ul>
Preferred channel to know about HIV/AIDS	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>Religious leader</li> <li>Quranic school</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>TV</li> <li>Women's tea party</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Health centers</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>TV</li> <li>Religious leader</li> <li>Chat chewing venue</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>Mosque</li> <li>Water source</li> </ul>

					point
Types of info. Needed	<ul style="list-style-type: none"> <li>▪ Prevention</li> <li>▪ Care</li> <li>▪ Treatment</li> <li>▪ What kind of disease is it</li> </ul>	<ul style="list-style-type: none"> <li>▪ Transmission</li> <li>▪ Prevention</li> </ul>	<ul style="list-style-type: none"> <li>▪ How to prevent</li> <li>▪ Symptoms</li> </ul>	Prevention How it is transmitted How it is treated How HIV changes	<ul style="list-style-type: none"> <li>▪ Prevention and treatment</li> <li>▪ How it affects people</li> </ul>
<b>CS-Nomadic</b>					
If heard about HIV/AIDS	No (most) Yes (few)	No (most) Yes (few)	No (most) Yes (few)	Yes (most) No (few)	Yes Infected person will have burn in the body
Knowledge about HIV/AIDS	<ul style="list-style-type: none"> <li>▪ Do not know about it</li> <li>▪ Bad disease</li> <li>▪ Do not believe it exists</li> </ul>	Disease without cure No treatment	<ul style="list-style-type: none"> <li>▪ Heard but do not know much about it</li> </ul>	<ul style="list-style-type: none"> <li>▪ Killer disease</li> <li>▪ Communicable disease</li> </ul>	<ul style="list-style-type: none"> <li>▪ Killer disease without medicine or cure</li> </ul>
Source of info.	<ul style="list-style-type: none"> <li>▪ Radio</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Women folks in the community</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Friends</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Friends</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Religious leader</li> </ul>
Why should people know about HIV/AIDS	<ul style="list-style-type: none"> <li>▪ To understand</li> <li>▪ For prevention</li> </ul>	<ul style="list-style-type: none"> <li>▪ New disease</li> <li>▪ To understand and prevention</li> </ul>	<ul style="list-style-type: none"> <li>▪ To know the causes and prevention</li> </ul>	<ul style="list-style-type: none"> <li>▪ To understand it</li> <li>▪ Only heard do not know what it is</li> </ul>	<ul style="list-style-type: none"> <li>▪ To take care of it</li> <li>▪ For prevention</li> </ul>
Preferred channel to know about HIV/AIDS	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Men</li> <li>▪ Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Mobile microphone</li> <li>▪ Awareness</li> <li>▪ Mosque</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Community chief</li> <li>▪ Mosque</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Community chief</li> <li>▪ Mobile microphone</li> <li>▪ Health worker</li> </ul>	<ul style="list-style-type: none"> <li>▪ Mobile microphone</li> <li>▪ Radio</li> <li>▪ Religious leader</li> </ul>
Types of info. Needed	<ul style="list-style-type: none"> <li>▪ How to prevent</li> <li>▪ How it transmits</li> </ul>	For prevention and take care of it	<ul style="list-style-type: none"> <li>▪ To know the symptoms and prevention</li> <li>▪ How it transmits</li> </ul>	<ul style="list-style-type: none"> <li>▪ What the disease is</li> <li>▪ How to care</li> <li>▪ Prevention</li> </ul>	<ul style="list-style-type: none"> <li>▪ Its prevention</li> <li>▪ How it is transmitted</li> </ul>
<b>NW-Urban</b>					
If heard about HIV/AIDS	Yes	Yes Awful disease	<ul style="list-style-type: none"> <li>• Yes</li> <li>• There is no cure</li> <li>• It infects the sex workers</li> </ul>	<ul style="list-style-type: none"> <li>• Yes</li> <li>• A deadly disease</li> <li>• It is sign of wrath of God</li> </ul>	<ul style="list-style-type: none"> <li>• Yes</li> <li>• Deadly disease</li> <li>• Religious leader was preaching it is curse of Allah</li> </ul>
Knowledge about HIV/AIDS	<ul style="list-style-type: none"> <li>▪ It is an awful disease</li> <li>▪ Transmits by an intercourse with illegal partner</li> <li>▪ Barber's instrument and contaminated needle</li> </ul>	<ul style="list-style-type: none"> <li>• Have little knowledge</li> <li>• Transmits sexually and blood transfusion</li> </ul>	<ul style="list-style-type: none"> <li>▪ It transmits sexually and used blades</li> </ul>	<ul style="list-style-type: none"> <li>▪ It has no cure</li> <li>▪ Infected person never recovers</li> </ul>	<ul style="list-style-type: none"> <li>▪ It transmits sexually</li> <li>▪ It is deadly and worldwide problem</li> </ul>
Source of info.	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Community</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Neighboring country</li> <li>▪ Newspaper</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ School</li> <li>▪ Talk of the town</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> </ul>
Why should people know about HIV/AIDS	<ul style="list-style-type: none"> <li>• Since it is dangerous disease</li> <li>• To prevent and avoid the disease</li> </ul>	<ul style="list-style-type: none"> <li>▪ It is dangerous disease, it has to be known</li> <li>▪ To be cautious</li> </ul>	<ul style="list-style-type: none"> <li>▪ Since it has no cure people should know it</li> <li>▪ It is deadly disease</li> </ul>	<ul style="list-style-type: none"> <li>▪ People need to be well known of the disease</li> <li>▪ To know its prevention</li> </ul>	<ul style="list-style-type: none"> <li>• To be cautious</li> <li>• How to be prevented from it</li> </ul>
Preferred channel to know about HIV/AIDS	<ul style="list-style-type: none"> <li>▪ Mosque</li> <li>▪ Radio</li> <li>▪ Team of doctor</li> <li>▪ Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Public</li> <li>▪ Awareness</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ TV</li> <li>▪ Mobile microphone</li> <li>▪ News paper</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ School</li> <li>▪ TV</li> <li>▪ Newspaper</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Mosque</li> <li>▪ Community meeting</li> </ul>
Types of info. Needed	<ul style="list-style-type: none"> <li>▪ Causes</li> <li>▪ How it transmits</li> <li>▪ Prevention</li> </ul>	<ul style="list-style-type: none"> <li>▪ Prevention</li> <li>▪ Transmission</li> <li>▪ Symptoms</li> </ul>	<ul style="list-style-type: none"> <li>▪ How it is contracted and transmitted</li> <li>▪ How to treat the infected person</li> </ul>	<ul style="list-style-type: none"> <li>▪ Prevention</li> <li>▪ How to identify the disease</li> <li>▪ How it comes and how one gets it</li> </ul>	<ul style="list-style-type: none"> <li>▪ Prevention</li> <li>▪ How it is contacted</li> </ul>
<b>NW-Rural</b>					
If heard about HIV/AIDS	<ul style="list-style-type: none"> <li>• Yes (some)</li> <li>• No (few)</li> </ul>	Yes Have not seen	Yes (some) It is awful disease	Yes Have not seen	<ul style="list-style-type: none"> <li>• Yes it affects bad people without</li> </ul>

	<ul style="list-style-type: none"> <li>Whole family have been infected using same tooth brush</li> </ul>	It does not affect non-Muslims	It does not affect Muslims	Awful disease	<ul style="list-style-type: none"> <li>religious faith</li> <li>It does not affect good Muslims</li> </ul>
Knowledge about HIV/AIDS	<ul style="list-style-type: none"> <li>It is dangerous disease</li> </ul>	<ul style="list-style-type: none"> <li>It is a bad disease</li> </ul>	<ul style="list-style-type: none"> <li>Deadly disease without cure</li> </ul>	<ul style="list-style-type: none"> <li>Deadly disease without cure</li> <li>Transmits sexually</li> </ul>	<ul style="list-style-type: none"> <li>It can transmit by needles and illegal sex</li> </ul>
Source of info.	<ul style="list-style-type: none"> <li>Radio</li> <li>Fellow people</li> <li>Community</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Community</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Nearest town</li> <li>People coming in from town</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>People</li> <li>Neighboring country</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>Town</li> </ul>
Why should people know about HIV/AIDS	<ul style="list-style-type: none"> <li>It is fatal and transmits easily</li> <li>To protest and prevent</li> </ul>	<ul style="list-style-type: none"> <li>It is spreading fast so it is good to know</li> <li>To prevent</li> </ul>	<ul style="list-style-type: none"> <li>To be aware of it</li> <li>To the way it transmits</li> </ul>	<ul style="list-style-type: none"> <li>It is deadly disease</li> <li>Its stories are bad</li> <li>To be informed about its transmission</li> </ul>	<ul style="list-style-type: none"> <li>To protect an be aware of it</li> </ul>
Preferred channel to know about HIV/AIDS	<ul style="list-style-type: none"> <li>Mosque</li> <li>Community meeting</li> <li>Teashop</li> <li>MCH</li> </ul>	<ul style="list-style-type: none"> <li>Mosque</li> <li>Poster</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Mosque</li> <li>Teashop</li> <li>School</li> <li>Meeting place</li> </ul>	<ul style="list-style-type: none"> <li>Mosque</li> <li>MCH</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>Mobile microphone</li> </ul>
Types of info. Needed	<ul style="list-style-type: none"> <li>How it transmits</li> <li>How to prevents</li> <li>How it comes</li> </ul>	<ul style="list-style-type: none"> <li>How to avoid</li> <li>Origin and transmission</li> <li>Everything useful to prevent</li> </ul>	<ul style="list-style-type: none"> <li>Prevention measures</li> <li>How a parson contacts the disease</li> <li>How to treat the infected one</li> </ul>	<ul style="list-style-type: none"> <li>How it transmits</li> <li>How to prevent and a void it</li> </ul>	<ul style="list-style-type: none"> <li>How to identify it</li> <li>Prevention</li> <li>How it transmits</li> </ul>
<b>NW-Nomadic</b>					
If heard about HIV/AIDS	<ul style="list-style-type: none"> <li>Yes</li> <li>Have not seen any one</li> <li>Disease of non-Muslims only</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> <li>Have not seen any one infected</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> <li>It affect those who commits sin</li> </ul>	Yes	Yes
Knowledge about HIV/AIDS	<ul style="list-style-type: none"> <li>Do not know</li> <li>It is deadly disease</li> </ul>	<ul style="list-style-type: none"> <li>Have no other knowledge</li> </ul>	<ul style="list-style-type: none"> <li>It transmits through adultery</li> </ul>	<ul style="list-style-type: none"> <li>Do not have knowledge</li> </ul>	It is very dangerous disease
Source of info.	<ul style="list-style-type: none"> <li>Radio</li> </ul>	Radio	Radio	<ul style="list-style-type: none"> <li>Radio</li> <li>Town</li> <li>Friends</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>
Why should people know about HIV/AIDS	<ul style="list-style-type: none"> <li>It is new disease</li> <li>People have little knowledge about it</li> </ul>	<ul style="list-style-type: none"> <li>To avoid and to be aware of it</li> </ul>	<ul style="list-style-type: none"> <li>It is a fatal disease need to know more</li> <li>Since it is dangerous people should know about it</li> <li>To avoid</li> </ul>	<ul style="list-style-type: none"> <li>In order to avoid it</li> <li>To be aware of the problem and causes</li> </ul>	<ul style="list-style-type: none"> <li>It is fatal disease spreading rapidly</li> <li>To know how it transmits</li> <li>Without information it will be difficult to avoid</li> </ul>
Preferred channel to know about HIV/AIDS	<ul style="list-style-type: none"> <li>Radio</li> <li>Team of mobile doctor</li> </ul>	<ul style="list-style-type: none"> <li>Radio mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Medical team</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>UNICEF</li> <li>Newspaper</li> </ul>
Types of info. Needed		<ul style="list-style-type: none"> <li>How to prevent</li> <li>How it is transmitted</li> <li>symptoms</li> </ul>	<ul style="list-style-type: none"> <li>How it came out</li> <li>How to eradicate</li> <li>How many people are infected</li> </ul>	<ul style="list-style-type: none"> <li>How it transmits</li> <li>Its symptoms</li> </ul>	<ul style="list-style-type: none"> <li>Prevention</li> <li>How to avoid it</li> <li>Detail information</li> </ul>

The charts have revealed that most of the target groups have heard about HIV/AIDS in all zones and population settings. People have heard that it is a killer disease without cure. Yet there are misperceptions about the disease. In all three zones target groups have mentioned that it is a disease of non-Muslims and does not exists in Somalia, and it will not affect those who are practicing Muslims and follow the instructions of the Islam. People are interested to know more and details about the disease so that they can prevent themselves from it. Radio, and TV, in the urban areas, and in the rural and nomadic areas, radio and fellow folks are the channels from

where they received the limited information about the disease. Along with modern channels traditional interpersonal channels are equally important to disseminate information on HIV/AIDS in all population settings as well as these channels are in need of detail and appropriate information.

### **5.5.1 Heard about HIV/AIDS:**

#### **▪ Elderly Women:**

The urban elderly women in all zones unanimously mentioned that they have heard about HIV/AIDS that it is a bad and killer disease and transmits through illegal sex and barber's instruments. However, the rural and the nomadic elderly women have expressed mixed opinion. In the CSZ, most of the rural elderly women reported they have not heard about the disease. Few of them who have heard mentioned that, it is a bad disease but did not like to discuss how it is *bad*, however, they mentioned they seek protection of religion from this evil disease.

In the NW, some of the rural elderly women said that they heard *that whole family in Boroma town has been infected using same toothbrush*. Some others mentioned that it is the disease of non-Muslims.

#### **▪ Adult Women:**

Alike the elderly women, the adult women in all zones expressed that they have heard about HIV/AIDS in all population settings. Compared to the rural and the nomadic women the urban women have more information about the disease. In the CSZ and the NW many adult women stated that they have not seen any patient until now so do not believe that the disease exists in Somalia. Some of them even said *that it is the punishment from the Allah for disobeying him*. Some others reported that AIDS was reported in the countries of non-believers. Still few of them said *that immunization vaccine carries AIDS virus*.

#### **▪ Youth Girls:**

Most of the youth girls in all population groupings of all zones reported that they have heard about HIV/AIDS. Considerable number of the rural and the nomadic girls in all three zones said they have not heard about the disease.

#### **▪ Youth Boys:**

All of the youth boys in all population settings of all zones referred that they have heard about HIV/AIDS. Only few of the nomadic boys stated that they have not heard about it. In the CSZ some of the urban boys stated that they have heard that ape has passed the disease to human being, which is surprising to them. Some boys in the NW opined that the disease is the *sign of wrath of the God for disobeying him*.

#### **▪ Male:**

There is almost a consensus among the male groups in all population groupings of all zones that they have heard about HIV/AIDS. Only some of the nomadic men of the NE mentioned they have not heard about it. Few men even said that the disease has become so famous that almost everybody has heard about it. Some of the men in the NW mentioned that *religious leader was preaching that it is curse of the Allah*.

### **5.5.2. Knowledge about HIV/AIDS:**

- **Elderly Women:**

Most of the urban elderly women in all zones generally stated that they heard that it is new killer disease; young generation transmits to each other; it transmits through injection syringe, sexual intercourse, dentists and surgical instruments. The rural elderly women in the NE reported that the HIV/AIDS patient dies soon and it is a dangerous disease and the nomadic elderly women have heard that only evil gotten people get infected with this disease; and people should seek protection from the Allah from it. In the CSZ most of the rural and the nomadic elderly women mentioned that they have not heard about the disease, those who reported hearing about the disease mentioned not having much knowledge about it.

Most of the elderly women in all zones mentioned *that it is disease of non-believers and Muslims will not get infected with it.*

- **Adult Women:**

In the NE, according to the urban adult women they heard that it is a dangerous disease without cure and transmits from sexual relation. Both the rural and the nomadic women mentioned same information as the urban women about their knowledge on HIV/AIDS. Only some of the rural women like some of the elderly women mentioned that they have heard that **it only affects the non-Muslims**. In the CSZ also most of the adult women informed that HIV/AIDS has serious health problems and is a dangerous disease without cure. However, in the rural areas some of the women denied hearing anything about the disease and **said to ask such questions to prostitutes**. Some even mentioned that they have heard that *it is the disease of the prostitutes*. **The response indicates that despite their denial the rural women have heard that it is related with the sex**. Many women in the nomadic areas of the CSZ also reported that they have not heard about the disease, however, those who have heard it reported that it is disease without cure and treatment.

In the NW most of the women reported it as a bad and awful disease which transmits sexually and by blood transfusion. Some of the nomadic women denied having any knowledge about HIV/AIDS

- **Youth Girls:**

The urban girls in the NE said that, they heard that it is incurable disease, transmits through sex, syringe, and hair cutting place (barber's shop). Rural girls mentioned that it as a killer disease; and the nomadic young girls mentioned that it is a dangerous disease, it is caused by illegal intercourse, and it affects only the non-believers (non-Muslims). The young girls of the CSZ are also very close to their age mates of other zones. Most of the young girls of the CSZ reported that it is a contagious disease without treatment and it cuts human flesh. Many of the rural and the nomadic girls reported that they have not heard about it, and some of the nomadic girls mentioned they have heard but do not know much about the disease. Some others said they doubt that it exists.

In the NW most of the girls reported that it is a deadly disease without cure, transmits sexually, by adultery and by used razor blades.

- **Youth Boys:**

The young boys in all of three population settings of all zones reported having similar kind of information about HIV/AIDS as other target groups. Only some of the nomadic boys in the NE and also from the CSZ mentioned about the perception that **only non-believers get infected with HIV/AIDS and it is an evil gotten disease**.

- **Male:**

All of the men groups of the NE reported that they have heard that it is a dangerous disease, it affects all human being, **it is common in western countries**, and has no cure. Some of the nomadic men mentioned **it effects only non- Muslims** while few of them mentioned that they have heard **it has come to Somalia also**. In the CSZ also men are of similar opinion. Some of the urban men reported that it transmits through sex, used syringe, and shaving blades. In the NW, the urban and the rural men presented the same opinion and said that it a worldwide problem.

**The response indicates that there is true and false perceptions among the target groups about HIV/AIDS.**

### **5.5.3. Source of information:**

#### **▪ Elderly Women:**

In the NE, both urban and the rural elderly women said that they heard about the disease from radio, health center, doctor, and other educated people. Where as the nomadic elderly women stated that they heard about it from radio, religious leader, and rumor of the community. In the CSZ, for most of the elderly women radio, male member of the family and community are the sources of information in all population settings. In the NW, the urban and the rural elderly women heard from radio and the community and the nomadic elderly women heard from radio about HIV/AIDS.

#### **▪ Adult Women:**

All the women groups in all of the three population settings of the NE mentioned radio, and health center as their sources of information. Some of the rural women mentioned that every body talks about it in the community. Similarly, some of the nomadic women mentioned community meeting as their source of information. In the CSZ and the NW, women groups reported that radio, women folks and community are the sources from where they heard about HIV/AIDS.

This response signifies that HIV/AIDS has become the talk of the urban, rural, or the nomadic areas spreading both positive and negative information about it.

#### **▪ Youth Girls:**

The urban girls of the NE reported that their sources of information are radio, book, and community meeting; the rural girls mentioned radio and fellow villagers; and the nomadic girls mentioned radio and rumors of the community are their sources of information on HIV/AIDS. Similarly, the urban girls of the CSZ reported that their sources of information are radio, TV, and magazines. Where as the rural girls mentioned radio and people coming in from the neighboring countries as their sources of information. The nomadic girls of the CSZ mentioned radio and friends as their sources. In the NW, radio, newspaper, neighboring countries, and people coming in from the town are the sources of information on HIV/AIDS for young girls.

#### **▪ Youth Boys:**

In the NE radio, TV, School, and books are some of the sources mentioned by the urban boys from where they received information on HIV/AIDS. Radio and fellow villagers are the sources of information for the rural boys; and for the nomadic boys radio, community meeting and religious congregation are the main sources receiving information on HIV/AIDS. Radio is the commonly mentioned source of information for the young boys of the CSZ. The urban boys added community meeting; the rural boys added health center; and the nomadic boys added friends in their sources of information. In the NW radio, school, and friends are the sources of

information for the urban boys; the rural boys received information from radio, town, and in coming people from the town; and the nomadic boys received information from radio.

The charts have revealed that young boys of the NE are more exposed to printed information than the boys of the CSZ and the NW.

**The response also reveals that information sharing through person to person is more practiced in the rural and the nomadic areas, where people have less access to modern channels of communication. In one hand interpersonal sharing of information provides opportunity for cross-checking and confidence building on the information, on the other hand it also provides considerable chances of distortion of information. For instance, the urban youths having access to authoritative channels of information like radio, school, and books, mentioned more authoritative knowledge about HIV/AIDS, where as the rural and the nomadic boys mentioned some misperception also.**

▪ **Male:**

The urban men of the NE reported that they received information on HIV/AIDS from radio, newspaper, and books. The rural men mentioned health center along with the radio, and the nomadic men said they received information from the community, religious leader, health center and radio. In the CSZ, the urban men mentioned radio, TV, and public place; the rural and the nomadic men mentioned radio and religious leader as their sources of information. In the NW radio, mosque and town are the sources of information for most of the men groups.

**The response indicates that both traditional and modern channels are disseminating information on HIV/AIDS in the urban, rural, and nomadic areas. Despite the flow of information different kind of misperceptions do exist. Compared to female target groups in all zones men have more information on HIV/AIDS. Moreover, they are even sources of information for many rural and nomadic women.**

#### **5.5.4. Why should people know about HIV/AIDS:**

▪ **Elderly Women:**

All of the elderly women in all zones reasoned that people should know about HIV/AIDS, because it is a serious and new disease; people have less knowledge about it; it is good to have knowledge what causes it and how to prevent; and since it does not have any cure it is good to know for prevention. Some of the urban elderly women in the CSZ even mentioned that young generation should know more about the disease where as some others said that they hate to talk about this disease. **The response reveals that misperception and rumors about HIV/AIDS persist in the society mitigating the seriousness in the behavior affecting the health of people. Nevertheless massive information flow from all kind of communication channels all over the world has created a general awareness about the risk to life from HIV/AIDS.**

▪ **Adult Women:**

The entire women groups expressed similar reasons as the elderly women for the need of information about HIV/AIDS that being a killer disease without cure and little knowledge of people, it is important to know about it so that people can protect themselves. It is important to know how it kills people and how it transmits.

▪ **Youth Girls:**

Most of the young girls in all zones mentioned almost similar type of reasons to learn about HIV/AIDS. They mentioned that being a killer disease it is important to know about it to

prevent people and raise awareness about it. However, some of the young girls mentioned if it exists then it would be good to know as much as possible to prevent it.

▪ **Youth Boys:**

All youth boys in all zones presented similar reasons for why people should know about HIV/AIDS. They mentioned that since it is a killer disease which is spreading fast and the whole world is complaining about it therefore, it is good to know about it in detail for prevention; to ensure its existence in the community; and to take better care of.

▪ **Male:**

The entire men groups in all zones stated that to make people alert about the disease, to know more about the disease, and prevention, and to identify the disease, people should know about HIV/AIDS. Some of the urban men said that people are hearing so many things about the disease and they are shocked and without proper information it will be difficult to avoid the disease. Therefore, it is important to know about it properly.

### **5.5.5. Preferred channels to know about HIV/AIDS:**

▪ **Elderly Women:**

Radio is the channel commonly preferred by all elderly women in all of three zones and population groupings. In addition the urban elderly women of the NE preferred newspaper and health center to know about HIV/AIDS; the rural elderly women added mosque and the nomadic women added community meeting in their preferred channels to know about HIV/AIDS. Religious leader, community leader, Quranic School and men of the society are some other channels preferred by the rural and the nomadic elderly women of the CSZ indicating their access.

In the NW, the urban elderly women preferred mosque, radio, mobile team of doctors, and religious leader; the rural elderly women preferred mosque, community meeting, teashop, and MCH; and the nomadic elderly women preferred radio and mobile team of doctors to receive information on HIV/AIDS.

▪ **Adult Women:**

Radio, mosque and religious leader, and health center are the commonly preferred channels to receive information on HIV/AIDS by women groups in all population groupings of all zones. However, the nomadic women added community meeting also in their preference. In the CSZ most of the urban and the rural women suggested radio and TV as the best channels to inform people about HIV/AIDS. Some of the rural women added women's tea party also. Where as in nomadic area after radio mobile microphone, awareness raising campaign, and the mosque are the preferred channels.

▪ **Youth Girls:**

In the NE, the urban girls preferred radio, school/ Quranic School, community meeting to receive information of HIV/AIDS. The rural girls preferred only radio where as the nomadic girls preferred radio and women's meeting. In the CSZ radio is commonly mentioned channel to receive information on HIV/AIDS by the young girls. The urban girls added TV and mobile microphone; the rural girls added health center; and the nomadic girls added mosque and community leader. In the NW, the urban girls preferred radio, TV, mobile microphone and

newspaper; the rural girls preferred mosque, teashop, school and meeting place; and the nomadic girls preferred mobile medical team and radio.

▪ **Youth Boys:**

The urban boys preferred radio, mosque, school and newspaper to receive information on HIV/AIDS. The rural boys favored radio, and the nomadic boys preferred radio, community meeting, and religious congregation to receive information on HIV/AIDS in the NE. Some of the urban boys suggested including the information into the health syllabus also. In the CSZ radio is once again the common preference of young boys in all population settings. The urban boys added mobile microphone, seminar and debate; the rural and the nomadic boys added community chief and health worker as the preferred channels to receive information on HIV/AIDS. The urban boys of the NW preferred radio, TV, school, and newspaper; the rural boys preferred mosque, MCH, and religious leader; and the nomadic men preferred radio to receive information on HIV/AIDS.

▪ **Male:**

The urban and the rural men preferred radio, mosque, and health center; and the nomadic men chose radio and community awareness to receive information on HIV/AIDS in the NE. The urban men of the CSZ preferred radio, TV, newspaper and doctors; the rural men preferred radio, mobile microphone, mosque, and water source point; and the nomadic men preferred mobile microphone, radio, and religious leader. In the NW most of the men groups preferred radio, newspaper, mosque, and community meeting to receive information on HIV/AIDS.

**The response indicates that in choosing the preferred channels there is not much disparity among the zones. Radio and mosque are the commonly preferred channels in all three zones. Interpersonal channels are equally popular in the rural and the nomadic areas of all zones.**

#### **5.5.6. Types of information needed:**

▪ **Elderly Women:**

All of the elderly women in all zones indicated that they need to know about how to prevent HIV/AIDS; how to identify infection; what causes it; and how does it transmit. Some of the nomadic elderly women demanded an overall information telling people what kind of disease is it?

**Discussion with elderly women reveals that most of them have heard about HIV/AIDS, yet there are various misperceptions and there is a lack of accurate and educating information.**

▪ **Adult Women:**

All women groups in all zones opined similarly as the elderly women that they want to know basics and important information on HIV/AIDS related with its origin, causes, prevention, and symptoms.

▪ **Youth Girls:**

Most of the young girls in all zones informed that people needs all kind of information about HIV/AIDS ranging from causes, symptoms, prevention, transmission, common place of the disease, how to treat infected person, and awareness raising on HIV/AIDS. Some of the rural

and the nomadic girls in the NE *questioned why to know about it since they have not seen any patient or the disease*. Few others mentioned that there is no need of knowing about it if fornication is not practiced. **The discussion indicates that there is curiosity about the disease and young girls are also interested to learn about the disease, as the information they have at present is not sufficient to aware people. It also indicates that people have feeling that if fornication is not practiced HIV/AIDS will not affect.**

▪ **Youth Boys:**

All of the young boys in all zones stated that they want to know the way HIV/AIDS is contracted and transmitted; where it comes from; how it spreads; how it kills people; how it develops; and how to manage infected person. Young boys in the CSZ added that since the disease has posed a serious threat to human kind and is spreading so fast, therefore, it should be known properly for prevention. **The discussion reveals that like other target groups, young boys in all population settings are also in need of detail and appropriate information on HIV/AIDS.**

▪ **Male:**

Men in the urban, rural, and nomadic areas of all zones mentioned that there is a need of all kind of information about HIV/AIDS. There should be awareness raising information, telling people about its causes, symptoms, prevention and reasons why it happens.

□ **Main findings:**

- The discussion reveals that all age groups of people are more or less hearing about the disease and curious and willing to know more about it.
- Despite high number of people in all target groups who have heard about HIV/AIDS, people are in need of detail, educating and awareness raising information on HIV/AIDS covering its reasons, causes, symptoms, prevention, management of infected person etc. None of the study groups reported having knowledge on prevention, symptoms, and management of the infected person. The KAP survey on HIV/AIDS also supports this finding that despite the high proportion of people who know about HIV/AIDS, knowledge of modes of HIV/AIDS transmission and methods of prevention remain surprisingly very low. (*See Report of STD/HIV Knowledge, Attitude, Believes and Practices Survey in Somaliland, 1999*).
- Both modern and traditional channels are disseminating information on HIV/AIDS, yet there are misperceptions mitigating the chances of behavior change.
- In the urban areas target groups are more in touch with authoritative sources of information than in the rural and the nomadic areas. In the rural and the nomadic areas interpersonal channels are more used than one way information disseminating channels. Since the rural and the nomadic people have less access to printed educational information, consequently people have to rely on person to person information sharing providing chances of distortion of information. Therefore, traditional interpersonal channels need to be more informative and authoritative.
- There are certain kinds of misperceptions in all population settings and among all target groups, which need to be addressed. Almost all target groups in all zones reported that HIV/AIDS is a disease of non-Muslims and have doubts that it exists in Somalia. This

response emphasize the need of wide dissemination of study reports conducted on HIV/AIDS revealing that it does exist in Somalia also along with messages on modes of transmission and prevention.

- Messages in forms of Slogans are not enough people are in need of elaborated and educating information in order to understand adequately the problem of HIV/AIDS.
- Men are more informed compared to female target groups and are playing an important role of information sources.

□ **Recommendations:**

- Existing local media of mass communication should be strengthened with appropriate package of information on HIV/AIDS so that more people can be reached.
- Use of traditional interpersonal channels should be strengthened with more authoritative and educational information on HIV/AIDS in the rural and the nomadic areas.
- All age groups of the study are in need of awareness information on HIV/AIDS therefore, package of information should be developed suitably to educate all age groups in all population settings.
- Information on HIV/AIDS should be designed to mitigate the unfavorable misperceptions in order to bring behavior change and to prevent spreading of HIV/AIDS.
- Religious institutions should be strengthened and equipped with detail educational information on HIV/AIDS.
- Men should be additionally targeted on awareness raising messages, as they are the sources of information to many rural and nomadic women.

**5.6. FGM: Chart: 6**

<b>NE-Urban</b>					
Questions discussed	Response of the target groups				
	Eld. women	Adult women	Youth(G)	Youth(B)	Male
Knowledge about impact of FGM	▪ Pharaonic is not good	▪ Circumcision has lot of health problems	▪ Pharaonic has lot of health problem	▪ No info. given	▪ Pharaonic has health problem
What type of info. Was received	▪ Received awareness	▪ No info. given	▪ Religion allows Sunni circumcision ▪ Pharaonic is dangerous for women	▪ To get rid of pharaonic circumcision	▪ Many people know that traditional circumcision has health problem ▪ Sunni is easiest
Sources used for info.	▪ Radio ▪ Awareness raising program	▪ Radio ▪ Newspapers ▪ Religious scholar	▪ Radio ▪ Newspapers ▪ Health book	▪ Health team ▪ Religion ▪ Radio	▪ Radio ▪ Religious scholar ▪ Health center
Changes brought from the use of info.	▪ It has affected 30% of the community	▪ Pharaonic is decreasing ▪ About 25% practice Sunni now	▪ 20% of people practice Sunni ▪ major change for young girls because of Sunni	▪ Many people have knowledge about problem related with pharaonic ▪ 20% of the population have stopped practicing pharaonic	▪ About 40% of people are practicing Sunni now ▪ Many people stopped practicing pharaonic

Opinion on total eradication	<ul style="list-style-type: none"> <li>If men are interested</li> <li>Sunni should be practiced</li> <li>It is decreasing</li> </ul>	<ul style="list-style-type: none"> <li>It cannot be stopped totally</li> <li>Religion does not allow it</li> <li>Uncircumcised person cannot pray or touch the Qur'an</li> </ul>	<ul style="list-style-type: none"> <li>It does exist</li> <li>Important to stop pharaonic</li> <li>Sunni cannot be stopped because religion allows it</li> </ul>	<ul style="list-style-type: none"> <li>FGM is decreasing but it is difficult to stop</li> <li>It can be stopped</li> </ul>	<ul style="list-style-type: none"> <li>Somalis do not like to eradicate whole of it</li> <li>Sunni circumcision is a most</li> </ul>
Preferred/trusted channel to receive info. on FGM	<ul style="list-style-type: none"> <li>Religious leader</li> <li>Parents</li> <li>Circumcisors</li> </ul>	<ul style="list-style-type: none"> <li>Doctors</li> <li>Experienced person</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Religious leader</li> <li>Mothers</li> <li>School</li> </ul>	<ul style="list-style-type: none"> <li>Mosque</li> <li>Health center</li> <li>Radio</li> <li>Newspapers</li> </ul>	<ul style="list-style-type: none"> <li>Doctor</li> <li>Religious scholar</li> <li>Mother</li> <li>Radio</li> </ul>
<b>NE-Rural</b>					
Knowledge about impact of FGM	<ul style="list-style-type: none"> <li>Old circumcision has lot of problems</li> </ul>	<ul style="list-style-type: none"> <li>Women have problem during delivery</li> </ul>	<ul style="list-style-type: none"> <li>Did not like to discuss</li> </ul>	<ul style="list-style-type: none"> <li>Pharaonic causes difficulties</li> <li>Leave this matter with mothers</li> </ul>	<ul style="list-style-type: none"> <li>Uncircumcised person is unclean</li> <li>This is not a male business, so don't know much</li> </ul>
What type of info. was received	<ul style="list-style-type: none"> <li>Information related to old circumcision</li> <li>Effect of the circumcision</li> </ul>	<ul style="list-style-type: none"> <li>Religious saying on circumcision</li> <li>It has lot of health problems</li> </ul>	<ul style="list-style-type: none"> <li>Pharaonic is not good</li> </ul>	<ul style="list-style-type: none"> <li>Awareness about the problems caused by pharaonic circumcision</li> </ul>	<ul style="list-style-type: none"> <li>Concerning the problem of circumcision</li> <li>Side effects of circumcision</li> </ul>
Sources used for info.	<ul style="list-style-type: none"> <li>Islamic scholars</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Religious scholars</li> <li>Health center</li> <li>Radio</li> <li>Parents</li> </ul>	<ul style="list-style-type: none"> <li>Doctor</li> <li>Religion talks about it</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>MCH</li> <li>Midwives</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>
Changes brought from the use of info.	<ul style="list-style-type: none"> <li>New circumcision is good</li> <li>It has no health problem</li> <li>Sunni is easier so it is in practice now</li> </ul>	<ul style="list-style-type: none"> <li>Yes people are aware of it now</li> <li>There is major change that many practice Sunni now</li> </ul>	<ul style="list-style-type: none"> <li>People are talking about to stop pharaonic</li> </ul>	<ul style="list-style-type: none"> <li>There is no major change</li> <li>Only the educated people practice Sunni</li> <li>Main change is many people now practice Sunni</li> </ul>	<ul style="list-style-type: none"> <li>Ask them who knows about it</li> <li>Effects of circumcision is decreasing</li> <li>People are aware if its impact</li> </ul>
Opinion on total eradication	<ul style="list-style-type: none"> <li>Don't have idea of stopping circumcision</li> <li>Grown up girls being uncircumcised is a biggest shame</li> <li>We do Sunni</li> </ul>	<ul style="list-style-type: none"> <li>It should be stopped</li> <li>Pharaonic should be stopped</li> </ul>	<ul style="list-style-type: none"> <li>It is good to stop pharaonic</li> </ul>	<ul style="list-style-type: none"> <li>Better to stop pharaonic</li> <li>Matter should be left with mothers</li> </ul>	<ul style="list-style-type: none"> <li>Sunni should continue</li> <li>It is deep affair of women, cannot say anything</li> <li>That should continue which is allowed by religion</li> </ul>
Preferred/trusted channel to receive info. on FGM	<ul style="list-style-type: none"> <li>Islamic scholars</li> <li>Elder mothers</li> <li>MCH</li> </ul>	<ul style="list-style-type: none"> <li>Religious scholar</li> <li>MCH</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Parents</li> <li>Religious scholar</li> <li>Health center</li> </ul>	<ul style="list-style-type: none"> <li>Midwives</li> <li>Radio</li> <li>MCH</li> <li>Islamic scholar</li> </ul>	<ul style="list-style-type: none"> <li>Religious scholar</li> <li>mosque</li> <li>Radio</li> <li>Doctor</li> </ul>
<b>NE-Nomadic</b>					
Knowledge about impact of FGM	<ul style="list-style-type: none"> <li>For elderly women pharaonic is still the best circumcision</li> </ul>	<ul style="list-style-type: none"> <li>Heard that there are Sunni and pharaonic circumcision</li> </ul>	<ul style="list-style-type: none"> <li>Difficulty during delivery</li> </ul>	<ul style="list-style-type: none"> <li>It can cause infectious disease</li> </ul>	<ul style="list-style-type: none"> <li>Pharaonic cause problems in reproductive health</li> <li>Sunni is good for health</li> </ul>
What type of info. was received	<ul style="list-style-type: none"> <li>Young generation like Sunni</li> <li>Sunni is good</li> </ul>	<ul style="list-style-type: none"> <li>Pharaonic was previously practices</li> <li>Heard about Sunni from radio</li> <li>Religious leader are</li> </ul>	<ul style="list-style-type: none"> <li>There are Sunni and pharaonic circumcisions</li> <li>Sunni is now more practiced</li> <li>Islamic religion has mentioned Sunni</li> </ul>	<ul style="list-style-type: none"> <li>Uncircumcised person cannot slaughter the livestock</li> <li>It purifies the girls</li> <li>Uncircumcised person is abused</li> </ul>	<ul style="list-style-type: none"> <li>Two types of circumcision Sunni and pharaonic</li> <li>Pharaonic is an old tradition</li> </ul>

		<ul style="list-style-type: none"> <li>▪ talking about pharaonic and Sunni</li> </ul>		<ul style="list-style-type: none"> <li>▪ in the public</li> <li>▪ There are two types of circumcision</li> </ul>	
Sources used for info.	<ul style="list-style-type: none"> <li>▪ Women's meeting</li> <li>▪ Radio</li> </ul>	<ul style="list-style-type: none"> <li>▪ Midwives</li> <li>▪ Radio</li> <li>▪ Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>▪ From the people</li> <li>▪ Parents</li> <li>▪ Islamic religion</li> </ul>	<ul style="list-style-type: none"> <li>▪ Parents</li> <li>▪ Mosque</li> <li>▪ Radio</li> </ul>	<ul style="list-style-type: none"> <li>▪ Religion mentions about Sunni</li> <li>▪ Radio</li> </ul>
Changes brought from the use of info.	<ul style="list-style-type: none"> <li>▪ Pharaonic is decreasing</li> <li>▪ Many people now perform Sunni</li> </ul>	<ul style="list-style-type: none"> <li>▪ The dynamic change is that now people practice Sunni because pharaonic is difficult</li> </ul>	<ul style="list-style-type: none"> <li>▪ More people are practicing Sunni and major change is in the health side</li> </ul>	<ul style="list-style-type: none"> <li>▪ Traditional circumcision is reducing</li> <li>▪ Big change is Sunni is becoming common</li> </ul>	<ul style="list-style-type: none"> <li>▪ Pharaonic is less practiced</li> <li>▪ Sunni is increasing</li> </ul>
Opinion on total eradication	<ul style="list-style-type: none"> <li>▪ It cannot be stopped</li> <li>▪ All Muslims have to practice circumcision</li> </ul>	<ul style="list-style-type: none"> <li>▪ Pharaonic is still practiced and circumcision cannot be stopped.</li> <li>▪ It is good for girl's security</li> <li>▪ Men don't believe girls if they are not circumcised</li> </ul>	<ul style="list-style-type: none"> <li>▪ It is never going to end</li> <li>▪ It is wrong to stop and don't agree to stop the practice</li> </ul>	<ul style="list-style-type: none"> <li>▪ It cannot be stopped because it religious belief</li> </ul>	<ul style="list-style-type: none"> <li>▪ Disagree to stop</li> <li>▪ It cannot be stopped because religion does not allow uncircumcised person</li> <li>▪ Sunni is religiously allowed</li> </ul>
Preferred/trusted channel to receive info. on FGM	<ul style="list-style-type: none"> <li>▪ Midwives</li> <li>▪ Islamic scholar</li> <li>▪ Old mother</li> </ul>	<ul style="list-style-type: none"> <li>▪ Islamic scholar</li> <li>▪ Doctor</li> <li>▪ Midwives</li> </ul>	<ul style="list-style-type: none"> <li>▪ Mothers</li> <li>▪ Midwives</li> <li>▪ Islamic scholar</li> </ul>	<ul style="list-style-type: none"> <li>▪ Doctors</li> <li>▪ Parents</li> <li>▪ Religious scholar</li> <li>▪ Radio</li> </ul>	<ul style="list-style-type: none"> <li>▪ Doctor</li> <li>▪ Religious scholar</li> <li>▪ Mothers</li> </ul>
<b>CS-Urban</b>					
Knowledge about impact of FGM	<ul style="list-style-type: none"> <li>▪ Traditional FGM has lot of health problem</li> <li>▪ Sunni is good</li> </ul>	<ul style="list-style-type: none"> <li>▪ Not good to trim the girl's body</li> <li>▪ Pharaonic has caused many health problems</li> <li>▪ Traditionally circumcised girl will never forget the pain</li> </ul>	<ul style="list-style-type: none"> <li>▪ Not only heard about the problem of FGM but also experienced it</li> <li>▪ Pharaonic is very bad for health</li> </ul>	<ul style="list-style-type: none"> <li>▪ Girls have lot of problems during menstruation</li> <li>▪ Whole process of traditional circumcision is not good.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Women have lot of problem during menstruation and marital relation</li> </ul>
What type of info. Was received	<ul style="list-style-type: none"> <li>▪ About the health problem of traditional FGM</li> <li>▪ There is two types of FGM</li> <li>▪ Many stories about the FGM</li> </ul>	<ul style="list-style-type: none"> <li>▪ Lot of stories about the impact of FGM</li> <li>▪ There is two types of FGM</li> <li>▪ Sunni is the order of the Prophet</li> </ul>	<ul style="list-style-type: none"> <li>▪ Pharaonic is passed from Egyptians</li> <li>▪ Debate of two types of circumcision</li> </ul>	<ul style="list-style-type: none"> <li>▪ Stories about the process of circumcision</li> <li>▪ Confusion of traditional and Sunni circumcision</li> </ul>	<ul style="list-style-type: none"> <li>▪ To abandon pharaonic</li> <li>▪ Sunni is Islamic</li> <li>▪ Confusion of whether to stop or continue</li> </ul>
Sources used for info.	<ul style="list-style-type: none"> <li>▪ Seminar and women org.</li> <li>▪ Religion and religious leader</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ TBA</li> <li>▪ Parents</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Awareness campaign</li> <li>▪ Doctors</li> </ul>	<ul style="list-style-type: none"> <li>▪ Doctors</li> <li>▪ Peer groups</li> </ul>	<ul style="list-style-type: none"> <li>▪ Doctors</li> <li>▪ Religious leader</li> <li>▪ Radio</li> </ul>
Changes brought from the use of info.	<ul style="list-style-type: none"> <li>▪ There is no specific change</li> <li>▪ Shift to Sunni</li> </ul>	<ul style="list-style-type: none"> <li>▪ Many has shifted to Sunni</li> </ul>	<ul style="list-style-type: none"> <li>▪ Old practice of trimming the body of girls is over now</li> <li>▪ Shift to Sunni</li> </ul>	<ul style="list-style-type: none"> <li>▪ Shift to Sunni is the main change</li> <li>▪ Many people go to hospital or health center for it</li> </ul>	<ul style="list-style-type: none"> <li>▪ Shift to Sunni</li> <li>▪ Young generation likes Sunni</li> </ul>
Opinion on total eradication	<ul style="list-style-type: none"> <li>▪ No (most)</li> <li>▪ Yes (few)</li> </ul>	<ul style="list-style-type: none"> <li>▪ No (most)</li> <li>▪ Yes (some)</li> </ul>	<ul style="list-style-type: none"> <li>▪ It cannot be stopped as Somalia is 100% Muslim country</li> <li>▪ Traditional is declining but Sunni will continue</li> </ul>	<ul style="list-style-type: none"> <li>▪ It cannot be totally eradicated</li> <li>▪ Traditional should be stopped but Sunni should be continued</li> <li>▪ Un circumcised girls will bring disgrace to</li> </ul>	<ul style="list-style-type: none"> <li>▪ It cannot be eradicated</li> <li>▪ Traditional need to be stopped</li> </ul>

				family	
Preferred/trusted channel to receive info. on FGM	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> <li>Health center</li> <li>Midwives</li> <li>MCH</li> </ul>	<ul style="list-style-type: none"> <li>Doctors</li> <li>Radio</li> <li>Religious leader</li> <li>TBA</li> </ul>	<ul style="list-style-type: none"> <li>Doctors</li> <li>TBA</li> <li>Health worker</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>TV</li> <li>Health organizations</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> </ul>
<b>CS-Rural</b>					
Knowledge about impact of FGM	<ul style="list-style-type: none"> <li>Traditional FGM has lot of health problem</li> </ul>	<ul style="list-style-type: none"> <li>FGM is not good for health</li> </ul>	<ul style="list-style-type: none"> <li>Faced many problem during menstruation</li> </ul>	<ul style="list-style-type: none"> <li>It cause lot of problems to women</li> <li>Dangerous for women during delivery</li> </ul>	<ul style="list-style-type: none"> <li>Lot of health problems for women</li> </ul>
What type of info. was received	<ul style="list-style-type: none"> <li>To stop the traditional FGM</li> <li>Problems of FGM</li> <li>Sunni is better</li> <li>Religion has commanded for Sunni</li> </ul>	<ul style="list-style-type: none"> <li>Old and new types of FGM</li> <li>New (Sunni) is good for health</li> <li>To stop the FGM</li> <li>Use Sunni and neglect the traditional</li> </ul>	<ul style="list-style-type: none"> <li>Types of FGM</li> <li>Pharaonic is not good for health</li> <li>Sunni should continue</li> </ul>	<ul style="list-style-type: none"> <li>To stop pharaonic circumcision</li> <li>Pharaonic is not good for women's health</li> <li>FGM done in hospital is Sunni</li> </ul>	<ul style="list-style-type: none"> <li>Traditional is bad</li> <li>Sunni has no health problem</li> </ul>
Sources used for info.	<ul style="list-style-type: none"> <li>Mosque</li> <li>Midwives</li> <li>Mothers and grand mothers</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious Sheikh</li> <li>Health organization</li> <li>Parents</li> </ul>	<ul style="list-style-type: none"> <li>Mothers</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Parents</li> <li>Religion</li> <li>Radio</li> <li>midwives</li> </ul>	<ul style="list-style-type: none"> <li>TBAs</li> <li>Religious leader</li> <li>Radio</li> </ul>
Changes brought from the use of info.	<ul style="list-style-type: none"> <li>No change</li> <li>Many people are still practicing traditional FGM</li> <li>Some are doing Sunni</li> </ul>	<ul style="list-style-type: none"> <li>Shift to Sunni</li> <li>No change</li> </ul>	<ul style="list-style-type: none"> <li>Some are now practicing Sunni</li> <li>No specific change</li> </ul>	<ul style="list-style-type: none"> <li>Many people are doing Sunni</li> <li>No change (many)</li> </ul>	<ul style="list-style-type: none"> <li>Change in the form of traditional practice</li> </ul>
Opinion on total eradication	<ul style="list-style-type: none"> <li>It should not be stopped totally</li> <li>Sunni should continue</li> </ul>	<ul style="list-style-type: none"> <li>It cannot be stopped because it will be disobeying the Allah</li> <li>Uncircumcised girl will bring disgrace to family</li> <li>It should be stopped</li> </ul>	<ul style="list-style-type: none"> <li>Yes (few)</li> <li>No (many) because it will be like being apart from the Allah</li> <li>The difficult one should be stopped but Sunni should continue</li> </ul>	<ul style="list-style-type: none"> <li>Should not be eradicated</li> <li>Pharaonic should be stopped</li> <li>Circumcision is religious practice</li> </ul>	<ul style="list-style-type: none"> <li>Pharaonic should be stopped but not the Sunni</li> </ul>
Preferred/trusted channel to receive info. on FGM	<ul style="list-style-type: none"> <li>Mid wives</li> <li>Experienced person</li> <li>Religious leader</li> <li>Health centers</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> <li>Mosque</li> <li>Women's tea party</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Parents</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Religious leader</li> <li>TBAs</li> <li>Radio</li> <li>Parents</li> </ul>
<b>CS-Nomadic</b>					
Knowledge about impact of FGM	<ul style="list-style-type: none"> <li>Traditional FGM has problems</li> </ul>	<ul style="list-style-type: none"> <li>Heard about the problem of FGM but do not know much</li> </ul>	<ul style="list-style-type: none"> <li>No info.</li> </ul>	<ul style="list-style-type: none"> <li>Traditional FGM has health problems</li> </ul>	<ul style="list-style-type: none"> <li>Never heard any problem</li> </ul>
What type of info. was received	<ul style="list-style-type: none"> <li>About the problems of FGM</li> <li>Good to circumcise</li> </ul>	<ul style="list-style-type: none"> <li>Pharaonic is bad</li> <li>Sunni is Islamic</li> <li>Conflict of pharaonic and Sunni</li> <li>Only bleeding or complete removal</li> </ul>	<ul style="list-style-type: none"> <li>FGM is religious practice</li> <li>Have not received any other information</li> </ul>	<ul style="list-style-type: none"> <li>Pharaonic is bad for health</li> <li>There is Sunni type of circumcision</li> </ul>	<ul style="list-style-type: none"> <li>Difference of pharaonic and Sunni</li> </ul>
Sources used for info.	<ul style="list-style-type: none"> <li>Parents</li> <li>Fellow folks</li> </ul>	<ul style="list-style-type: none"> <li>Qura'n</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Mothers</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religion</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Elderly people in the community</li> </ul>
Changes brought from the use of info.	<ul style="list-style-type: none"> <li>No change</li> <li>People are not prepared for change</li> </ul>	<ul style="list-style-type: none"> <li>No change</li> <li>Still traditional system</li> </ul>	<ul style="list-style-type: none"> <li>No change</li> </ul>	<ul style="list-style-type: none"> <li>People are doing Sunni now</li> </ul>	<ul style="list-style-type: none"> <li>No change</li> <li>Some are doing Sunni (few)</li> </ul>

Opinion on total eradication	<ul style="list-style-type: none"> <li>Inherited from fore fathers and will continue as it is</li> <li>Not good to eradicate</li> </ul>	<ul style="list-style-type: none"> <li>It cannot be stopped because if you are not circumcised you are not a Muslim</li> <li>Sunni should continue</li> <li>Price of circumcised and uncircumcised girl is not same</li> </ul>	No (all) because there will be no privacy	Should not be stopped Sunni needs to be continued Muslims are not allowed to	<ul style="list-style-type: none"> <li>It cannot be eradicated</li> <li>It should continue</li> </ul>
Preferred/trusted channel to receive info. on FGM	<ul style="list-style-type: none"> <li>Religious leader</li> <li>Mosque</li> <li>Health worker</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Community leader</li> <li>Mosque</li> <li>Radio</li> <li>Elderly women</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Parents</li> <li>Religious leader</li> </ul>
<b>NW-Urban</b>					
Knowledge about impact of FGM	<ul style="list-style-type: none"> <li>Menstruation problem</li> <li>Infection</li> <li>Tumor and tetanus</li> <li>Experienced many problems</li> </ul>	<ul style="list-style-type: none"> <li>Pharaonic has health problem</li> <li>It is wrong to circumcise girls</li> </ul>	<ul style="list-style-type: none"> <li>It causes problem to girls</li> <li>Diseases are contacted but people do not understand</li> </ul>	<ul style="list-style-type: none"> <li>No discussion</li> </ul>	<ul style="list-style-type: none"> <li>Girls are getting lot of problem</li> <li>Girls have problem during marriage, menstruation and delivery</li> </ul>
What type of info. Was received	<ul style="list-style-type: none"> <li>About health problems</li> <li>Two types of FGM</li> </ul>	<ul style="list-style-type: none"> <li>To stop FGM</li> <li>Stitched circumcision cause problems</li> <li>Circumcision is painful</li> </ul>	<ul style="list-style-type: none"> <li>Inherent health problems of FGM</li> <li>Discussion of new and old circumcision</li> </ul>	<ul style="list-style-type: none"> <li>Traditional circumcision has health problems</li> <li>It is not religious and should be stopped</li> </ul>	<ul style="list-style-type: none"> <li>About health problem</li> <li>To stop FGM</li> <li>Debate of traditional and new type of FGM</li> <li>FGM is un religious</li> </ul>
Sources used for info.	<ul style="list-style-type: none"> <li>Radio</li> <li>Seminar</li> <li>Self experience</li> </ul>	<ul style="list-style-type: none"> <li>Mosque</li> <li>Friends</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Town</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> <li>Community</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> </ul>
Changes brought from the use of info.	<ul style="list-style-type: none"> <li>Main change is now Sunni is increasing</li> <li>People have known the problems</li> </ul>	<ul style="list-style-type: none"> <li>People have started Sunni</li> <li>People have realized pharaonic has problems</li> </ul>	<ul style="list-style-type: none"> <li>Shift to Sunni</li> <li>Traditional is decreasing</li> </ul>	<ul style="list-style-type: none"> <li>Main change is shift to Sunni</li> <li>People have not stopped circumcision</li> </ul>	<ul style="list-style-type: none"> <li>Awareness on health problem</li> <li>Shift to Sunni</li> <li>Sunni is religious</li> </ul>
Opinion on total eradication	<ul style="list-style-type: none"> <li>It cannot be stopped totally</li> <li>Sunni is good and should be practiced</li> </ul>	<ul style="list-style-type: none"> <li>It is not possible to eradicate</li> <li>Sunni should be practiced</li> </ul>	<ul style="list-style-type: none"> <li>It is good to be eradicated</li> <li>Sunni has saved many young girls</li> </ul>	<ul style="list-style-type: none"> <li>It should be followed as the religion has prescribed</li> <li>Pharaonic should be stopped</li> </ul>	<ul style="list-style-type: none"> <li>Un religious should be stopped</li> <li>It should be stopped</li> <li>It will continue</li> </ul>
Preferred/trusted channel to receive info. on FGM	<ul style="list-style-type: none"> <li>Radio</li> <li>Doctor religious leader</li> <li>Workshop</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>TV</li> <li>Newspaper</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>Doctor</li> <li>Teashop</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> <li>Health professional</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Doctor health post</li> </ul>
<b>NW-Rural</b>					
Knowledge about impact of FGM	<ul style="list-style-type: none"> <li>Traditional FGM has many health problem</li> </ul>	<ul style="list-style-type: none"> <li>Have experienced the problems</li> </ul>	<ul style="list-style-type: none"> <li>Traditional FGM has health problems</li> </ul>	<ul style="list-style-type: none"> <li>Girls have problem in marriage and delivering the child</li> </ul>	<ul style="list-style-type: none"> <li>Girls have lot of problem</li> </ul>
What type of info. Was received	<ul style="list-style-type: none"> <li>Difference of traditional and Sunni</li> </ul>	<ul style="list-style-type: none"> <li>Controversies of old and new circumcision</li> <li>Religiously FGM is wrong</li> <li>It should be stopped</li> </ul>	<ul style="list-style-type: none"> <li>About problems</li> <li>To stop it</li> </ul>	<ul style="list-style-type: none"> <li>It can damage girls body</li> <li>Debate of cultural and religious</li> <li>To stop FGM</li> </ul>	<ul style="list-style-type: none"> <li>FGM is un religious but cultural</li> <li>To stop it</li> </ul>
Sources used for info.	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> <li>Doctor</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>Religious leader</li> </ul>

Changes brought from the use of info.	<ul style="list-style-type: none"> <li>• Awareness on problems</li> <li>• Shift to Sunni</li> </ul>	<ul style="list-style-type: none"> <li>▪ There is no big change, people still practice same</li> <li>▪ Some are doing Sunni</li> </ul>	<ul style="list-style-type: none"> <li>▪ Traditional is decreasing</li> </ul>	<ul style="list-style-type: none"> <li>▪ Religious leaders are preaching against pharaonic</li> <li>▪ Shift to Sunni</li> </ul>	<ul style="list-style-type: none"> <li>▪ No major change</li> </ul>
Opinion on total eradication	<ul style="list-style-type: none"> <li>▪ Sunni should be continued</li> </ul>	<ul style="list-style-type: none"> <li>▪ Religiously it is wrong to stop</li> <li>▪ It is differentiation from girl and woman</li> </ul>	<ul style="list-style-type: none"> <li>▪ If religion allows it should be continued</li> <li>▪ It should be eradicated</li> </ul>	<ul style="list-style-type: none"> <li>▪ It should be stopped</li> <li>▪ It is long practiced tradition difficult to stop</li> </ul>	<ul style="list-style-type: none"> <li>▪ Whatever is accepted by religion should continue</li> <li>▪ It has pain and problem, it should be stopped</li> </ul>
Preferred/trusted channel to receive info. on FGM	<ul style="list-style-type: none"> <li>▪ Religion</li> <li>▪ Radio</li> <li>▪ Mosque</li> <li>▪ Teashop</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Religious leader</li> <li>▪ Health post</li> <li>▪ Teashop</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Mosque</li> <li>▪ Teashop</li> <li>▪ MCH</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Religious leader</li> <li>▪ Teashop</li> <li>▪ Mosque</li> </ul>	<ul style="list-style-type: none"> <li>▪ Mosque</li> <li>▪ Radio</li> <li>▪ Teashop</li> </ul>
<b>NW-Nomadic</b>					
Knowledge about impact of FGM	<ul style="list-style-type: none"> <li>▪ No info.</li> </ul>	No discussion on problems	<ul style="list-style-type: none"> <li>▪ No discussion</li> </ul>	<ul style="list-style-type: none"> <li>▪ Do not know about the impact</li> </ul>	<ul style="list-style-type: none"> <li>▪ No discussion</li> </ul>
What type of info. was received	<ul style="list-style-type: none"> <li>▪ About stopping FGM</li> </ul>	<ul style="list-style-type: none"> <li>▪ Stitched circumcision is bad for health and un religious</li> </ul>	<ul style="list-style-type: none"> <li>▪ to stop traditional circumcision it is traditional/religious practice</li> <li>▪ About health problem</li> </ul>	<ul style="list-style-type: none"> <li>▪ To stop FGM</li> </ul>	<ul style="list-style-type: none"> <li>▪ To stop FGM</li> <li>▪ Traditional FGM is against religion</li> </ul>
Sources used for info.	<ul style="list-style-type: none"> <li>▪ Parents</li> <li>▪ Cultural practice, everyone knows</li> <li>▪ Friends</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Parents</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Community</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ UNICEF</li> <li>▪ Islamic law</li> </ul>
Changes brought from the use of info.	<ul style="list-style-type: none"> <li>▪ Do not want to change</li> <li>▪ Information is damaging the culture</li> </ul>	<ul style="list-style-type: none"> <li>▪ People agreed to practice Sunni</li> <li>▪ Pharaonic is decreasing</li> </ul>	<ul style="list-style-type: none"> <li>▪ No change</li> <li>▪ People still practice the same old one</li> </ul>	<ul style="list-style-type: none"> <li>▪ No change</li> <li>▪ People still practice the traditional FGM</li> </ul>	<ul style="list-style-type: none"> <li>▪ Decrease in traditional type</li> <li>▪ People are practicing Sunni which is religiously accepted</li> </ul>
Opinion on total eradication	<ul style="list-style-type: none"> <li>▪ Do not agree</li> <li>▪ Culture and tradition said to do it</li> </ul>	<ul style="list-style-type: none"> <li>▪ Complete eradication is not possible</li> <li>▪ Sunni is essential</li> </ul>	<ul style="list-style-type: none"> <li>▪ It cannot be stopped</li> <li>▪ It will be unrealistic idea propagated by foreigner</li> <li>▪ If FGM is to be stopped Sunni should be continued</li> </ul>	<ul style="list-style-type: none"> <li>▪ Total eradication is not possible</li> <li>▪ Sunni should be practiced</li> <li>▪ Traditional should be stopped</li> </ul>	<ul style="list-style-type: none"> <li>▪ It should not be eradicated all</li> <li>▪ Sunni should continue</li> </ul>
Preferred/trusted channel to receive info. on FGM	<ul style="list-style-type: none"> <li>▪ Mosque</li> <li>▪ Religious leader</li> <li>▪ Men's awareness should be raised</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>▪ Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>▪ Mosque</li> <li>▪ Religious leader</li> <li>▪ Radio</li> </ul>

The above charts have indicated that most of the target groups are aware of the health impact caused by the traditional pharaonic circumcision. Men and women of all age groups have received awareness raising information on traditional circumcision which implicitly helped them to conclude that traditional circumcision has lot of health problems but Sunni type is easy and allowed by the religion also. All of the target groups opined that the great change brought by the awareness is shift from pharaonic to Sunni circumcision, however, total eradication is unacceptable. Although many adult women and young girls are in favor of total eradication but there is a fear of rejection and disobeying the religion. On the other hand, parents are also concerned to the price of the girls. The mosque and the religious leaders are the commonly preferred channels to receive information on circumcision.

### 5.6.1. Knowledge about impact of FGM:

- **Elderly women:**

Elderly women generally in all population settings of all zones, when asked about their knowledge on impact of female genital mutilation (FGM) mentioned that pharaonic is not good for health. It causes menstruation problem, infection, tetanus and tumor. Some of the elderly women said they themselves have experienced such problems. Only some of the nomadic elderly women in the NE said that in old women's view traditional circumcision is still the best but young generation likes Sunni type of circumcision.

- **Adult Women:**

Almost all of the adult women groups informed that they know that circumcision has lot of health problems and women have problems during delivery because of circumcision. It is not good to trim the parts of the girl's body. A traditionally circumcised girl will never forget the pain she has gone through.

- **Youth Girls:**

In all three zones most of the young girls mentioned as their mothers that they know that traditional circumcision has lot of health problem including difficulty in delivery and diseases are contracted but people do not understand those problems. The young girls of the CSZ mentioned that they have not only heard about the impacts of FGM but also have experienced them, like the problems during the menstruation. Pharaonic practice has lot of health problems. Some of the rural girls in the NE did not like to discuss about their knowledge. However, from other questions covered in the discussion reflected that the rural girls also are facing same kind of problems and are aware of health impacts of traditional circumcision.

- **Youth Boys:**

The young boys in all of the three population settings of the NE have almost same level of knowledge about FGM. They mentioned that it causes lot of problem. Some of them mentioned that it could cause infectious disease. However, some of the rural boys asked to leave the matter with mothers. **It indicates that there is a feeling that FGM is related with women and girls only.** In the CSZ and the NW most of the young boys mentioned the problems of FGM like difficulties during menstruation, during delivery, and also in marital relationship. Some of the urban boys in the CSZ even explained about the process of traditional circumcision and expressed their concern about the pain girls have to undergo. Some of them mentioned that they do not know about the impact of FGM.

- **Male:**

Alike other target groups most of the urban male group also mentioned having similar knowledge about FGM like pharaonic has health problems in all zones. However, according to the rural men in the NE it is not a male business so they do not have much to say. While the nomadic men mentioned about the differences of the Sunni and traditional circumcision and about the problems of the reproductive health.

### 5.6.2. Types of information received:

- **Elderly women:**

All of the elderly women the NE stated that they have received awareness about the impact of traditional circumcision. Some of them mentioned that they received information about Sunni that, it is good. In the CSZ and the NW most of the elderly women reported having information about the health hazards of traditional circumcision and confusion of Pharaonic that it is not religious but Sunni is religious.

▪ **Adult Women:**

Most of the women in the NE mentioned receiving information about the religious saying on circumcision, and having many health problems. Some of the nomadic women said that they heard about Sunni type of circumcision from radio and also the religious leaders are talking about pharaonic and Sunni circumcision. In the CSZ and the NW also, groups of adult women reported having similar types of information. They also mentioned that they have heard about two types of circumcision, traditional and new. New is Sunni type, which does not have any health problem and people should go for it, Sunni is religious also, and the messages to stop the traditional type of circumcision.

▪ **Youth Girls:**

Most of the girls in all zones stated that the information they have are, religion allows Sunni circumcision and pharaonic is dangerous for women, pharaonic is passed by Egyptians, and to stop FGM. The nomadic girls alike their urban and rural age mates said that there are Sunni and pharaonic type of circumcision; Sunni is more practiced now; Islamic religion has mentioned Sunni.

**These responses indicate that confusion of pharaonic and Sunni circumcision does exist among the young girls also as they are receiving information from mixed sources. Further, it also signifies that along with awareness raising information on FGM, arguments that “Sunni circumcision is religiously allowed” is also disseminated, which is diminishing the campaign on total eradication of FGM.**

▪ **Youth Boys:**

In the NE, the urban boys reported that they have received information to get rid of circumcision. The rural boys mentioned that they were informed about the problems caused by pharaonic circumcision; and the nomadic boys mentioned that the information they have are uncircumcised person cannot slaughter the livestock, it purifies the girls, uncircumcised person is abused in the public and there are two types of circumcisions. **The response suggests that nomadic boys in the NE have not been reached with the appropriate information on total eradication of FGM.** The young boys in the CSZ mentioned many stories of trouble and problem faced by the girls. They also mentioned the existing debate of traditional and Sunni type of circumcision. Some of the rural boys of the CSZ reported that they heard that circumcision performed in the hospitals is Sunni type. Young boys the NW also mentioned similar types of information on FGM along with the message to stop this practice.

▪ **Male:**

Most of the men groups in all zones denoted that the information they have had received are about the health problems, side effects of traditional circumcision, Sunni is easy type of circumcision and has no health problem, and to stop FGM. The nomadic men in the NE said that the information they heard is there are two types of circumcision pharaonic and Sunni. Pharaonic is an old tradition and Sunni is from the religion. Sunni is good even for reproductive health. In the CSZ many nomadic men mentioned they have not heard about any problem of FGM. **The response corresponds with other nomadic group’s response and re enforces**

**that, nomads of all age groups are yet to be reached by appropriate message/information on total eradication.**

### **5.6.3. Sources used for information:**

- **Elderly women:**

Radio is the commonly mentioned source from where elderly women in all population settings of all zones received information. In the NE, some of the urban elderly women mentioned awareness raising program as a source of information on FGM. The rural elderly women included the religious leader in the list and the nomadic elderly women added women's meeting in the sources of information. Whereas in the CSZ most of the elderly women in all population settings mentioned religion and religious leader; parents and elderly people in the community; and seminars (for some) as their sources of information. In the NW, the urban elderly women mentioned radio, seminar, and self-experience as their sources of information; the rural elderly women mentioned radio and religious leader; and the nomadic elderly women mentioned parents, age old practice and friends as their sources of information about FGM.

**The discussion reveals that there is a wide range of channels from radio to women's meeting used to receive information on FGM. Due to the debate of religious or customary practice religion and religious leaders have specific space as sources of information.**

- **Adult Women:**

In the NE, radio and religious scholars are the commonly affirmed sources from where most of the adult women received information on FGM. The urban, rural, and nomadic women added newspaper, health center, parents and fellow nomads as sources of information respectively. In the CSZ, women groups included TBAs, parents, and the Qura'n also as their sources of information. In the NW, the urban women mentioned mosque and friends; the rural women mentioned radio, religious leader, and doctor; and the nomadic women mentioned radio and religious leader as their sources of information. They also reported that radio is giving the information about the health problems of traditional FGM and religious leaders are telling about religious saying that traditional FGM is not religious.

- **Youth Girls:**

In the NE, young girls in the urban area mentioned radio, newspaper, and book as their sources of information. The rural girls said doctor and religion are their sources of information and the nomadic girls mentioned that people in the community, parents, and religion are their sources of information. In the CSZ, the urban girls mentioned awareness campaign, radio, and doctors; the rural and nomadic girls mentioned religious leader and mother as their sources of information. According to girls of the NW, radio, religious leader, and parents are their sources of information on FGM.

- **Youth Boys:**

In the NE, the urban boys denoted that they received information from the health team, radio, and religion. The rural boys have mentioned they received information from radio, MCH, and midwives. Parents, mosque, and radio were the sources of information the nomadic boys. In the CSZ, the urban boys stated doctors, peers, and radio as their sources of information; the rural boys mentioned parents, religion, radio, and midwives; whereas the nomadic boys stated radio, religion and religious leader as their sources of information. Some of the urban boys explained that their friends talk about the stories of sufferings of their wives and girlfriends. In the NW, radio, religious leader, and community are the sources of information for young boys.

- **Male:**

Radio and religious teachings are the commonly mentioned sources of information by all men groups in all of the population groupings of the NE. The urban men included health center in the list. Radio, religious leader, doctors, TBAs and parents are some of the sources used for information by the men groups in the CSZ. In the NW, radio, religious leader, mosque, and community are the sources of information on FGM for most of the men groups.

**The response reveals that target groups are receiving information on circumcision and differences of different types of circumcision from various channels. And the information of various channels are not coordinating to each other, which has created a confusion and conflict of two types of circumcision rather than encouraging for total eradication.**

#### **5.6.4. Changes brought from the use of information received:**

- **Elderly women:**

In most of the urban and rural settings of all zones, elderly women expressed that the awareness information has helped to bring change in the practice of circumcision. They said that now people have learnt that traditional circumcision has lot of health problems many people in the urban and the rural areas are now practicing Sunni type of circumcision. The rural elderly women mentioned that now the people are aware that Sunni is easier and has no health problem so practice of Sunni is increasing. The nomadic elderly women also attested the same opinion as the change brought by the information on FGM. However, some of the elderly women stated that now the young generation has turned to Sunni but for elderly women traditional form is still good and the information is destroying their culture.

#### **Adult Women:**

All of the women groups also mentioned the shift from pharaonic to Sunni circumcision as a major change brought by the information basically in the urban areas, however still a many people are practicing the old circumcision.

- **Youth Girls:**

When the young girls in the NE were asked about the changes brought by the information they are receiving, all of the young girls reported that now many people have knowledge about problems related with pharaonic circumcision. People are talking about to stop pharaonic circumcision and about 20 percent of people in the urban areas have stopped practicing pharaonic circumcision that is the major change for young girls. In the CSZ and the NW also most of the girls mentioned the same that because of the awareness about the health problems people are now practicing Sunni more. While some of the rural and nomadic girls of the NW said that the change is negligible because still most of the people are practicing the traditional style.

#### **Youth Boys:**

The urban boys in the NE informed that because of the information many people now have knowledge about the problems related with pharaonic circumcision, and 20 percent of people have stopped practicing pharaonic circumcision. The rural boys mentioned only some educated people have started to practice Sunni however, there is no major change. Alike their urban and rural age mate, the nomadic boys also mentioned that the big change is that the Sunni is becoming common now. Most of the young boys in the CSZ and the NW also indicated the same change brought by the information. They also mentioned that now doctors are denying

performing the traditional circumcision, religious leaders are preaching against the traditional circumcision, and there is lot of talk about the health problem so people have become aware of that.

- **Male:**

All of the men groups in all zones reported that traditional circumcision is decreasing. According to the urban men of the NE about 40 percent of the urban population are now practicing Sunni type of circumcision that is the biggest change brought because of the information.

### 5.6.5. Opinion on total eradication of FGM:

- **Elderly women:**

The entire group of the elderly women in all zones when asked about their opinion on total eradication of FGM, reported that they are not in the agreement to eradicate it completely. Most of them opined that the harmful pharaonic practice should be stopped but Sunni should continue. They reasoned that every Muslim has to perform circumcision and grown up girls being uncircumcised is a biggest shame. In the CSZ, some even mentioned that *they would do the same to their daughters, which they have been through*. Many expressed that it would be good to stop but they are not allowed for it since it is a religious practice and to eradicate it completely would be like being apart from the Allah. Many of the urban elderly women in the CSZ were more concerned with the existing insecurity of people and conflict among the clans where an uncircumcised girl is always at risk and threat of being abused.

**The response indicates that elderly women are yet not prepared to think about total eradication of FGM. They still believe that FGM is one of the religious rituals and should be practiced by all Muslims. They accepted the increasing shift from traditional circumcision to Sunni circumcision because of the awareness raised on the health impacts of FGM. However, some are much more concerned to keep the practice because of the existing conflicting and unsecured situation.**

- **Adult Women:**

When asked about their opinion on total eradication of FGM adult women in the NE expressed mixed opinion. Some of the urban women opined that the *practice is decreasing and all forms of circumcision should be stopped*. Some others agreed that the traditional form of circumcision is decreasing and that should be stopped but not the Sunni type of circumcision. Few others denied the eradication reasoning that *religion does not allow it and no body could pray or touch the Holy Qura'n if the person is not circumcised*. Most of the rural women suggested that traditional circumcision should be stopped while others opined it should be stopped completely. Deferring to the urban and the rural women, the nomadic women expressed their surprise that traditional practice of circumcision is decreasing. They opined that it is never going to stop, moreover it is wrong to stop totally, because it is good for girl's security; and *men never trust the girls if they are not gone through the traditional circumcision*.

In the CSZ also adult women have had mixed opinion that traditional practice should be stopped but Sunni should continue. However, in the urban areas women were more aggressive and assertive for total eradication. Some of them argued that why should they protect their girls from men by trimming their bodies while ultimately they are for men only, and ***Sunni practice is not even a strong prophetic instruction***.

In the NW also majority of women groups opined accordingly that total eradication is not possible because it is differentiation from girl and woman.

Although majority of women did not agree for the total eradication of FGM but compared to the elderly women, considerable numbers of adult women in all population settings are positive.

**The discussion emphasizes that there is mixed opinion among the urban and the rural women on total eradication of FGM, however, the nomadic women are completely against the opinion. Enormous information flow on impacts of FGM has not yet motivated women in all population settings for total eradication of circumcision. Women are yet not aware that it is a non-religious practice.** Some even mentioned about the bride price of the circumcised and uncircumcised girls, and the existing security situation of the country, which indicates that **the practice is not only the confusion of religious or cultural practice but also an economic and security issue.**

▪ **Youth Girls:**

Regarding the opinion on total eradication of FGM the young girls in the urban and the rural areas of the NE expressed that it is important to stop but Sunni can not be stopped because religion allows it. Some others said that pharaonic should be stopped. Contrary to their urban and rural age mates the nomadic girls opined that it is never going to stop, it is wrong to stop and do not agree to stop the practice. Islamic religion has paved the path for circumcision and it is the heritage of the Prophet Mohamed. It is true that more people are practicing Sunni now but total eradication is not allowed. Likewise in the CSZ and the NW many urban girls opined that it would be good to eradicate the practice. However, most of them expressed that traditional should be eradicated but not the Sunni because Somalia is a Muslim country. **The opinion reveals that all the girls are in consensus that pharaonic should be stopped but total eradication is not possible because religion allows it. Very few of them viewed that it should be stopped totally. The discussion with the young girls reflected a feeling of happiness among the girls that now the painful practice is decreasing even if not reached to a consensus for total eradication.**

▪ **Youth Boys:**

The boys groups in all zones when asked about their opinion on total eradication most of them opined that pharaonic should be stopped. Some of the urban boys opined that FGM is decreasing but it is difficult to stop completely. **Despite their awareness about the trouble the girls are facing and the difficult and painful process of circumcision surprisingly very few boys opined that the practice should be completely eradicated. Rather some of them suggested that it should be performed in the hospitals but not by the traditional circumcisors.** Some of the rural boys in the NE viewed to leave the issue with mothers; they are the one who decides for circumcision. Unlike the urban and rural boys, the nomadic boys opined that it couldn't be stopped because it is a religious belief.

**Discussion reveals that most of the boys opined that circumcision can not be stopped completely and only traditional type of circumcision should be stopped. Yet many of them indicated that they have less say in the issue.**

▪ **Male:**

Almost all of the men groups in the NE and the CSZ viewed that total eradication of circumcision is not possible. According to them Somalis would not like it and Sunni should continue because it is allowed by the religion. Some of the rural men in the NE mentioned that it is a close affair of women so can not say whether it should be eradicated or not. Some others said that should continue which is allowed the religion. In the NW many men groups opined positively saying that it has pain and problems yet others supported the continuation of Sunni form.

### 5.6.6. Preferred channel to receive information on FGM:

- **Elderly women:**

Mosque and religious leader are the commonly preferred channels to receive information by all of the elderly women in all population groupings of all zones. Beside that in the NE the urban elderly women included parents and circumcisors; the rural elderly women included elder mother and MCH; and the nomadic elderly women included midwives and elderly mothers. Whereas in the CSZ radio is also included in their list of preferred channels. In the NW, radio, mosque, religious leader and doctor are the preferred channels of all elderly women to receive information on FGM. Some of them suggested for increasing the men's awareness on the issue.

- **Adult Women:**

Alike elderly women, adult women also commonly preferred the religious scholar in all population settings of all zones. The urban women added radio, TV, doctor, and experienced person in the list of preferred channels; the rural women added radio, teashop, and MCH; and the nomadic women of NE and the CSZ added doctor and midwives to receive information on FGM.

- **Youth Girls:**

In the NE, the mother and the religious scholars are the commonly preferred channels to receive information on FGM by all young girls in all of the population groupings. The urban girls of the NE included school in the list of their preferred channels whereas the urban girls of the CSZ added doctors and TBAs; the rural girls included health center and radio; and the nomadic girls in the NE included midwives in their list. In the NW, the urban girls preferred radio, mosque, teashop, and doctor; the rural girls preferred radio, mosque, teashop, and MCH; and the nomadic girls preferred radio and religious leader to receive information on FGM.

**The response indicates that there is disparity in the used sources of information and preferred channels for the young girls to receive information. It can be deduced from the disparity in existing and chosen channels that the information disseminated is not enough to convince young girls for total eradication and there is a need of shifting the focus from information sources. For instance the urban girls mentioned that they received information from radio, newspaper, doctors and books while they chose mother also as their preferred channel to receive information, which signifies that whatever information they are receiving from other sources they will obviously rely more on their mother's information on circumcision.**

- **Youth Boys:**

In the NE, all of the boys groups commonly preferred the mosque, radio, and religious leader to receive information on FGM. The urban boys added health center, and newspaper; the rural boys added midwives, and MCH; and the nomadic boys added parents and doctors in their preferred channels. The urban boys of the CSZ preferred radio, TV, and doctors; the rural boys preferred radio, religious leader and the Mosque; and the nomadic boys preferred radio and religious leader. In the NW, the urban boys preferred radio, religious leader, and health professional; the rural boys preferred radio, religious leader, mosque, and teashop; and the nomadic boys preferred religious leader to receive information on FGM.

**Compared to disparities in information sources and channels preferred by young girls the response reveals the parity in information sources and preferred channels of young boys**

**in the NE. In the CSZ, the urban boys suggested to open an orientation center to aware people about the problems of traditional FGM.**

▪ **Male:**

All of the men groups in the NE commonly preferred doctor, religious scholar, and radio to receive information on FGM. The rural and the nomadic men included mothers also in the preferred channels. In the CSZ, the urban men preferred radio and religious leader; the rural men preferred radio, TBAs, parents, and religious leader; the nomadic men preferred radio and religious leader. In the NW, the urban men preferred radio, doctor, and health post; the rural men preferred mosque, radio, and teashop; and the nomadic men preferred mosque, religious leader, and radio to receive information on FGM.

□ **Main Findings:**

- The discussion reveals that, men groups whether adult or young rarely discuss the problems faced in their marital lives because of FGM. Although many of them viewed traditional circumcision should be stopped. A considerable number of young men reported the peer group as one of their sources of information. Considerable number of young and adult men expressed circumcision as a female business only.
- The discussion signifies that focus of the disseminated awareness information was basically on health impacts on girls and women as they are the victims of the age old practice, however, the affect on family life and other implications of the practice have been over shadowed.
- If encouraged to break the silence men would certainly come up with their marital experiences due to FGM. To set an example, one of the religious leaders interviewed as key informant stated that FGM should be eradicated because it is not a religious demand and to marry a traditionally circumcised girl is like opening a concrete wall. Saying that it is his own experience he emphasized the total eradication.
- People are receiving information from the religious institutions that Sunni circumcision is good because it does not have health problem and is allowed by religion. Contradiction in the messages disseminated is supporting the perpetuation of the practice.
- Awareness information whatever is disseminated has brought a major change shifting the practice from traditional to Sunni circumcision but has not convinced people for total eradication.
- Despite the realization of the health complications and pain total eradication is not supported by all of the target groups.
- Although some of the adult and the young girls opined for total eradication, but in lack of decision making power they are not in the position to deny the practice.
- Youth girls in all population groupings rely more on their mothers for receiving information on FGM than any other channel indicating the decisive roles of mothers and grand mothers on FGM, and having a direct link as the information channel.

- Religious belief is not only the reason for the perpetuation of the practice, other social, economic, and security reasons also have strong impact.
  - Psychological belief of the mother that their daughters have to go through the same what they have been.
  - Men and women of all age groups are in consensus that total eradication is not possible, only few adult women and youths have agreed on total eradication. Further, the health professionals are also not in the consensus for total eradication and are denying to performing only the traditional circumcision but not the Sunni.
  - Religious leaders, mosque, and radio are the commonly preferred channels to receive information on FGM, in all population settings.
  - Messages on FGM eradication has to be enhanced in the nomadic area, as most of the nomadic groups have expressed negative views on eradication.
- **Recommendations:**
- Information on total eradication of FGM needs to be emphasized while discussing about the problems and impacts of FGM.
  - Mobilization of religious institutions should be enhanced with strengthened capacity on religious and cultural arguments of circumcision.
  - Coordinated package of information and messages should be developed in order to mitigate the confusing and contradicting stories on types of circumcision.
  - Men of all age groups should be encouraged to break the silence and share their experiences of their marital relationship. Further men of all age groups should be targeted with the appropriate information using their preferred channels.
  - Flow of awareness raising information should be increased in the rural and the nomadic areas.
  - Mothers and grandmother are in the position of gatekeepers and are in need of detail information on FGM including its religious, economic and social aspects.
  - The strategies for the total eradication should take an integrated approach targeting all three generations (elder, adult, and young) with appropriate, separate but coordinated package of information. Further, sporadic intervention is not enough it should be on regular basis and in participatory mode.

## 5.7. Education: Chart: 7

<b>NE-Urban</b>					
Question discussed	Response of the target groups				
	Eld. women	Adult women	Youth(G)	Youth(B)	Male
Knowledge about importance on education	<ul style="list-style-type: none"> <li>▪ It is an important issue, the world exist with education</li> </ul>	<ul style="list-style-type: none"> <li>▪ It is an essential matter</li> <li>▪ Nobody can live without education</li> <li>▪ It is the light of the world</li> </ul>	<ul style="list-style-type: none"> <li>▪ Education is the light of life</li> <li>▪ It has first priority</li> </ul>	<ul style="list-style-type: none"> <li>▪ Education is life</li> <li>▪ Without education there is no life</li> </ul>	<ul style="list-style-type: none"> <li>▪ Education is the pillar of life</li> </ul>

If any info. is received on primary and adult edu.	<ul style="list-style-type: none"> <li>Education of children is important</li> <li>To encourage both adult and child education</li> </ul>	<ul style="list-style-type: none"> <li>Education is development</li> <li>First priority to live</li> </ul>	<ul style="list-style-type: none"> <li>About importance and benefits of education</li> </ul>	<ul style="list-style-type: none"> <li>Education is important to fight with ignorance</li> <li>Education is development</li> </ul>	<ul style="list-style-type: none"> <li>To mobilize education campaign</li> <li>To understand the necessity of education</li> </ul>
Source of info.	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Campaigns</li> <li>Community meeting</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Teacher</li> <li>Newspapers</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Newspaper</li> </ul>
Opinion on girl's edu.	<ul style="list-style-type: none"> <li>It is an important issue</li> <li>Girls have more quality than boys</li> </ul>	<ul style="list-style-type: none"> <li>It is important</li> <li>Girls are the bases of the community</li> </ul>	<ul style="list-style-type: none"> <li>It is important because girls are the mothers of tomorrow</li> <li>If the mother's do not have knowledge the community will collapse</li> </ul>	<ul style="list-style-type: none"> <li>It is important to give equal education opportunity</li> <li>She is the mother of future, she must be given special attention</li> </ul>	<ul style="list-style-type: none"> <li>It is nice to give education opportunity to girls</li> </ul>
Preferred channel to receive info on edu.	<ul style="list-style-type: none"> <li>Radio</li> <li>Newspaper</li> </ul>	<ul style="list-style-type: none"> <li>Mosque</li> <li>Radio</li> <li>Better to use all available channels</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Newspapers</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Newspaper</li> <li>Mosque</li> </ul>
Types of info. needed on primary & adult edu.	<ul style="list-style-type: none"> <li>How to mobilize education</li> <li>To encourage education of girls and adult</li> </ul>	<ul style="list-style-type: none"> <li>To establish adult education</li> <li>All education related matters</li> </ul>	<ul style="list-style-type: none"> <li>Information related how to improve knowledge</li> <li>To mobilize women for education</li> </ul>	<ul style="list-style-type: none"> <li>To mobilize community</li> </ul>	<ul style="list-style-type: none"> <li>New technology on education</li> <li>To improve language (international)</li> </ul>

### NE-Rural

Knowledge about importance on education	<ul style="list-style-type: none"> <li>Everybody knows that education is good and necessary</li> </ul>	<ul style="list-style-type: none"> <li>It has great importance</li> <li>One who does not learn religion or other education is like someone who lives in dark house</li> </ul>	<ul style="list-style-type: none"> <li>Education is important but our educational background is too low</li> </ul>	<ul style="list-style-type: none"> <li>It has great importance</li> </ul>	<ul style="list-style-type: none"> <li>Importance of education is too many</li> <li>Illiterates are in darkness and literates are in light</li> </ul>
If any info. is received on primary and adult edu.	<ul style="list-style-type: none"> <li>Encouraged to learn/have education</li> </ul>	<ul style="list-style-type: none"> <li>Encouragement to study</li> <li>Ideas of increasing knowledge</li> </ul>	<ul style="list-style-type: none"> <li>Have not got any info. on education</li> </ul>	<ul style="list-style-type: none"> <li>Encouragement for education and knowledge</li> <li>Give priority for education</li> </ul>	<ul style="list-style-type: none"> <li>To get education</li> <li>To enhance education</li> <li>To fight against ignorance</li> </ul>
Source of info.	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Awareness program</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Parents</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>Teacher</li> </ul>
Opinion on girl's edu.	<ul style="list-style-type: none"> <li>Girls should get education like boys</li> </ul>	<ul style="list-style-type: none"> <li>Girls should have equal opportunity as boys</li> </ul>	<ul style="list-style-type: none"> <li>Girls should participate in education</li> </ul>	<ul style="list-style-type: none"> <li>Girls education is good and important</li> </ul>	<ul style="list-style-type: none"> <li>They are part of the society, it is important to educate them</li> </ul>
Preferred channel to receive info on edu.	<ul style="list-style-type: none"> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious scholars</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Community leader</li> <li>parents</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Teacher</li> <li>Religious scholar</li> </ul>
Types of info. needed on primary & adult edu.	<ul style="list-style-type: none"> <li>No info. given</li> </ul>	<ul style="list-style-type: none"> <li>Religious leaders encourage and convince people to study</li> <li>Advertisement in radio on importance of education</li> </ul>	<ul style="list-style-type: none"> <li>Info. to encourage girl's education</li> </ul>	<ul style="list-style-type: none"> <li>To mobilize awareness on importance of education</li> </ul>	<ul style="list-style-type: none"> <li>To improve quality of education</li> <li>Awareness to fight with ignorance</li> </ul>

### NE-Nomadic

Knowledge about importance on	<ul style="list-style-type: none"> <li>Education is essential for</li> </ul>	<ul style="list-style-type: none"> <li>Education is necessary but</li> </ul>	<ul style="list-style-type: none"> <li>It is important because</li> </ul>	<ul style="list-style-type: none"> <li>Ignorance is like blindness</li> </ul>	<ul style="list-style-type: none"> <li>It is pillar of human existence</li> </ul>
-------------------------------	--	--	---	---	---

education	<ul style="list-style-type: none"> <li>human being</li> <li>It helps someone to develop from others</li> </ul>	nomadic have less opportunity	development comes from education	<ul style="list-style-type: none"> <li>Education has many important things for people</li> </ul>	<ul style="list-style-type: none"> <li>He who has no education has nothing in the world and hereafter</li> </ul>
If any info. is received on primary and adult edu.	<ul style="list-style-type: none"> <li>Have not got any info. regarding education</li> </ul>	<ul style="list-style-type: none"> <li>Never been to any school so do not have info.</li> </ul>	<ul style="list-style-type: none"> <li>Never get chance to go to school</li> <li>Importance of education</li> </ul>	<ul style="list-style-type: none"> <li>About importance of education</li> </ul>	<ul style="list-style-type: none"> <li>Without education is without light</li> <li>Campaign on rural education</li> </ul>
Source of info.	<ul style="list-style-type: none"> <li>Holy Qura'n</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>No info. given</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Fellow people</li> </ul>	<ul style="list-style-type: none"> <li>Quranic school teacher</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Quranic school</li> <li>Parents</li> </ul>
Opinion on girl's edu.	<ul style="list-style-type: none"> <li>Girl's education is good</li> <li>It is better to give them equal chance</li> </ul>	<ul style="list-style-type: none"> <li>It is good but for nomadic it is hard</li> </ul>	<ul style="list-style-type: none"> <li>Girls should get same opportunity as boys</li> <li>Girls have to get education to benefit her worldly and hereafter opportunities</li> </ul>	<ul style="list-style-type: none"> <li>Girls education is equally important</li> <li>They must have equal opportunity</li> </ul>	<ul style="list-style-type: none"> <li>Girls are mothers of tomorrow therefore their education id must</li> <li>Muslims give them equal chance in education</li> </ul>
Preferred channel to receive info on edu	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Islamic scholars</li> <li>Quranic school</li> </ul>	<ul style="list-style-type: none"> <li>Quranic teacher</li> <li>Community meeting</li> </ul>	<ul style="list-style-type: none"> <li>Quranic school</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Community meeting</li> <li>Mosque</li> </ul>
Types of info. needed on primary & adult edu.	<ul style="list-style-type: none"> <li>To help adult women to learn the Qura'n</li> </ul>	<ul style="list-style-type: none"> <li>To help people read and write</li> <li>To increase everything important to help education for nomads</li> </ul>	<ul style="list-style-type: none"> <li>Education is available in town, how to improve education in the village</li> </ul>	<ul style="list-style-type: none"> <li>Nomads mostly do not go to school</li> <li>Encouragement to go to school and to have a school</li> </ul>	<ul style="list-style-type: none"> <li>To enhance Islamic education</li> <li>Increase access to education centers</li> </ul>

### CS-Urban

Question discussed	Response of the target groups				
	Eld. women	Adult women	Youth(G)	Youth(B)	Male
Knowledge about importance on education	<ul style="list-style-type: none"> <li>Education is important</li> <li>Without education is darkness</li> </ul>	<ul style="list-style-type: none"> <li>Education is essential for human being</li> </ul>	<ul style="list-style-type: none"> <li>Education has lot of advantage</li> <li>It opens opportunities</li> </ul>	<ul style="list-style-type: none"> <li>It is useful for all mankind</li> <li>Education is the leadership of the nation</li> <li>It helps to pace up with need of development</li> </ul>	<ul style="list-style-type: none"> <li>Education is important and to guide for good</li> </ul>
If any info. is received on primary and adult edu.	<ul style="list-style-type: none"> <li>Received during the literacy campaign of late government</li> <li>Teach your children or learn</li> </ul>	<ul style="list-style-type: none"> <li>Recently there is no specific information</li> <li>Previously there were some documentary</li> <li>Encouragement to learn</li> </ul>	<ul style="list-style-type: none"> <li>Education is key of life</li> <li>Orientation calling education as the light of society</li> </ul>	<ul style="list-style-type: none"> <li>How society can be developed by education</li> <li>How to develop the personality</li> </ul>	<ul style="list-style-type: none"> <li>About importance of education</li> <li>Without education is like being in darkness</li> </ul>
Source of info.	<ul style="list-style-type: none"> <li>Elders</li> <li>Radio</li> <li>Campaign</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Magazine</li> <li>Community leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Awareness campaign</li> <li>TV</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>School</li> <li>Religious lectures</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Teacher</li> <li>Mobile microphone</li> </ul>
Opinion on girl's edu.	<ul style="list-style-type: none"> <li>It is important to educate girls</li> <li>They should be taught good manner and household work</li> </ul>	<ul style="list-style-type: none"> <li>Girls should be given equal opportunity for education</li> <li>Some parents are not convinced</li> </ul>	<ul style="list-style-type: none"> <li>It is a must</li> <li>Girls are better than boys</li> <li>They should be educated equally</li> <li>Educated mother can teach her children</li> </ul>	<ul style="list-style-type: none"> <li>It is very important</li> <li>Educated mother starts right at home to educate the society</li> <li>Education teaches good behavior</li> </ul>	<ul style="list-style-type: none"> <li>It is good to educate girls</li> <li>To deprive girls from education is a bad culture</li> </ul>
Preferred channel to receive info on edu.	<ul style="list-style-type: none"> <li>Radio</li> <li>Public address</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>TV</li> <li>Community leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>TV</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Teacher</li> <li>Concert</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Newspaper</li> <li>Quranic school</li> </ul>
Types of info. needed on primary	About adult literacy and	<ul style="list-style-type: none"> <li>Encouraging children to</li> </ul>	<ul style="list-style-type: none"> <li>Awareness for girls education</li> </ul>	<ul style="list-style-type: none"> <li>Calling youth to put down the gun</li> </ul>	<ul style="list-style-type: none"> <li>Encouragement for girls</li> </ul>

& adult edu.	religious teachings	<ul style="list-style-type: none"> <li>attend school</li> <li>Girls should not kept at home for marriage</li> </ul>	<ul style="list-style-type: none"> <li>Importance of education</li> <li>Opening of new school and teaching method</li> </ul>	<ul style="list-style-type: none"> <li>and pick the pen</li> <li>Importance of education</li> </ul>	<ul style="list-style-type: none"> <li>education</li> <li>Motivating information for youth to attend school</li> </ul>
<b>CS-Rural</b>					
Knowledge about importance on education	<ul style="list-style-type: none"> <li>never been to any type of school but education is important</li> </ul>	<ul style="list-style-type: none"> <li>Illiterate person is nothing in the community</li> </ul>	<ul style="list-style-type: none"> <li>Education helps to do everything</li> </ul>	<ul style="list-style-type: none"> <li>Education is the key of life</li> <li>Educated person id more developed then uneducated</li> </ul>	<ul style="list-style-type: none"> <li>Education id good for life</li> </ul>
If any info. is received on primary and adult edu.	<ul style="list-style-type: none"> <li>About the importance of education</li> </ul>	<ul style="list-style-type: none"> <li>Education is essential for life</li> <li>It helps to manage your self</li> </ul>	<ul style="list-style-type: none"> <li>About importance of education</li> <li>Without education life is nothing</li> <li>Education increasing intelligence</li> </ul>	<ul style="list-style-type: none"> <li>About importance of education</li> </ul>	<ul style="list-style-type: none"> <li>Have not received any information (many)</li> <li>About importance of education</li> </ul>
Source of info.	<ul style="list-style-type: none"> <li>Elders</li> <li>Radio</li> <li>The Qura'n</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Elders</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Quranic school</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Parents</li> <li>Quranic school</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> </ul>
Opinion on girl's edu.	<ul style="list-style-type: none"> <li>They should be educated</li> <li>More on domestic work</li> </ul>	<ul style="list-style-type: none"> <li>Girls should be educated</li> <li>They need it.</li> <li>Girls have equal rights as boys to have education</li> </ul>	<ul style="list-style-type: none"> <li>It is good to have equal opportunity</li> <li>Girls are deprived of their rights</li> </ul>	<ul style="list-style-type: none"> <li>It is their right</li> <li>Girls should be educated</li> </ul>	<ul style="list-style-type: none"> <li>It is important</li> <li>Girls must be educated as boys</li> </ul>
Preferred channel to receive info on edu.	<ul style="list-style-type: none"> <li>Mosque</li> <li>Community leader</li> <li>Quranic school</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Women's meeting</li> <li>Local elders</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Qualified teachers</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> <li>Community leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> <li>Community leader</li> </ul>
Types of info. needed on primary & adult edu.	<ul style="list-style-type: none"> <li>Learning of language like Arabic and English</li> </ul>	<ul style="list-style-type: none"> <li>General information about primary education</li> <li>Encouragement to go to school</li> </ul>	<ul style="list-style-type: none"> <li>Convincing information on importance of education</li> <li>Learning of different languages</li> </ul>	<ul style="list-style-type: none"> <li>Mobilization and encouragement to attend school</li> </ul>	<ul style="list-style-type: none"> <li>Do not know</li> <li>Awareness on education</li> </ul>
<b>CS-Nomadic</b>					
Knowledge about importance on education	<ul style="list-style-type: none"> <li>Education is good for everybody</li> </ul>	<ul style="list-style-type: none"> <li>Education is very important for everybody</li> <li>It makes the life easy</li> </ul>	<ul style="list-style-type: none"> <li>It is important part of life</li> <li>Education helps to build community</li> </ul>	<ul style="list-style-type: none"> <li>Education is key of life</li> </ul>	<ul style="list-style-type: none"> <li>Education is something very essential</li> <li>Who learn will prosper</li> </ul>
If any info. is received on primary and adult edu.	<ul style="list-style-type: none"> <li>No (many)</li> <li>Encouragement to learn</li> <li>Educated and uneducated persons do not have equal respect</li> </ul>	<ul style="list-style-type: none"> <li>About the importance of education</li> <li>Educated person will benefit oneself and the community</li> </ul>	<ul style="list-style-type: none"> <li>Importance of education</li> <li>Qura', teaches to learn</li> <li>Learn for tomorrow</li> </ul>	<ul style="list-style-type: none"> <li>About Quranic teachings on education</li> <li>Education brings better life and development</li> </ul>	<ul style="list-style-type: none"> <li>Importance of education</li> <li>Either teach or learn</li> </ul>
Source of info.	<ul style="list-style-type: none"> <li>Religious leader</li> <li>Radio</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Educated person</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Community leader</li> <li>Men</li> </ul>	<ul style="list-style-type: none"> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> <li>Government</li> </ul>
Opinion on girl's edu.	<ul style="list-style-type: none"> <li>Good to send the girls to school</li> <li>Nomads do not have school</li> </ul>	<ul style="list-style-type: none"> <li>It is good</li> <li>Will be expensive</li> </ul>	<ul style="list-style-type: none"> <li>It is good to educate girls</li> <li>Both boys and girls should be educated</li> <li>It is expensive</li> </ul>	<ul style="list-style-type: none"> <li>It is good to educate girls</li> </ul>	<ul style="list-style-type: none"> <li>Girls should be educated</li> </ul>
Preferred channel to receive info on edu	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Community elders</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Community leader</li> </ul>	<ul style="list-style-type: none"> <li>Local authority</li> <li>Radio</li> <li>Teacher</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Community leaders</li> <li>Religious leader</li> </ul>
Types of info.	<ul style="list-style-type: none"> <li>Encouragement</li> </ul>	<ul style="list-style-type: none"> <li>Importance and</li> </ul>	<ul style="list-style-type: none"> <li>Good</li> </ul>	<ul style="list-style-type: none"> <li>Importance of</li> </ul>	<ul style="list-style-type: none"> <li>Way to educate</li> </ul>

needed on primary & adult edu.	<ul style="list-style-type: none"> <li>How to support education</li> </ul>	benefits of education	<ul style="list-style-type: none"> <li>information about education</li> <li>How to learn language</li> </ul>	<ul style="list-style-type: none"> <li>education</li> <li>When formal school will start in the area</li> <li>Way to educate nomads</li> </ul>	nomads
<b>NW-Urban</b>					
Knowledge about importance on education	<ul style="list-style-type: none"> <li>Educated and uneducated are not same</li> <li>Children should be educated</li> </ul>	<ul style="list-style-type: none"> <li>Education is a valuable thing</li> <li>Illiterates gain very limited</li> </ul>	<ul style="list-style-type: none"> <li>It is the most important thing in life</li> <li>Everything good in life is result of education</li> </ul>	<ul style="list-style-type: none"> <li>Education is essential and everyone has right to education</li> </ul>	<ul style="list-style-type: none"> <li>It is very important and everyone has right to education</li> </ul>
If any info. is received on primary and adult edu.	<ul style="list-style-type: none"> <li>About adult education</li> <li>During literacy campaign of the past regime</li> </ul>	<ul style="list-style-type: none"> <li>About upgrading primary education</li> <li>Benefits of education</li> </ul>	About advantage of education	<ul style="list-style-type: none"> <li>Importance of education</li> <li>Parent's committee for school</li> </ul>	<ul style="list-style-type: none"> <li>Religion allows to learn</li> <li>Encouragement to learn</li> </ul>
Source of info.	<ul style="list-style-type: none"> <li>Radio</li> <li>Literacy campaign</li> </ul>	<ul style="list-style-type: none"> <li>Religion</li> <li>Teacher</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religion</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>TV</li> <li>Teacher</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religion</li> <li>Campaign of former regime</li> </ul>
Opinion on girl's edu.	<ul style="list-style-type: none"> <li>It is very important</li> <li>Education is good for both girls and boys</li> </ul>	<ul style="list-style-type: none"> <li>Boys and girls are equal for education</li> <li>It is essential to educate girls</li> </ul>	<ul style="list-style-type: none"> <li>Girl's education is important</li> <li>They should get equal opportunity</li> </ul>	<ul style="list-style-type: none"> <li>Girls education is a must</li> <li>She should be enabled to compete with boys</li> </ul>	<ul style="list-style-type: none"> <li>They should not kept at home</li> <li>They should be educated</li> <li>They are more supportive when educated</li> </ul>
Preferred channel to receive info on edu.	<ul style="list-style-type: none"> <li>Radio</li> <li>Newspaper</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Newspaper</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Newspaper</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Newspaper</li> <li>Awareness campaign</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>TV</li> <li>Awareness raising</li> </ul>
Types of info. needed on primary & adult edu.	<ul style="list-style-type: none"> <li>Encouragement to learn</li> <li>Teachings of religion</li> </ul>	<ul style="list-style-type: none"> <li>Importance of education</li> <li>There is no age bar for education</li> </ul>	<ul style="list-style-type: none"> <li>Encourage to develop schools</li> <li>Regular information on education</li> </ul>	<ul style="list-style-type: none"> <li>Encouragement</li> </ul>	<ul style="list-style-type: none"> <li>Girls education</li> <li>Encouragement to learn</li> <li>Development of education</li> </ul>
<b>NW-Rural</b>					
Knowledge about importance on education	<ul style="list-style-type: none"> <li>Education is valuable</li> <li>There is no comparison of educated and uneducated</li> <li>Education widens a person's horizon</li> </ul>	<ul style="list-style-type: none"> <li>Illiteracy is very bad</li> <li>Education is light of life</li> </ul>	<ul style="list-style-type: none"> <li>It has lot of benefit</li> <li>Education is torch of life</li> </ul>	<ul style="list-style-type: none"> <li>It has lot of benefit</li> <li>One can do many things if educated</li> </ul>	<ul style="list-style-type: none"> <li>Education is vision of society</li> </ul>
If any info. is received on primary and adult edu.	<ul style="list-style-type: none"> <li>No information has been received</li> </ul>	<ul style="list-style-type: none"> <li>No information has been received</li> </ul>	<ul style="list-style-type: none"> <li>About adult education(some)</li> <li>No information has been received</li> </ul>	<ul style="list-style-type: none"> <li>Importance of education</li> <li>Encouragement message</li> </ul>	<ul style="list-style-type: none"> <li>About importance of education</li> <li>Religious duty of everyone to learn</li> </ul>
Source of info.	<ul style="list-style-type: none"> <li>Learnt from religion</li> <li>Do not have other source</li> </ul>	<ul style="list-style-type: none"> <li>Religion talks about education</li> <li>We do not have any means to learn</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Religion</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> </ul>
Opinion on girl's edu.	<ul style="list-style-type: none"> <li>It is good to educate girls</li> <li>Educated girl can help her parents and herself</li> </ul>	<ul style="list-style-type: none"> <li>Girls education is equally important</li> </ul>	<ul style="list-style-type: none"> <li>Girls education is good and are equal to men</li> <li>People gives preference to boys</li> </ul>	<ul style="list-style-type: none"> <li>Both sex must get education</li> <li>It is good to educate girls</li> </ul>	<ul style="list-style-type: none"> <li>Girls education is important</li> <li>People need to know the benefits of girls education</li> </ul>
Preferred channel to receive info on edu.	<ul style="list-style-type: none"> <li>Teashop</li> <li>Mosque</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Teashop</li> <li>Mosque</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Mosque</li> <li>Teashop</li> <li>School</li> <li>Meeting place</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>Teashop</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Teashop</li> <li>Mosque</li> </ul>
Types of info. needed on primary & adult edu.	<ul style="list-style-type: none"> <li>Information about primary and adult</li> </ul>	<ul style="list-style-type: none"> <li>Primary and adult education should be</li> </ul>	<ul style="list-style-type: none"> <li>About young people's education</li> </ul>	<ul style="list-style-type: none"> <li>Encouragement for both type</li> </ul>	<ul style="list-style-type: none"> <li>Need all kind of information</li> <li>We lost school in</li> </ul>

	<ul style="list-style-type: none"> <li>education</li> <li>Importance of education should be spread</li> </ul>	encouraged	<ul style="list-style-type: none"> <li>Encouragement</li> </ul>		war, need to know how to restart
<b>NW-Nomadic</b>					
Knowledge about importance on education	<ul style="list-style-type: none"> <li>Education is good for everyone's future</li> </ul>	<ul style="list-style-type: none"> <li>Education has lot of advantage</li> </ul>	<ul style="list-style-type: none"> <li>Illiterate person is not better than an animal</li> <li>Education is very important</li> </ul>	<ul style="list-style-type: none"> <li>Education has lot of value for human being</li> </ul>	<ul style="list-style-type: none"> <li>It is important everybody should learn</li> </ul>
If any info. is received on primary and adult edu.	<ul style="list-style-type: none"> <li>No information received</li> </ul>	<ul style="list-style-type: none"> <li>About importance of education</li> </ul>	<ul style="list-style-type: none"> <li>Advantage of education</li> </ul>	<ul style="list-style-type: none"> <li>To learn is a duty of everybody</li> <li>Encouragement to learn</li> </ul>	<ul style="list-style-type: none"> <li>About importance and value of education</li> </ul>
Source of info.	<ul style="list-style-type: none"> <li>Religion</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Quranic teacher</li> <li>Radio</li> <li>Parents</li> </ul>	<ul style="list-style-type: none"> <li>Religion</li> <li>Quranic school</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>
Opinion on girl's edu.	<ul style="list-style-type: none"> <li>It is good</li> <li>Educated girls can work as boys</li> </ul>	<ul style="list-style-type: none"> <li>Girls are equal for education</li> </ul>	<ul style="list-style-type: none"> <li>It is very important</li> <li>Nomadic girls have less opportunity</li> </ul>	<ul style="list-style-type: none"> <li>Girls should have equal education as boys</li> </ul>	<ul style="list-style-type: none"> <li>It is very important for a girl to be educated</li> <li>Nomad girls have little chance</li> </ul>
Preferred channel to receive info on edu	<ul style="list-style-type: none"> <li>Radio</li> <li>Teacher</li> </ul>	<ul style="list-style-type: none"> <li>Religious leader</li> <li>Teacher</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Teacher</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Religious leader</li> <li>Radio</li> <li>Newspaper</li> </ul>
Types of info. needed on primary & adult edu.	<ul style="list-style-type: none"> <li>Opening of school in the area will be great information (Badweyn nomad)</li> <li>Encouragement message</li> </ul>	<ul style="list-style-type: none"> <li>Need all type of information for both adult and primary education</li> </ul>	<ul style="list-style-type: none"> <li>How to start school for nomads</li> <li>Importance of education for adults</li> </ul>	<ul style="list-style-type: none"> <li>At first there is a need of school</li> <li>Encouragement to go to school</li> </ul>	<ul style="list-style-type: none"> <li>Encouragement to learn</li> <li>Encouragement to establish a school</li> </ul>

The charts have revealed that men and women of all age groups are aware of the importance of education in life. All of the target groups have positive opinions on girl's education. Radio, school and teacher, and the religious institutions are the preferred channels to receive information on education. Many men and women of all age groups have received awareness raising information on primary and adult education. The adult and the elderly women are in need of literacy programs in all population settings as most of them only can recite few verses and chapters of the Qura'n. People are in need of encouraging messages and information to develop education system in all population settings. The nomadic youths have less access to formal education, Quranic Schools are the only place where they have hope to learn new information on education. Interview with the community leaders also supports this necessity, and most of the community leaders are concerned about their children and youths that they are losing their future in lack of learning opportunity. Many community leaders in the urban areas are even worried with existing situation of their youths, that in lack of productive activities youths are wasting their time watching worthless video films which are full of violence.

### 5.7.1. Knowledge about importance of education:

#### ▪ Elderly Women:

The elderly women in all of three population groupings of all zones opined that education is important and necessary for everybody, and it helps to develop. When asked about their education /literacy level almost all of the elderly women mentioned they can only recite few chapters of the Qura'n.

#### ▪ Adult Women:

All adult women mentioned that education is an essential matter; it is the light of life; some body without education is like living in a dark house; illiterates do not gain much in life, therefore, it should be the priority of life. One must have religious or other education. Some of the nomadic women sadly expressed that education is important but nomads have less opportunity of formal education, therefore their children are only going to the Quranic School. Although the adult women well expressed their understanding of importance of education but most of them sadly mentioned that they never had enough opportunity to learn. When asked about their own education level the urban women expressed mixed information. Some of them had reached intermediate school, some others completed secondary school, while others have covered only the religious learning. Compared to the urban women, the rural and the nomadic women have lower level of education/literacy. Most of the nomadic women mentioned that they can only recite few chapters of the *Qura'n*. While some of them expressed if they have an opportunity even now they would like to get education.

▪ **Youth Girls:**

Alike their mothers and grandmothers, young girls in all population settings expressed similar understandings on the importance of education. They also mentioned that education opens up many opportunities in life and everything good in life is the result of education. Most of the young girls in the rural and the nomadic areas mentioned that they never have had opportunity to go to the formal school. Only some of them reported completing the primary education.

▪ **Youth Boys:**

The young boys in all population settings expressed similar views as other groups about the importance of education. Alike the women folks, they also mentioned education brings development and fights with ignorance. It is useful for mankind and is the key of life and everyone has right to education. Compared to the girls most of the boys groups reported having completed the primary education. Only the nomadic boys mentioned that they only been to the Quranic School and that is the only place where they can learn.

▪ **Male:**

Alike all of the other groups, the entire men groups of all zones mentioned that education is the pillar of life and human existence. Illiterates are always in darkness and the educated are in the light, a person without education does not have anything in the world and those who learn will prosper in life.

### **5.7.2. Information received on primary and adult education:**

▪ **Elderly Women:**

The urban and the rural elderly women of the NE informed that they have had received encouraging information to learn and have education. While the nomadic elderly women mentioned they have not received any information on formal education. However, in the CSZ and the NW most of the elderly women mentioned having information on importance of education during the literacy campaign of the past regime. When asked about their own education level elderly women in all population settings reported they have learnt only few Quranic chapters. Very few of them mentioned that they have been in to any adult literacy sessions.

▪ **Adult Women:**

The urban and the rural women in the NE, alike the elderly women mentioned that they have received encouraging information, while the nomadic women said that they never been to the school so do not have much information. Most of the adult women reported that they have received information telling about importance of education encouraging to go to the schools. Many of the urban adult women of the CSZ said that recently, no specific information is given. During the illiteracy eradication campaign of the past regime there were documentary films encouraging to learning and teaching. In the NW most of the urban adult women reported that they have received the information about benefits of education. While most of the rural and the nomadic women reported negatively. They said that mostly we do not have time to listen radio and there is no other channel from where information could be received. Some others stated that *we know that education is important but where and how a rural and nomad woman and girl can achieve it*, as most of them reported that they do not have any school except the Quranic School where they learn to recite the Qura'n.

- **Youth Girls:**

In the NE, the entire groups of young girls said that they have had received information on benefit of education. In the CSZ and the NW also most of the young girls reported the same that the information received are about importance and advantage of education. Some of the nomadic girls in the CSZ mentioned that the Qura'n talks about education and instructs to learn for tomorrow.

- **Youth Boys:**

All of boys groups in all zones reported that they have the same awareness information highlighting the importance of education telling that education brings better life.

- **Male:**

Most of the men groups mentioned receiving awareness raising information on education. Some of the rural and the nomadic men reported negatively. However, they expressed their understanding on the importance of education.

**The discussion indicates that all target groups are aware of importance of education and think that it is an essential part of the life. The discussion indicates that the understanding of importance of education is based on the religious teachings because Islam has emphasized that to look for knowledge is a duty of every human being.**

**During the literacy campaign of the past regime people were encouraged to learn and teach. Recently after the devastation of the Civil war people have lost their track of learning in many areas.**

### **5.7.3. Sources of Information:**

- **Elderly Women:**

Radio, the Holy *Qura'n* and the mosque are the sources used to receive information on education by most of the elderly women in the NE. In the CSZ, radio, elders, and the campaign are the sources of information for the urban elderly women; the rural elderly women added the Qura'n; and the nomadic elderly women added religious leader and mobile microphone as their sources of information. In the NW all of the elderly women mentioned radio, religion, and campaign of the past regime as their sources of information.

- **Adult Women:**

Most of the women groups in the NE mentioned radio, awareness campaigns, and community meetings as their sources of information. Radio and community leaders are the sources of information for most of the adult women in the CSZ also. Radio, religion, and teacher are the sources of information for adult women of the NW.

▪ **Youth Girls:**

In the NE, radio, teacher, and newspaper are the sources of information for the urban girls. The rural girls mentioned awareness program as their source of information while the nomadic girls said radio and fellow people are their sources of information. Some of them mentioned international agencies like UNICEF and UNESCO also as their sources of information. Whereas in the CSZ, the urban girls mentioned radio, TV, and awareness campaign as their sources of information; the rural girls included community leader; and the nomadic girls included men in their sources of information. In the NW, the urban and the rural girls mentioned radio and religion and the nomadic girls mentioned the Quranic teacher, radio, and parents as their sources of information. The listing of sources exhibits the similarity among zones and population settings.

▪ **Youth Boys:**

In the NE, radio, mosque, and parents are the sources of information for the urban and the rural boys respectively. The nomadic boys mentioned the Quranic School teacher and religious leader as their sources of information. Closer to their age mates of other zones, young boys in the CSZ mentioned radio and school in the urban areas; radio, parents, and Quranic school in the rural areas; and religious leader in the nomadic areas as their sources of information. Radio, TV, and teacher are the sources of information for the urban boys in NW; the rural boys mentioned religion and radio; and the nomadic boys mentioned religion and the Quranic School as their sources of information.

▪ **Male:**

Radio is the commonly mentioned source of information by all men groups in all zones. Mosque, teacher, religious leader, and parents are some other sources mentioned by the rural and the nomadic men. In some areas of the NW government is also mentioned as one of the source of information.

#### **5.7.4. Opinion on girl's education:**

▪ **Elderly Women:**

Most of the elderly women in all population settings of all zones responded very positively on educating the girls. They mentioned that the girls should be given equal opportunity to learn. Only some of the nomadic elderly women stated that *educating girls is good but they keep goat for us; it is good but expensive, this opinion suggest that nomadic mother are reluctant to spare their girls to go to the school*. Some of the urban elderly women of the NE mentioned that girls have more quality than boys have. They quoted a cultural expression praising the girls;

*Nin gaala kayeela, Ganuun ii soo walwaala, gabood aqal iiga yeela, Habeenkii soo gudooya, hadaan gabareey ku goonsho, hadaan wiil kula gudboonsho.*

The one who transfer the enemy to friend; who brings me camel milk; who prepares me a shelter; who walks by on foot during the night; I will not blame you my daughter and will not equalize you to a boy.

Most of the elderly women in the CSZ expressed their concern that *girls do not have much opportunity to learn because as soon as they are strong enough to work at home and to get married they will be stopped from going school*. Some others viewed that to educate girls is good but they should be taught to do household work and to take care of the children and the family. On the other hand, many rural and the nomadic elderly women were concerned about the unavailability of the schools in their areas where their girls can go to learn. Still some other elderly women in the rural areas ignorantly mentioned that to send girls to the school after a certain age is to spoil them.

▪ **Adult Women:**

All of the women groups across the country expressed positive opinion on educating the girls saying that girls are the bases of the community it is very important to educate them and they should have equal opportunities like boys. Many of them expressed that the boys and girls are equal for education and religion also allows that. They also quoted a saying, *education is light of the world and educated girl is the light of the house*. Some of them said that many people are not convinced to send their girls to the school because of the perception that girls will be spoiled in the school, and they are good at home.

▪ **Youth Girls:**

The entire groups of young girls in all zones are in consensus that girls should be given equal opportunity to have education, as they are mothers of tomorrow and if the mothers are not educated the society will collapse. The urban and the rural girls reported having education of different level while the nomadic girls mostly said they did not have access to the formal education, and have less opportunity of education even if they are aware of its importance. In the CSZ **some of the urban girls were even annoyed to be asked about their opinion on girls education. They said that it is not good to ask such question because education is an inherent right of girls also**. Some others mentioned that due to economic condition parents would like to send boys than the girls to the school.

▪ **Youth Boys:**

The young boys in all population settings of all zones opined accordingly that girls should be given equal education opportunity. The urban boys specially mentioned that girls are the mothers of tomorrow therefore, they should be given special attention, and because educated mother starts right at home to educate the society. Some of the nomadic boys said that girls should be taught culture and good behavior. Many of them were concerned about the limited access and social perception that girls will develop some misbehave after puberty and are pulled out from the school.

▪ **Male:**

All of the men groups expressed positive views on girl's education saying that they are the part of the society and mothers of tomorrow. Some of them viewed that to deprive girls from education is a bad culture and they should not be kept at home. Some others mentioned that educated girls are more supportive to the family.

**The opinion on girls education reveals that despite the positive view on girls education the persistence of some strong misconception, traditional values, poverty, and access to the schools are contributing to keep girls out of the school.**

### **5.7.5. Preferred channel to receive information on education:**

- **Elderly Women:**

In the NE Radio, newspaper, and the mosque are the preferred channels of the urban, rural and nomadic elderly women respectively. In the CSZ, the urban elderly women preferred radio and public address; the rural elderly women preferred mosque, community leader, and Quranic School; and the nomadic elderly women preferred radio and mobile microphone. In the NW, the urban elderly women preferred radio and newspaper; the rural elderly women preferred teashop, mosque, and radio; and the nomadic elderly women preferred radio and teacher to receive information on education.

- **Adult Women:**

Radio, mosque, and Quranic Schools are the preferred channels to receive information on education for all women groups in all population settings of the NE. In the CSZ radio is the commonly preferred channel for all adult women in which the urban women added TV and community leader; the rural and the nomadic women added women's meeting and local elders. In the NW, the urban women preferred radio and newspaper; the rural women preferred teashop, mosque, and radio; and the nomadic women preferred religious leader and teacher.

- **Youth Girls:**

The urban and the rural girls of the NE preferred radio, newspaper, and mosque to receive information on education whereas the nomadic girls preferred the Quranic teacher and community meetings. Radio and TV, teacher and community leader are the preferred channels of the young girls in the urban, rural and nomadic areas of the CSZ respectively. In the NW, the urban girls chose radio and newspaper; the rural girls chose mosque, teashop, meeting place, and school; the nomadic girls chose radio and teacher.

The response indicates that the preferences of channels are depending on the access and availability of the channels.

- **Youth Boys:**

The urban, rural, and nomadic boys in the NE and the CSZ preferred radio, mosque, Quranic School, community leader, and parents respectively to receive information on education. In the NW, the urban boys preferred radio, newspaper, and awareness campaign while the rural boys preferred radio, mosque, and teashop.

- **Male:**

All men groups in the NE and the CSZ commonly preferred radio to receive information on education. Mosque, religious leader, community leader, and teacher are some other addition to their preference. In the NW, the urban men preferred radio, TV, and awareness campaign; rural men preferred radio, teashop, and mosque; and the nomadic men preferred religious leader, radio, and newspaper.

**The response reveals that preferences of the female groups are alike and preferences of the male groups are alike among which radio, mosque/religious leader, and teashop are in common.**

### **5.7.6. Types of information needed:**

- **Elderly Women:**

The urban elderly women mentioned they need information to encourage education of girls and to mobilize education while the nomadic elderly women want information to help adult women to learn the *Qura'n*.

**The discussion reveals that very few elderly women had opportunity for formal learning, however, they have realized the importance of education and are positive for girl's education.**

▪ **Adult Women:**

Most of the adult women mentioned they need information to encourage education and convince people about the importance of education. Some of the urban women said people need information to promote adult education. Some of the nomadic women said that in fact all information related to help and promote education for nomads is needed.

**The discussion signifies that all women groups are aware of importance of education and are positive for girl's education. The nomads have less access to learning opportunity and are in need of promotional information on education. The women groups are also in need of the access to adult education.**

▪ **Youth Girls:**

Information to improve education; mobilize women for education; and to increase access to education in the village and the nomadic areas are the sort of information demanded by the young girls in all population settings.

**The discussion suggests that like their mothers young girls are also aware of the importance of education and are enthusiastic about girl's education. Compared to the urban and the rural areas formal education has not reached to the nomadic girls emphasizing once again that mere awareness is not enough to bring change, access to the facilities is equally important.**

▪ **Youth Boys:**

According to the young boys, community mobilization information on education and motivating information to nomads to go to the school are the information needed. Many want to know about learning of languages like English and Arabic. Most of the nomadic boys expressed that Quranic School is the only place they go to learn. They were never been to other schools because they are nomads and due to the economic hardship. Some of them said that they are learning only the *Qur'an*, and they really need the formal schools. Some others even mentioned that in fact any information to improve education is important.

**The discussion denotes that young boys are also aware of the importance of education; are positive to girl's education; and the nomadic youths are desperate to have formal education.**

▪ **Male:**

The men groups mentioned that they need information of new technology on education; for quality improvements; encouragement for girls education; motivating information for youths to attend schools; awareness to fight against ignorance; ways to educate nomads; and to increase access to education center etc.

**It can be deduced from the discussion that men are equally aware of importance of education for both boys and girls and are in need of all types of information for improving quality of education and awareness raising.**

□ **Main findings:**

- All men and women of all age groups are aware of importance of education.
- All men and women of all age groups have positive views on providing equal education opportunity for girls. Despite unanimous acceptance of girl's education, surprisingly this positive attitude does not correlate with the existing low enrolment, high dropout rate, and low female literacy rate of Somalia. E.g. only 38% girl's are enrolled in the primary school compared to 62% of the boy's enrolled out of that about 37% of girls drop-out by the time they reach to the grade 4 (Situation Analysis, UNICEF, 1999). The discussion suggests couple of reasons, for instance, people know about the importance of education/knowledge because the Islam instructs to seek knowledge for both girls and boys and all of the target groups have mentioned that. Yet people are unable to practice even the Quranic teaching because of so many other cultural and economic reasons like girl's support in household chores, acute economic condition, devastation of formal education system due to the Civil war, security, access and unfriendly school-time and environment for girls, and above all existence of traditional misperception against girls education etc.
- Almost all of the groups of men and women mentioned importance of girls' education in the context that they are the mothers of tomorrow rather than an individual in need of over all development who can play a major role in building the nation.
- Rural and nomadic populations are in less access to formal school. Specially, the nomadic youths are in desperate need of formal education. The discussion indicates that awareness-raising information are not adequately disseminated to the nomadic areas.
- Increasing popularity of action oriented imported video films among youths and in availability of productive activities is creating a frustrated and deviated youths lacking the vision of future. Most of the community leaders have reported the lack of reading or recreational center in their community to keep youths and children engaged on something creative.
- Awareness raising information are reaching to the people, however, to achieve remarkable change physical facilities are equally important and need to be enhanced specially, in rural and nomadic areas.
- Information encouraging adult education is needed in all population settings.
- Most of the video parlors interviewed as key informants expressed their willingness to include educational videos in their shows.

□ **Recommendations:**

- In rural and nomadic areas Quranic Schools should be strengthened with formal learning also.
- Educational priority should be enhanced to rural and nomadic areas.
- Friendly and extra time for the girls and encouraging environment in the existing schools, and the physical presence of the schools in easy access should be enhanced in all population settings then the information should be disseminated widely. Awareness information on girls' education should highlight the girl as a responsible person of tomorrow.
- Priority should be given to engage youths on creative activities.
- Educational videos highlighting the importance of education, and also giving information on various issues like health, HIV/AIDS, environment improvement, social development, rights of children and women, and role of stake holders etc., should be produced for dissemination not only for agencies but also for various target groups.

## 5.8. Water and Sanitation:

The chart bellows have revealed that awareness about potable water does exist to some extent among the target groups across the country. Almost all of the target groups reported that they define safe and unsafe water from the color, smell, and taste of the water, while many of them also reported that bacteria and worms free water is safe. All target groups reported that use of the unsafe water for drinking and cooking could cause many diseases like diarrhea, cholera and other bacterial diseases. Most of the target groups reported not implementing the knowledge about the safe water because of economic problems, availability of water purifying facilities, drugs and chlorine, lack of accurate knowledge to use the purifying substances, shortage of water, and lack of water managing government body. International agencies like UNICEF, and radio are the sources of the information for all target groups and they preferred radio, mosque, religious leader, and community/women's meeting to receive water- related information.

### Water and Sanitation: Chart: 8

NE-Urban					
Questions discussed	Response of the target groups				
	Eld. women	Adult women	Youth(g)	Youth(B)	Male
Knowledge of potable water	<ul style="list-style-type: none"> <li>▪ We can drink clean water</li> <li>▪ Clean water does not smell</li> <li>▪ Unclean water may have worms</li> <li>▪ Clean water can be distinguished from color, smell, and taste</li> </ul>	<ul style="list-style-type: none"> <li>▪ Drinkable and undrinkable water is distinguished from color, smell, taste</li> </ul>	<ul style="list-style-type: none"> <li>▪ Clean and unclean water in different in color, smell, and taste</li> </ul>	<ul style="list-style-type: none"> <li>▪ All water is not same</li> </ul>	<ul style="list-style-type: none"> <li>▪ Clean water and unclean water is not same in color, smell, and taste</li> <li>▪ Clean water means healthy life</li> </ul>
Knowledge about consequences of using unsafe water	<ul style="list-style-type: none"> <li>▪ Unclean water can cause disease like worms</li> </ul>	<ul style="list-style-type: none"> <li>▪ Unclean water cause diarrhea</li> <li>▪ Cholera</li> </ul>	<ul style="list-style-type: none"> <li>▪ Unclean water cause disease like diarrhea and cholera</li> </ul>	<ul style="list-style-type: none"> <li>▪ Unclean water may cause bacterial disease</li> </ul>	<ul style="list-style-type: none"> <li>▪ Unclean water means unhealthy life</li> </ul>
Implementation of knowledge/info in practice	<ul style="list-style-type: none"> <li>▪ Do not practice the instruction</li> </ul>	<ul style="list-style-type: none"> <li>▪ Do not practice</li> </ul>	<ul style="list-style-type: none"> <li>▪ We do boil water only for drinking</li> <li>▪ Usually do not practice</li> </ul>	<ul style="list-style-type: none"> <li>▪ Usually people do not implement</li> </ul>	<ul style="list-style-type: none"> <li>▪ Some implements some does not</li> </ul>
Reasons for non implementation, if any	<ul style="list-style-type: none"> <li>▪ Do not have necessary equipment</li> <li>▪ Economic problem</li> </ul>	<ul style="list-style-type: none"> <li>▪ Do not get chlorine</li> <li>▪ Financial problem</li> </ul>	<ul style="list-style-type: none"> <li>▪ Chlorine is expensive and not easily available</li> <li>▪ Lack of central government</li> </ul>	<ul style="list-style-type: none"> <li>▪ Economic problem</li> <li>▪ Water treatment drugs are expensive</li> <li>▪ People think that water in the well is safe</li> </ul>	<ul style="list-style-type: none"> <li>▪ Economic problem</li> <li>▪ Lack of water treatment drugs</li> <li>▪ Lack of community awareness</li> <li>▪ Lack of local water agency</li> </ul>
Sources of info. received	<ul style="list-style-type: none"> <li>▪ UNICEF trained to chlorinate water</li> </ul>	<ul style="list-style-type: none"> <li>▪ UNICEF</li> <li>▪ Health center</li> </ul>	<ul style="list-style-type: none"> <li>▪ Public awareness when ever there is breakout of disease</li> <li>▪ Radio</li> <li>▪ Health center</li> <li>▪ Teacher</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ UNICEF raised community awareness</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Newspaper health center</li> </ul>
Preferred channels to receive info. on water & sanitation	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>▪ Mobile microphone</li> <li>▪ Radio</li> <li>▪ Door to door awareness</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Newspapers</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Mobile microphone</li> <li>▪ Mosque</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Newspaper</li> <li>▪ Community meeting</li> </ul>

<b>NE-Rural</b>					
Knowledge of potable water	<ul style="list-style-type: none"> <li>Clean and unclean water can be distinguished from smell and color</li> <li>Water from reservoir is safe</li> </ul>	<ul style="list-style-type: none"> <li>Can distinguish clean and unclean water</li> </ul>	<ul style="list-style-type: none"> <li>Info. not available</li> </ul>	<ul style="list-style-type: none"> <li>Color, smell, and taste is the main difference of clean and unclean water</li> <li>Chlorine can clean the water</li> </ul>	<ul style="list-style-type: none"> <li>we have enough knowledge on clean and unclean water</li> </ul>
Knowledge about consequences of using unsafe water	<ul style="list-style-type: none"> <li>Unclean water cause disease</li> </ul>	<ul style="list-style-type: none"> <li>Unclean water can cause diarrhea and other disease</li> </ul>		<ul style="list-style-type: none"> <li>Unclean water cause disease</li> </ul>	<ul style="list-style-type: none"> <li>Unclean water gives bacteria and sickness</li> </ul>
Implementation of knowledge/info in practice	<ul style="list-style-type: none"> <li>Sometimes do follow instructions sometime do not</li> </ul>	<ul style="list-style-type: none"> <li>Some implements and some does not</li> </ul>		<ul style="list-style-type: none"> <li>Some implements and some does not</li> </ul>	<ul style="list-style-type: none"> <li>We do not follow</li> <li>People are not same, some do follow some don't</li> </ul>
Reasons for non implementation, if any	<ul style="list-style-type: none"> <li>Mostly rain water is used, so do not have much options</li> </ul>	<ul style="list-style-type: none"> <li>Do not have time, money and enough water</li> </ul>		<ul style="list-style-type: none"> <li>People do not care</li> <li>Shortage of water</li> </ul>	<ul style="list-style-type: none"> <li>Don't get chance to check because of water shortage</li> </ul>
Sources of info. received	<ul style="list-style-type: none"> <li>Radio</li> <li>Doctor</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> <li>MCH</li> </ul>		<ul style="list-style-type: none"> <li>Radio</li> <li>Health center</li> <li>Newspaper</li> </ul>	<ul style="list-style-type: none"> <li>MCH</li> <li>Radio religious scholar</li> </ul>
Preferred channels to receive info. on water & sanitation	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>Community meeting</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>MCH</li> <li>Religious scholar</li> </ul>		<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>MCH</li> <li>Mosque</li> </ul>
<b>NE-Nomadic</b>					
Knowledge of potable water	<ul style="list-style-type: none"> <li>Pumped water is safe</li> <li>Safe water can be distinguished from color, smell, and taste</li> </ul>	<ul style="list-style-type: none"> <li>Clean and dirty water can be distinguished easily by color and smell</li> </ul>	<ul style="list-style-type: none"> <li>Unclean water has germs</li> </ul>	<ul style="list-style-type: none"> <li>Can differentiate from color, smell</li> <li>Unclean water can be distilled by boiling</li> </ul>	<ul style="list-style-type: none"> <li>Pump water is clean</li> <li>Unclean water can be identified by color, smell, and taste</li> </ul>
Knowledge about consequences of using unsafe water	<ul style="list-style-type: none"> <li>Get disease like diarrhea</li> <li>If the water and sanitation is not cares that means disease</li> </ul>	<ul style="list-style-type: none"> <li>Unclean water can cause disease</li> </ul>	<ul style="list-style-type: none"> <li>Unclean water cause communicable disease</li> <li>Germs living in the dirty water cause sickness</li> </ul>	<ul style="list-style-type: none"> <li>Unclean water cause diarrhea and cholera</li> </ul>	<ul style="list-style-type: none"> <li>Unclean water can cause stomach problem</li> </ul>
Implementation of knowledge/info in practice	<ul style="list-style-type: none"> <li>Do not have much choice</li> </ul>	<ul style="list-style-type: none"> <li>Many do not implement</li> </ul>	<ul style="list-style-type: none"> <li>Yes we do implement the knowledge</li> </ul>	<ul style="list-style-type: none"> <li>Do not practice</li> </ul>	<ul style="list-style-type: none"> <li>Depends on the availability of water</li> </ul>
Reasons for non implementation, if any	<ul style="list-style-type: none"> <li>Shortage of water</li> <li>Lack of knowledge</li> </ul>	<ul style="list-style-type: none"> <li>Do not have sufficient water</li> </ul>	<ul style="list-style-type: none"> <li>NA</li> </ul>	<ul style="list-style-type: none"> <li>Necessity is strong than knowledge</li> <li>People have to drink what ever is available</li> <li>Lack of clean water</li> </ul>	<ul style="list-style-type: none"> <li>Usually we do not get clean water</li> <li>Have to use whatever water source we reach</li> </ul>
Sources of info. received	<ul style="list-style-type: none"> <li>Radio</li> <li>Community meeting</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Health center</li> <li>Community meeting</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Community meeting</li> <li>Islamic scholar</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Community</li> <li>Parents</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Doctor</li> </ul>
Preferred channels to receive info. on water & sanitation	<ul style="list-style-type: none"> <li>Radio</li> <li>Women's meeting</li> </ul>	<ul style="list-style-type: none"> <li>Doctor</li> <li>Community meeting</li> <li>Religious scholar</li> </ul>	<ul style="list-style-type: none"> <li>Mosque</li> <li>Community meeting</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>Community meeting</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Community meeting</li> </ul>
<b>CSZ-Urban</b>					
	Eld. women	Adult women	Youth(g)	Youth(B)	Male

Knowledge of potable water	<ul style="list-style-type: none"> <li>Sight, Smell, Color and taste</li> <li>Tiny insects</li> </ul>	<ul style="list-style-type: none"> <li>Existence of worms</li> <li>Smell, color and taste</li> <li>Unsafe water has bacteria</li> </ul>	<ul style="list-style-type: none"> <li>Safe water is clear</li> <li>Unsafe water contains germs</li> <li>Deep well is safe</li> <li>Use chlorine to make water safe</li> </ul>	<ul style="list-style-type: none"> <li>Safe water is clear</li> <li>Unsafe water has germs</li> <li>Well water is safe</li> <li>Well close to toilet is dangerous</li> </ul>	<ul style="list-style-type: none"> <li>Sight, Smell, Color and taste</li> <li>Unsafe water has germs</li> </ul>
Knowledge about consequences of using unsafe water	<ul style="list-style-type: none"> <li>cause of many disease like diarrhea</li> <li>Some worm will get into the body</li> </ul>	<ul style="list-style-type: none"> <li>Unsafe water bring disease</li> </ul>	<ul style="list-style-type: none"> <li>Brings cholera</li> </ul>	<ul style="list-style-type: none"> <li>Brings cholera</li> <li>Malaria</li> <li>Diarrhea and dehydration</li> </ul>	<ul style="list-style-type: none"> <li>Unsafe water bring disease like diarrhea</li> </ul>
Implementation of knowledge/info in practice	<ul style="list-style-type: none"> <li>Yes (most)</li> <li>No (few)</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Yes (most)</li> <li>No (few)</li> </ul>	<ul style="list-style-type: none"> <li>Yes (few)</li> <li>No (many)</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>
Reasons for non implementation, if any	<ul style="list-style-type: none"> <li>Time</li> <li>Laziness</li> <li>Cannot afford</li> </ul>		<ul style="list-style-type: none"> <li>Laziness</li> <li>Time</li> <li>Carelessness</li> </ul>	<ul style="list-style-type: none"> <li>Laziness</li> </ul>	
Sources of info. received	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>Religion teaches to clean water</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Health worker</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>TV</li> <li>Mobile microphone</li> <li>School</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Magazine</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> <li>Workshop</li> </ul>
Preferred channels to receive info. on water & sanitation	<ul style="list-style-type: none"> <li>Radio</li> <li>Poster</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Health worker</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Health center</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>School</li> <li>Health center</li> </ul>
<b>CSZ-Rural</b>					
Knowledge of potable water	<ul style="list-style-type: none"> <li>River water is safe</li> <li>Water from well and filtered is safe</li> <li>Unsafe water is muddy and dirty</li> </ul>	<ul style="list-style-type: none"> <li>Boiled and water from well is safe</li> </ul>	<ul style="list-style-type: none"> <li>Sight, taste, and color</li> <li>Germs in the storage</li> <li>Well water is safe</li> </ul>	<ul style="list-style-type: none"> <li>Sight, taste, and color</li> </ul>	<ul style="list-style-type: none"> <li>Sight, taste, and color</li> <li>Unsafe water brings cholera and worms</li> </ul>
Knowledge about consequences of using unsafe water	<ul style="list-style-type: none"> <li>Cause disease like cholera and dysentery</li> </ul>	<ul style="list-style-type: none"> <li>Unsafe water bring disease</li> </ul>	<ul style="list-style-type: none"> <li>Cause disease like cholera, stomach pain</li> </ul>	<ul style="list-style-type: none"> <li>Cause disease like cholera, stomach pain</li> </ul>	<ul style="list-style-type: none"> <li>Cholera, stomach pain</li> </ul>
Implementation of knowledge/info in practice	<ul style="list-style-type: none"> <li>No (many)</li> <li>Yes (few)</li> </ul>	<ul style="list-style-type: none"> <li>Normally no</li> <li>Yes, When there is outbreak of disease</li> </ul>	<ul style="list-style-type: none"> <li>No</li> </ul>	<ul style="list-style-type: none"> <li>No</li> </ul>	<ul style="list-style-type: none"> <li>Yes (some)</li> <li>No (many)</li> </ul>
Reasons for non implementation, if any	<ul style="list-style-type: none"> <li>Time</li> <li>Water from well and river is safe</li> </ul>	<ul style="list-style-type: none"> <li>Time</li> <li>Lack of adequate water all the time</li> <li>Lack of understanding</li> </ul>	<ul style="list-style-type: none"> <li>No enough water</li> <li>Time</li> </ul>	<ul style="list-style-type: none"> <li>Shortage of water</li> <li>Trust on God</li> </ul>	<ul style="list-style-type: none"> <li>Shortage of water</li> <li>Have to use what ever is available</li> <li>Trust on the Allah</li> </ul>
Sources of info. received	<ul style="list-style-type: none"> <li>Elders</li> <li>Health center</li> </ul>	<ul style="list-style-type: none"> <li>Health worker</li> <li>Posters</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Health worker</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Health worker</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Health worker</li> <li>Religious leader</li> </ul>
Preferred channels to receive info. on water & sanitation	<ul style="list-style-type: none"> <li>Elders</li> <li>Radio</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Health worker</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Health worker</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Health worker</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> </ul>
<b>CSZ-Nomadic</b>					
Knowledge of potable water	<ul style="list-style-type: none"> <li>Sight</li> <li>Boiled water is safe</li> <li>Unsafe water contains worms</li> <li>Bore hole water is safe</li> </ul>	<ul style="list-style-type: none"> <li>Smell, color, and taste</li> </ul>	<ul style="list-style-type: none"> <li>Smell, color, and taste</li> </ul>	<ul style="list-style-type: none"> <li>Sight, taste and smell</li> </ul>	<ul style="list-style-type: none"> <li>Well water is safe</li> <li>Rain water catchment is safe</li> <li>Smell, color, and taste</li> </ul>
Knowledge about consequences of using unsafe water	<ul style="list-style-type: none"> <li>Cause cholera and other disease</li> </ul>	<ul style="list-style-type: none"> <li>Cause disease</li> </ul>	<ul style="list-style-type: none"> <li>Disease like cholera and dysentery</li> </ul>	<ul style="list-style-type: none"> <li>Cause disease like diarrhea, stomach pain</li> </ul>	<ul style="list-style-type: none"> <li>Brings disease like cholera, diarrhea,</li> </ul>

					stomach pain
Implementation of knowledge/info in practice	▪ No	▪ No	▪ No	▪ No	▪ No
Reasons for non implementation, if any	▪ Acute shortage of water ▪ Time ▪ Trust in God	▪ Shortage of water ▪ Life style ▪ Time ▪ Cannot afford	▪ Shortage of water ▪ Time ▪ Not used to ▪ Cannot manage	▪ Time ▪ Trust God ▪ Cannot afford	▪ Acute shortage of water ▪ Time
Sources of info. received	▪ Parents ▪ Health center ▪ Radio	▪ Religious leader ▪ Radio	▪ Radio ▪ Mosque	▪ Radio ▪ Elders	▪ Radio ▪ Health organization ▪ Poster
Preferred channels to receive info. on water & sanitation	▪ Mosque ▪ Radio ▪ Community chief	▪ Radio ▪ Religious leader	▪ Radio ▪ Mobile microphone ▪ Elders	▪ Radio ▪ Health center	▪ Mobile microphone ▪ Radio ▪ Local leader
<b>NW-Urban</b>					
Knowledge of potable water	▪ Tap water is safe ▪ Dirty water contains bacteria ▪ Unsafe water can be differentiated by smell, color, and taste	▪ Unsafe water has dirt, particles, and bacteria ▪ Color, smell, taste help to know ▪ Boiled water is safe	▪ Color, smell, taste help to know ▪ Use same water for drinking and cooking ▪ Unsafe water has to be boiled for drinking	▪ Color, smell, taste help to know ▪ Water from shallow well should be boiled ▪ Pipe water is safe because it is chlorinated	▪ Color, smell, taste help to know ▪ Boiled water is safe ▪ Pipe water is safe
Knowledge about consequences of using unsafe water	▪ Get infected with diseases ▪ Cause diarrhea	▪ Causes disease	▪ Causes disease	▪ Cause diarrhea cold and other diseases	▪ Causes many disease ▪ Kidney pain
Implementation of knowledge/info in practice	▪ Some does some does not ▪ Use for children ▪ If there is outbreak of disease	▪ Pipe water is safe, need not to implement ▪ When children are sick	▪ Normally no ▪ When children are sick	▪ Normally no	▪ No
Reasons for non implementation, if any	▪ Believe that tap water is safe ▪ Difficult to practice	▪ Believe that pipe water is safe ▪ Size of the family	▪ Believe that pipe water is safe	▪ Believe that pipe water is safe ▪ Ignorance	▪ Water in use is safe in the region
Sources of info. received	▪ Radio ▪ Religion	▪ Radio ▪ Religion	▪ Radio ▪ Health book ▪ Health center	Radio Poster	▪ Radio ▪ Newspaper
Preferred channels to receive info. on water & sanitation	▪ Radio ▪ School	▪ Radio ▪ School ▪ Mosque	▪ Radio ▪ Health book ▪ Health center	▪ Radio ▪ School ▪ Mosque ▪ Doctor	▪ Radio ▪ TV ▪ Doctor ▪ Mobile microphone
<b>NW-Rural</b>					
Knowledge of potable water	▪ When water is plenty it is safe ▪ Sight, smell, and taste ▪ Unsafe water contains parasites	▪ Sight, smell, and taste help to know safe and unsafe ▪ Deep well water is safe	▪ Unsafe water contains some particles and insects ▪ Smell, color, and taste help to differentiate	▪ Change occurs if water become unsafe ▪ Smell, color, and taste help to differentiate ▪ Unsafe water contains worms	▪ Rain water and deep well water is safe ▪ Smell, color, and taste help to differentiate
Knowledge about consequences of using unsafe water	▪ Cause dysentery, diarrhea, cold etc.	▪ Causes diarrhea, malaria, and cold	▪ Cause diarrhea, cold and malaria	▪ Cause diarrhea, cold, and malaria	▪ Cause diarrhea, cold, and intestinal worms
Implementation of knowledge/info in practice	▪ Water for children is boiled ▪ Normally no	▪ No ▪ Only when children are sick	▪ No ▪ Some only for children ▪ Try to avoid small catchment	Normally no	▪ No (many) ▪ Yes (few)

Reasons for non implementation, if any	<ul style="list-style-type: none"> <li>No time</li> <li>Shortage of water</li> <li>Children cannot be controlled all the time</li> </ul>	<ul style="list-style-type: none"> <li>When water is plenty no need to boil it</li> <li>Time</li> </ul>	<ul style="list-style-type: none"> <li>No time</li> <li>Shortage of water</li> </ul>	<ul style="list-style-type: none"> <li>Ignorance</li> <li>No time</li> </ul>	<ul style="list-style-type: none"> <li>No time</li> <li>Shortage of water</li> </ul>
Sources of info. received	Radio NGO	Radio	Radio Religion	Radio	Radio Religion
Preferred channels to receive info. on water & sanitation	<ul style="list-style-type: none"> <li>Radio</li> <li>Teashop</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone</li> <li>Mosque</li> <li>Teashop</li> </ul>	<ul style="list-style-type: none"> <li>Mobile microphone</li> <li>Radio</li> <li>Teashop</li> <li>School</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>Teashop</li> <li>MCH</li> </ul>	<ul style="list-style-type: none"> <li>Mosque</li> <li>Meeting place</li> <li>Radio</li> <li>Teashop</li> </ul>
<b>NW-Nomadic</b>					
Knowledge of potable water	<ul style="list-style-type: none"> <li>usually cover the water container</li> </ul>	<ul style="list-style-type: none"> <li>If there is plenty of water that is safe</li> <li>Safe water is that which can be used for prayer washing</li> <li>Pipe and well water is safe</li> </ul>	<ul style="list-style-type: none"> <li>People and livestock use same water</li> <li>Well water is safe</li> </ul>	<ul style="list-style-type: none"> <li>Do not have enough knowledge</li> <li>People should not dump near water source</li> </ul>	<ul style="list-style-type: none"> <li>The only source of water is full of iron</li> <li>People and livestock use same water</li> </ul>
Knowledge about consequences of using unsafe water	<ul style="list-style-type: none"> <li>Brings diseases</li> </ul>	<ul style="list-style-type: none"> <li>Cause disease like diarrhea</li> </ul>	<ul style="list-style-type: none"> <li>Cause disease</li> </ul>	<ul style="list-style-type: none"> <li>No discussion</li> </ul>	<ul style="list-style-type: none"> <li>Cause lot of health problems</li> </ul>
Implementation of knowledge/info in practice	<ul style="list-style-type: none"> <li>Difficult to follow always</li> <li>When there is outbreak of disease</li> </ul>	<ul style="list-style-type: none"> <li>No</li> </ul>	<ul style="list-style-type: none"> <li>No</li> </ul>	<ul style="list-style-type: none"> <li>No</li> </ul>	<ul style="list-style-type: none"> <li>No</li> </ul>
Reasons for non implementation, if any	<ul style="list-style-type: none"> <li>Time and shortage of water</li> <li>Nomads keep moving in search of water</li> <li>Cannot afford</li> </ul>	<ul style="list-style-type: none"> <li>Shortage of water</li> <li>Cannot afford</li> </ul>	<ul style="list-style-type: none"> <li>No time</li> <li>Shortage of water</li> <li>Cannot afford</li> </ul>	<ul style="list-style-type: none"> <li>Ignorance</li> <li>Shortage of water</li> <li>Time</li> <li>Cannot afford</li> </ul>	<ul style="list-style-type: none"> <li>No time</li> <li>Water shortage</li> <li>No support to purify</li> <li>Cannot afford</li> </ul>
Sources of info. received	<ul style="list-style-type: none"> <li>Radio</li> <li>Religion</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Health worker</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>No information received</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>
Preferred channels to receive info. on water & sanitation	<ul style="list-style-type: none"> <li>Doctor</li> <li>Radio</li> <li>Elderly women</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Health worker</li> <li>Awareness campaign</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile health team</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile health team</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile health team</li> </ul>

### 5.8.1. Knowledge of potable water:

#### ▪ Elderly Women:

The elderly women of all population settings in all zones reported that safe and unsafe water could be distinguished from color, smell, and taste. Unsafe water contains bacteria and worms. Most of the elderly women mentioned that water from pipeline, reservoir, bore-hole, well, and pump is safe for drinking and cooking. Chlorine can purify the water.

#### ▪ Adult Women:

Alike the elderly women, most of the adult women also reported having same kind of knowledge about potable water that it can be distinguished by smell, color, and taste, unsafe water may have worms and bacteria in it. Unsafe water can be made safe by chlorinating, boiling, and putting water purifying drugs in it.

#### ▪ Youth Girls:

Similar as their mothers and grandmothers all of the young girls reported having same type of knowledge about potable water. Some of them mentioned unclean water has germs in it.

- **Youth Boys:**

The young boys reported that all water is not same, some are safe and some are unsafe for drinking. It is the color, smell and taste of the water that helps to differentiate the safe and unsafe water. Some of the urban boys mentioned that unsafe water can have bacteria in it but it can not be differentiated with bare eyes. They also mentioned that well near to toilet is not safe. Some of the nomadic boys reported that chlorine could clean the water.

- **Male:**

Alike all other target group, most of the male groups also reported same level of knowledge about potable water. Some of the nomadic men in the CSZ mentioned that **rain water Catchment is safe to drink**. Many others mentioned that safety of water depends on the quantity of water in the Catchments.

### **5.8.2. Knowledge about the consequences of using unsafe water:**

- **Elderly Women:**

According to all elderly women groups unsafe water can cause disease because of the worms in it. They mentioned that unsafe water may cause diarrhea, cholera, and if safety of water and sanitation is not cared that means lot of health problems.

- **Adult Women:**

The adult women groups across the country reported that unsafe water could cause diseases like diarrhea, cholera and others.

- **Youth Girls:**

The young girls also mentioned same water related communicable diseases as the consequences of using unsafe water in all population settings of all zones.

- **Youth Boys:**

All of the young boys groups also mentioned all water- related diseases as the consequences of using unsafe water for cooking and drinking.

- **Male:**

The men groups across the country mentioned water-related diseases as the consequences of using unsafe water for drinking and cooking.

### **5.8.3. Implementation of information in practice:**

- **Elderly Women:**

Most of the elderly women groups in the NE reported that generally they do not implement the knowledge they have about safety of drinking water. Only some of the urban and rural elderly women reported implementing the knowledge. Likewise in the CSZ also, most of the urban and few of the rural elderly women reported that, normally the knowledge to purify the water is not implemented. All of the nomadic elderly women also denied implementation of the knowledge. In the NW most of the elderly women stated that normally the knowledge is not implemented.

Some of them said it is implemented for the use of children and during the outbreak of diseases only.

- **Adult Women:**

Most of the women in the NE mentioned that they do not practice the knowledge they have. Only some of them mentioned that they casually practice the knowledge. However, in the CSZ and the NW some of the urban adult women reported positive whereas most of the rural and nomadic women reported negative. Very few of the rural and nomadic women reported implementing the knowledge only when there is out break of diseases or for the children.

- **Youth Girls:**

The group young girls' of the NE gave mixed response implementing information in practice. Some of them reported the casual treatment of drinking water by boiling it while others reported they do not implement the knowledge they have. Some of the urban girls mentioned it depends on parents. In the CSZ, only the urban girls reported implementing the knowledge in practice whereas both rural and nomadic girls reported negative. In the NW, most of the girls reported negative. Only some of the urban girls said that it is implemented if children are sick whereas the rural and nomadic girls said they try to avoid small catchments.

**Youth Boys:**

The boys of the NE reported that they do not follow the instruction generally. They mentioned many people know about the risk of drinking unsafe water but at the same time they use the same water. Alike the girls in the CSZ, the urban boys reported positive whereas rural and nomadic boys reported they do not implement the knowledge in practice. Some of the urban boys said that they are responsible to pass the information to their parents what they learnt at school. In the NW almost all of the boys groups reported negatively.

- **Male:**

The urban men in the NE reported mixed opinion saying that some implement the information and some do not. Whereas most of the rural men reported they do not implement, and the nomadic men mentioned that it depends on the availability of water. In the CSZ and the NW some of the urban men mentioned they do implement the knowledge but the rural and nomadic men said they do not implement their knowledge.

#### **5.8.4. Reasons for non-implementation:**

- **Elderly Women:**

The urban elderly women in the NE reported that they do not implement the knowledge because they do not have necessary equipment like water filter, chlorine and other water purifying drugs etc., and also people have economic problems. People can not spent much to purify the water. The rural elderly women emphasized more on shortage of water, as they have to depend more on rainwater so do not have much choice, time, and money to make water potable. The nomadic elderly women reported the shortage of water and lack of knowledge as the reasons for non-implementation of water safety instructions. In the CSZ and the NW also most of the given reasons are same. Some of the elderly women in the NW mentioned that they believe that pipe water is safe, while others said that the practice itself is difficult to maintain. Still others mentioned that they have trust on God and they believe water from the well and river is safe.

Some of the nomadic elderly women even mentioned that *rivers are created by the Allah and how the water from it could be unsafe for people.*

▪ **Adult Women:**

Money, time, shortage of water, in availability of water purifying substances, and lack of understanding, belief on water sources, and size of the family are the reasons reported by all adult women groups across the country for non-implementation of the acquired knowledge. Some of the urban women mentioned that pump water is safe so they do not implement the instructions for water purification. Some of the rural and nomadic women reported that they believe on Allah so they do not implement. Few of the nomadic women in the NE said that collecting firewood is very difficult these days, so they can not afford to boil water.

▪ **Youth Girls:**

In the NE, only urban girls have responded the question and they mentioned that chlorine is expensive and not available easily and lack of central government as the reasons for non-implementation of information. Girls in the CSZ mostly gave the same reasons. Some of them mentioned carelessness as one of the reason for not implementing the knowledge in practice. In the NW also most of the girls mentioned the similar reasons as other groups for non-implementation of the knowledge.

▪ **Youth Boys:**

Economic problem, expensive water treatment drugs, people's belief that water in well is safe, shortage of water, ignorance, and time are some of the reasons reported by the boys for not implementing the knowledge. The rural boys in the NE said that people do not care about the safe and unsafe water because of the shortage of water. The nomadic boys, closure to their rural mates mentioned that *necessity is strong than the knowledge, people have to drink whatever is available.* Some of them mentioned that they have to drink same water where their livestock are bathing. Many rural and nomadic boys mentioned that water- purifying substances are not available.

▪ **Male:**

Most of the reasons given by all of the men groups correspond with other groups' reasons for non-implementation of information. Some of the rural and nomadic men mentioned the Somali saying that *people would die in lack of water but not drinking the water.*

### **5.8.5. Sources of information received:**

▪ **Elderly Women:**

According to all elderly women groups of the NE, UNICEF, radio, and community meetings are the sources from where they received information on safety of water. The urban elderly women of the CSZ mentioned radio, religion, and mobile microphone as the sources of their information; the rural elderly women stated health center and elders; and the nomadic elderly women mentioned radio and health center as their sources of information. In the NW radio, religion, and NGO are the sources of information for elderly women.

▪ **Adult Women:**

In the NE, according to women groups, radio, health center, UNICEF and community meetings were the sources of their information. Some of the nomadic women included religious leader in the list of their information source. In the CSZ, all of the women groups mentioned radio

commonly as their source of information, in which the urban and rural women added health worker and poster, and the nomadic women added religious leader. In the NW, all of the women groups mentioned radio, religion, mosque, health worker, and school as their sources of information.

- **Youth Girls:**

According to young girls of the NE, public awareness campaign during the outbreak of disease, health center, radio, community meeting, and religious leader were their sources of information. In the CSZ, all young girls commonly mentioned radio and mobile microphone as their sources of information. The urban girls added TV and school; the rural girls added health worker; and the nomadic girls added mosque in the list. In the NW, the urban girls mentioned radio, health book, and health center; the rural and nomadic girls mentioned radio and religion as their sources of information.

- **Youth Boys:**

Radio is the commonly mentioned source of information by all boys groups in the NE. The urban boys included UNICEF raised awareness in the list; the rural boys added radio and health center; and the nomadic boys added community and parents in the list. Alike in the NE, all of the boys groups in the CSZ also mentioned radio in common, in which the urban boys added magazine; the rural boys added health worker; and the nomadic boys added elders as their sources of information. In the NW radio, school, mosque, and doctor are the sources of information.

- **Male:**

In the NE all of the men groups like other groups commonly mentioned radio as their source of information including MCH, mosque, health center, and community meetings respectively. In CSZ also they mentioned radio in common. The urban men added religious leader and workshop; the rural men added health worker and religious leader; and the nomadic men added mobile microphone and community leader as their sources of information. In the NW radio is commonly mentioned source in which the urban men included TV, doctor, and mobile microphone; and the rural men included religion.

### **5.8.6. Preferred channels to receive information on water and sanitation:**

- **Elderly Women:**

In the NE, the urban elderly women preferred radio and mobile microphone; the rural elderly women preferred radio and doctor; and the nomadic elderly women preferred radio and community meeting to receive water- related information. The urban elderly women in the CSZ preferred radio, poster and mobile microphone; the rural elderly women preferred elders, radio, and mobile microphone; and the nomadic elderly women preferred mosque, radio, and community leader. In the NW, the urban elderly women preferred radio and school; the rural elderly women preferred radio, teashop, and mobile microphone; and the nomadic elderly women preferred radio, doctor, and elderly women.

- **Adult Women:**

In the NE radio is commonly preferred channel by the urban and rural women. The urban women included the mobile microphone and door to door campaign in their choice and the rural women included MCH and religious leader. Where as the nomadic women preferred doctor, community meeting and religious leader to receive water related information. In the CSZ, the

urban and rural women commonly preferred radio and health worker. The rural women included mobile microphone whereas the nomadic women preferred radio and religious leader. In the NW, the urban women preferred radio, school and mosque; the rural women preferred mobile microphone, mosque, and teashop; and the nomadic women preferred radio, health worker, and awareness campaign.

▪ **Youth Girls:**

In the NE, the urban and nomadic girls preferred radio and newspaper, and community meeting to receive water related information. (The rural girl's opinion is missing). In the CSZ, the urban girls preferred radio and mobile microphone; the rural girls preferred radio, health worker and religious leader; and the nomadic girls preferred radio, mobile microphone, and elders to receive water related information. In the NW, the urban girls chose radio, health book, and health center; the rural girls preferred mobile microphone, radio, teashop, and school; the nomadic girls preferred radio and mobile health team.

▪ **Youth Boys:**

Radio and mosque are the commonly preferred channels of the young boys in all population setting of the NE. Besides, the urban boys included mobile microphone in their preference; and the nomadic boys included community meeting in their list. The urban and nomadic boys of the CSZ preferred radio and health center and the rural boys preferred radio, health worker, and mobile microphone. In the NW, the urban boys chose radio, school, mosque, and doctor; the rural boys chose radio, mosque, teashop, and MCH; and the nomadic boys chose radio and mobile health team.

▪ **Male:**

The urban and nomadic men in the NE commonly preferred radio and community meeting to receive water related information and the rural men preferred radio, mosque, and MCH to have information on water. In the CSZ all men groups commonly preferred radio in which the urban men included school and health center; the rural men included religious leader; and the nomadic men included community leader and mobile microphone. In the NW, the urban men preferred radio, TV, doctor, and mobile microphone; the rural men preferred mosque, meeting place (it is a common place in village where many people gather in the afternoon and evening to share and exchange information), radio, and teashop; the nomadic men preferred radio and mobile health team. In the NW many target groups of nomadic areas preferred mobile health team reasoning that in those areas permanent health post are not available and a mobile team could go place to place informing people on health issues.

**The discussion assures that radio, mobile microphone, health center/worker and religious leader are the commonly preferred channels to receive water-related information across the country and target groups. In the NW teashop and meeting place are equally popular.**

□ **Main findings:**

- All target groups are generally aware of the differences and consequences of safe and unsafe water for drinking and cooking.
- Most of the target groups are not implementing the knowledge they have but some of them casually implement the information depending on the availability of water and out break of diseases.

- Economic condition; expensive water purifying substances; availability of such substances; lack of accurate knowledge to use such substances; shortage of water; shortage of firewood; common use of drinking water; carelessness; belief that water is purified before distribution; religious belief that things created by the God cannot be dangerous; and lack of central government are some of the reasons for non-implementation of the knowledge on safe and unsafe water. This re enforces that knowledge alone is not sufficient to bring change in behavior and practice.
- Radio, mobile microphone, health center/worker and religious leader are the commonly preferred channels to receive water- related information across the country and target groups. In the NW teashop where men gather to chew chat has acquired an important space as one of the channel to receive information.

#### □ **Recommendations:**

- Priority should be given to enhance water supply specially, in the rural and nomadic areas where people have to depend more on rainwater and ground water with high risk of contamination.
- Awareness information should emphasize on purifying water no matter how little is available for drinking and not only during the outbreak of disease.
- Awareness should be supported with enhanced access to water-purifying substances/facilities also making them affordable in all population settings.
- Appropriate knowledge should be given to use water- purifying substances. Locally available methods of water purifying need to be explored and introduced.

### **5.9. Rights Perspectives:**

The chart bellows are explaining that perceptions on human rights are based on the religious teachings and instructions. Men and women of all age groups have perceived that they can enjoy only those rights, which is provided and protected by the religion. Very few of the target groups have reported that everybody's rights should be respected and if there is no respect for human rights there will be no life in fact. Most of the female target groups are not enjoying their rights or even do not know if any of their rights are missing. Some of them expressed that the situation is common for everyone in Somalia because of the lack of government who can protect people's rights, and abuses and violation of human rights have increased due to the Civil war. All of the target groups emphasized that acute economic condition hinders the way to achieve rights. They viewed that one can think about rights only when there is enough for daily life. This indicates that people are not aware that to have adequate leaving is one of the basic human rights. Most of the target groups of all age groups opined that religion has not made men and women equal, so they can not be equal as men therefore, women should not look for what the religion does not allow. Women can enjoy all those rights equally, which are provided by the religion. Child rights is the area where the target groups are aware to some extent as they reported that children should be cared, educated, and their health should be protected. **The study has emphasized that all human rights are equally important and need equal attention. People deprived of economic and social rights are also unable to enjoy their other civil and political rights even guaranteed by the state.** Most of the target groups preferred radio, mosque, and religious leaders to aware people about their rights. Some others suggested public talks and community awareness meeting/campaigns also.

## Rights Perspectives: Chart: 9

NE-Urban					
Questions discussed	Response of the target groups				
	Eld. women	Adult women	Youth(G)	Youth(B)	Male
Perception on child rights, women's rights, HR	<ul style="list-style-type: none"> <li>To have water, health and security is human right</li> <li>Breast feeding is part of child right</li> </ul>	<ul style="list-style-type: none"> <li>It would be better if we can enjoy it</li> <li>Rights starts from the family</li> <li>Breast feed is child right</li> </ul>	<ul style="list-style-type: none"> <li>Children and women's rights should be respected</li> <li>Women's rights are those mentioned in the Qura'n</li> </ul>	<ul style="list-style-type: none"> <li>HR is important matter</li> <li>It should be followed from religion</li> </ul>	<ul style="list-style-type: none"> <li>Everyone has to have his/her right, especially women and children who are the vulnerable part of the community</li> </ul>
Enjoyment of perceived rights	<ul style="list-style-type: none"> <li>We do not enjoy our rights</li> <li>Lack of central government caused the rights to be missed</li> </ul>	<ul style="list-style-type: none"> <li>There is no Somali who can enjoy all HR</li> <li>We do not enjoy our rights</li> </ul>	<ul style="list-style-type: none"> <li>We do not get our rights</li> </ul>	<ul style="list-style-type: none"> <li>Only those which are mentioned in the religion are enjoyable</li> </ul>	<ul style="list-style-type: none"> <li>People do not enjoy their rights enough because of missing central government</li> </ul>
Any awareness received on child rights	<ul style="list-style-type: none"> <li>No</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>
Sources of info/awareness received	<ul style="list-style-type: none"> <li>NA</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Newspaper</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Newspaper</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Religion talks about it</li> <li>International agencies talk about it</li> </ul>
Opinion on women and girls' right to enjoy HR equally	<ul style="list-style-type: none"> <li>Women should have all those rights which religion allows</li> <li>Girls should be given education like boys</li> </ul>	<ul style="list-style-type: none"> <li>Do not want anything that confront with religion</li> </ul>	<ul style="list-style-type: none"> <li>Men and women are not equal therefore women have to be in their boundary</li> <li>Girls must get equal opportunity for education</li> </ul>	<ul style="list-style-type: none"> <li>They should enjoy all those rights what Islamic religion has given to them</li> </ul>	<ul style="list-style-type: none"> <li>Men and women have no equal rights because they are not equal</li> <li>They should not seek what they cannot get</li> </ul>
Best channel to reach/aware people about rights	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>Community meeting</li> </ul>	<ul style="list-style-type: none"> <li>Group awareness</li> </ul>	<ul style="list-style-type: none"> <li>Mosque</li> <li>Radio</li> <li>Newspaper</li> </ul>	<ul style="list-style-type: none"> <li>Radio Mosque</li> <li>Newspaper</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Newspaper</li> <li>Community meeting</li> </ul>
NE-Rural					
Perception on child rights, women's rights, HR	<ul style="list-style-type: none"> <li>Do not know about rights</li> <li>There must be freedom of expression</li> </ul>	<ul style="list-style-type: none"> <li>Rights of human being must be respected</li> <li>If the rights are missed there will be no life</li> </ul>	<ul style="list-style-type: none"> <li>Info. not available</li> </ul>	<ul style="list-style-type: none"> <li>It is a big issue</li> <li>HR should be protected especially women and children's rights</li> </ul>	<ul style="list-style-type: none"> <li>Rights given by the religion is enough</li> </ul>
Enjoyment of perceived rights	<ul style="list-style-type: none"> <li>Do not know women are missing any right</li> </ul>	<ul style="list-style-type: none"> <li>Many rights are not achieved but that is common for all Somalis</li> </ul>	<ul style="list-style-type: none"> <li></li> </ul>	<ul style="list-style-type: none"> <li>Do not believe any right is missing</li> </ul>	<ul style="list-style-type: none"> <li>We do not enjoy enough</li> </ul>
Any awareness received on child rights	<ul style="list-style-type: none"> <li>Heard about it</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li></li> </ul>	<ul style="list-style-type: none"> <li>Yes/heard about child rights</li> </ul>	<ul style="list-style-type: none"> <li>Have not received any awareness</li> </ul>
Sources of info/awareness received	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li></li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Heard from radio</li> </ul>
Opinion on women and girls' right to enjoy HR equally	<ul style="list-style-type: none"> <li>We accept only those given by religion</li> </ul>	<ul style="list-style-type: none"> <li>Within the limitation of religion, because religion tells about it</li> </ul>	<ul style="list-style-type: none"> <li></li> </ul>	<ul style="list-style-type: none"> <li>They can not be equal as men but they should have those given by the religion</li> </ul>	<ul style="list-style-type: none"> <li>Do not believe that women have equal rights as men</li> <li>We can allow only those which are mentioned in the religion</li> </ul>
Best channel to	<ul style="list-style-type: none"> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Islamic scholar</li> </ul>	<ul style="list-style-type: none"> <li></li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Mosque</li> </ul>

reach/aware people about rights	<ul style="list-style-type: none"> <li>Radio</li> <li>Public discussions</li> </ul>	<ul style="list-style-type: none"> <li>Use mass media</li> </ul>		<ul style="list-style-type: none"> <li>Mosque</li> <li>Quranic school</li> </ul>	<ul style="list-style-type: none"> <li>Religious meeting</li> <li>Radio</li> </ul>
<b>NE-Nomadic</b>					
Perception on child rights, women's rights, HR	<ul style="list-style-type: none"> <li>Children to be educated, given care, cured from killer disease</li> <li>Should be given all they need</li> </ul>	<ul style="list-style-type: none"> <li>To safeguard children, women and all human being is important</li> </ul>	<ul style="list-style-type: none"> <li>All HR of people should be respected</li> </ul>	<ul style="list-style-type: none"> <li>Everyone should have equal rights</li> </ul>	<ul style="list-style-type: none"> <li>All human being should have rights</li> <li>It should be asked from the responsible person in the community</li> <li>Children need education and health</li> </ul>
Enjoyment of perceived rights	<ul style="list-style-type: none"> <li>We can not enjoy many of our rights</li> </ul>	<ul style="list-style-type: none"> <li>The only rights we enjoy is from the Qura'n</li> </ul>	<ul style="list-style-type: none"> <li>Women and children do enjoy their rights</li> <li>Economic problem is the hindrance to enjoy rights</li> <li>A person can talk about rights only he has enough for daily life</li> </ul>	<ul style="list-style-type: none"> <li>All rights are not enjoyable</li> <li>Rights are not divided bit there is lack of capacity</li> </ul>	<ul style="list-style-type: none"> <li>HR we do not have because there is no order and stability</li> </ul>
Any awareness received on rights	<ul style="list-style-type: none"> <li>Heard religious leader's argument</li> </ul>	<ul style="list-style-type: none"> <li>Heard from radio program</li> </ul>	<ul style="list-style-type: none"> <li>Religion talks about rights</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Have not received any awareness</li> </ul>
Sources of info/awareness received	<ul style="list-style-type: none"> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>People</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious scholars</li> </ul>	<ul style="list-style-type: none"> <li>Community</li> <li>Religious message</li> </ul>	<ul style="list-style-type: none"> <li>No info. given</li> </ul>
Opinion on women and girls' right to enjoy HR equally	<ul style="list-style-type: none"> <li>Yes women and girls should be given equal rights as boys</li> <li>Islam gives rights to everybody</li> </ul>	<ul style="list-style-type: none"> <li>It will be good for them</li> </ul>	<ul style="list-style-type: none"> <li>Women and children's rights should be equal as others</li> </ul>	<ul style="list-style-type: none"> <li>They should enjoy all those rights what Islamic religion allows</li> </ul>	<ul style="list-style-type: none"> <li>Women and girls have right to have education, food and care</li> <li>We accept all rights given by religion</li> </ul>
Best channel to reach/aware people about rights	<ul style="list-style-type: none"> <li>Islamic scholar</li> <li>Community mobilization</li> </ul>	<ul style="list-style-type: none"> <li>Islamic scholar</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Mosque</li> <li>Women's meeting</li> <li>Islamic scholar</li> </ul>	<ul style="list-style-type: none"> <li>Mosque</li> <li>Community meeting</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Teacher</li> </ul>
<b>CSZ-Urban</b>					
	<b>Eld. women</b>	<b>Adult women</b>	<b>Youth(G)</b>	<b>Youth(B)</b>	<b>Male</b>
Perception on child rights, women's rights, HR	<ul style="list-style-type: none"> <li>All human being should be equal in rights</li> <li>Women and children are weak their rights should be cared</li> <li>Education, health care and to learn good manners are child rights</li> </ul>	<ul style="list-style-type: none"> <li>Human right is not respected in Somalia</li> <li>Civil war has caused lot of abuses, killing, looting, and raping</li> <li>Children have right to peace</li> </ul>	<ul style="list-style-type: none"> <li>Children and women need specific attention</li> <li>Every body has duty to respect rights of other and coexistence</li> </ul>	<ul style="list-style-type: none"> <li>Care, education, protection are the rights of children</li> <li>Women should be respected and not abused</li> <li>Every body should have equal rights</li> </ul>	<ul style="list-style-type: none"> <li>To have right is important</li> <li>Human right is essential everyone should have it</li> </ul>
Enjoyment of perceived rights	<ul style="list-style-type: none"> <li>No enjoyment</li> <li>Women do enjoy some</li> </ul>	<ul style="list-style-type: none"> <li>There is no enjoyment</li> <li>No basic rights and protection</li> </ul>	<ul style="list-style-type: none"> <li>Children are not cared enough</li> <li>Rights are not protected in lack of govt.</li> </ul>	<ul style="list-style-type: none"> <li>There is no proper enjoyment of rights</li> </ul>	<ul style="list-style-type: none"> <li>Due to the civil war and war lord, clan conflict people's rights are continuously violated</li> </ul>
Any awareness received on	<ul style="list-style-type: none"> <li>No (many)</li> </ul>	<ul style="list-style-type: none"> <li>No (many)</li> </ul>	<ul style="list-style-type: none"> <li>No (many)</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Yes (many)</li> </ul>

child rights	Yes (some)	<ul style="list-style-type: none"> <li>Yes (some)</li> </ul>	<ul style="list-style-type: none"> <li>Muslims are taught to take care of children</li> </ul>		<ul style="list-style-type: none"> <li>No (some)</li> </ul>
Sources of info/awareness received	<ul style="list-style-type: none"> <li></li> </ul>	<ul style="list-style-type: none"> <li>Religious leader</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Religion</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Islam itself talk about rights</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> </ul>
Opinion on women and girls' right to enjoy HR equally	<ul style="list-style-type: none"> <li>Women and girls should have equal rights under the religion</li> <li>Rights could be enjoyed if the situation improves</li> </ul>	<ul style="list-style-type: none"> <li>Men and women are born similarly but sufferings of women are countless</li> <li>They should have equal rights</li> </ul>	<ul style="list-style-type: none"> <li>Not possible to have equal rights</li> <li>Women are entitled for education</li> <li>Everybody should have equal rights</li> </ul>	<ul style="list-style-type: none"> <li>Men and women are equal</li> <li>Women should have equal rights</li> </ul>	<ul style="list-style-type: none"> <li>Women should have equal rights of education and employment</li> <li>Men and women cannot be equal by religion</li> </ul>
Best channel to reach/aware people about rights	<ul style="list-style-type: none"> <li>Religious leader</li> <li>Radio</li> <li>Quranic school</li> </ul>	<ul style="list-style-type: none"> <li>Awareness raising with the help of HR org.</li> <li>Radio</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>HR organization</li> <li>Frequent public meeting</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> <li>Awareness meetings</li> <li>TV</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mosque</li> <li>Awareness raising</li> </ul>
<b>CSZ-Rural</b>					
Perception on child rights, women's rights, HR	<ul style="list-style-type: none"> <li>Every one should have their rights</li> <li>Economic equality, food, shelter, and education are rights of all people</li> </ul>	<ul style="list-style-type: none"> <li>Women and children need more protection</li> <li>Food, education, health and freedom are basic rights</li> </ul>	<ul style="list-style-type: none"> <li>Education, health, and development are basic rights</li> <li>Every body should have entitled rights</li> </ul>	<ul style="list-style-type: none"> <li>Education, health, and development are basic rights</li> </ul>	<ul style="list-style-type: none"> <li>Education, health, peace and security are basic rights of people</li> </ul>
Enjoyment of perceived rights	<ul style="list-style-type: none"> <li>Civil war has abused human rights</li> <li>To resume govt. has to work</li> </ul>	<ul style="list-style-type: none"> <li>Most of the people are not enjoying their rights</li> </ul>	<ul style="list-style-type: none"> <li>Due to the civil war rights are not enjoyed</li> </ul>	<ul style="list-style-type: none"> <li>No body enjoys the rights at present</li> </ul>	<ul style="list-style-type: none"> <li>At present rights are not enjoyed</li> </ul>
Any awareness received on child rights	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Yes (some)</li> <li>No (many)</li> </ul>	<ul style="list-style-type: none"> <li>Yes (most)</li> <li>No (few)</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>
Sources of info/awareness received	<ul style="list-style-type: none"> <li>Radio</li> <li>Community</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>organizations</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Religious leader</li> <li>Teacher</li> </ul>
Opinion on women and girls' right to enjoy HR equally	<ul style="list-style-type: none"> <li>Men and women cannot be equal</li> <li>Women are inferior to men</li> </ul>	<ul style="list-style-type: none"> <li>Men and women should have equal rights</li> <li>Men and women are not equal</li> <li>Islamic religion does not give equal right and people cannot do it</li> </ul>	<ul style="list-style-type: none"> <li>Religiously wrong</li> <li>Men and women are not equal</li> </ul>	<ul style="list-style-type: none"> <li>Wrong according to religion</li> <li>Allah has not made them equal</li> </ul>	<ul style="list-style-type: none"> <li>It is not in religion</li> <li>Men and women should have rights according to religion</li> </ul>
Best channel to reach/aware people about rights	<ul style="list-style-type: none"> <li>Government</li> <li>Mobile microphone</li> <li>Radio</li> <li>Awareness raising</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Mobile microphone</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Awareness meeting</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Community meeting</li> <li>Mosque</li> </ul>	<ul style="list-style-type: none"> <li>Religious leader</li> <li>Teacher</li> <li>Radio</li> </ul>
<b>CSZ-Nomadic</b>					
Perception on child rights, women's rights, HR	<ul style="list-style-type: none"> <li>It is something considerable</li> </ul>	<ul style="list-style-type: none"> <li>Good to hear</li> </ul>	<ul style="list-style-type: none"> <li>Every one has rights</li> <li>Something that exist</li> </ul>	<ul style="list-style-type: none"> <li>People must have equal rights</li> <li>Do not what right is</li> </ul>	<ul style="list-style-type: none"> <li>It is good that everyone get his/her rights</li> </ul>
Enjoyment of perceived rights	<ul style="list-style-type: none"> <li>Do not enjoy</li> </ul>	<ul style="list-style-type: none"> <li>No one enjoys rights at present</li> </ul>	<ul style="list-style-type: none"> <li>No enjoyment of rights</li> </ul>	<ul style="list-style-type: none"> <li>No proper enjoyment</li> </ul>	<ul style="list-style-type: none"> <li>No enjoyment because of lacking govt.</li> </ul>
Any awareness received on rights	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>No</li> </ul>	<ul style="list-style-type: none"> <li>No</li> </ul>	<ul style="list-style-type: none"> <li>No</li> </ul>	<ul style="list-style-type: none"> <li>No (most)</li> <li>Yes (few)</li> </ul>
Sources of info/awareness	<ul style="list-style-type: none"> <li>Religious</li> </ul>	<ul style="list-style-type: none"> <li></li> </ul>	<ul style="list-style-type: none"> <li></li> </ul>	<ul style="list-style-type: none"> <li></li> </ul>	<ul style="list-style-type: none"> <li>Religious leader</li> </ul>

received	leader				
Opinion on women and girls' right to enjoy HR equally	<ul style="list-style-type: none"> <li>It is something never heard</li> <li>It will be good to have equal rights</li> <li>Except blood ransom rest should be equal</li> </ul>	<ul style="list-style-type: none"> <li>There is strong opposition from men</li> <li>It is good to have equal rights</li> <li>Do not want anything opposing the religion</li> </ul>	<ul style="list-style-type: none"> <li>If it is allowed by religion</li> </ul>	<ul style="list-style-type: none"> <li>Women should have equal rights as men</li> <li>What ever is accepted by religion should be given to women</li> </ul>	<ul style="list-style-type: none"> <li>Women should have equal rights as men</li> <li>What ever the religion accepts</li> </ul>
Best channel to reach/aware people about rights	<ul style="list-style-type: none"> <li>Mosque</li> <li>Radio</li> <li>Awareness raising</li> </ul>	<ul style="list-style-type: none"> <li>Community leader</li> <li>Meetings</li> <li>Men should be educated</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> <li>Mobile microphone</li> </ul>	<ul style="list-style-type: none"> <li>Religious leader</li> <li>Radio</li> <li>Community awareness</li> </ul>	<ul style="list-style-type: none"> <li>Religious leader</li> <li>Radio public awareness</li> </ul>
NW-Urban					
Perception on child rights, women's rights, HR	<ul style="list-style-type: none"> <li>Every human has rights</li> </ul>	<ul style="list-style-type: none"> <li>Rights of all human being is important and everyone should respect it</li> <li>Children have right to education, health and protection</li> </ul>	<ul style="list-style-type: none"> <li>Islam has given separate rights for men, women, and children</li> <li>Everyone has to respect those rights</li> </ul>	<ul style="list-style-type: none"> <li>Rights are perceived from Islamic point of view</li> </ul>	<ul style="list-style-type: none"> <li>Children and women's rights cannot be overlooked</li> <li>Islam has better perception of rights</li> </ul>
Enjoyment of perceived rights	<ul style="list-style-type: none"> <li>No one in Somalia enjoys rights at present</li> </ul>	<ul style="list-style-type: none"> <li>No proper enjoyment</li> <li>Many thing is lacking</li> <li>Rights are neglected and abused</li> </ul>	<ul style="list-style-type: none"> <li>Women do not enjoy their rights</li> </ul>	<ul style="list-style-type: none"> <li>Children's rights are taken care of as far as possible</li> <li>Other's rights are not enjoyed</li> </ul>	<ul style="list-style-type: none"> <li>Rights under religion is enjoyed</li> </ul>
Any awareness received on child rights	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>
Sources of info/awareness received	<ul style="list-style-type: none"> <li>Radio</li> <li>Islam</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religion</li> </ul>	<ul style="list-style-type: none"> <li>Religion</li> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religion</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religion</li> </ul>
Opinion on women and girls' right to enjoy HR equally	<ul style="list-style-type: none"> <li>It would good to have equal rights</li> <li>Men do not allow for equal rights</li> </ul>	<ul style="list-style-type: none"> <li>It would be nice if it can be achieved</li> <li>Women should not look for against religion</li> </ul>	<ul style="list-style-type: none"> <li>Equal rights would be good</li> <li>Religion does not state men and women equal</li> </ul>	<ul style="list-style-type: none"> <li>Women are misled to ask for equal rights</li> <li>Women should get prescribed by religion</li> </ul>	<ul style="list-style-type: none"> <li>Men and women have separate rights under Islam</li> </ul>
Best channel to reach/aware people about rights	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> <li>People should be educated about their rights</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> <li>Awareness raising</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Religious leader</li> <li>Awareness of community</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Public awareness</li> <li>Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>Religious leader</li> <li>Radio</li> <li>Awareness from family level</li> </ul>
NW-Rural					
Perception on child rights, women's rights, HR	<ul style="list-style-type: none"> <li>Muslims should respect each others rights</li> </ul>	<ul style="list-style-type: none"> <li>Do not know if women and children have rights</li> <li>Nobody cares for their rights</li> </ul>	<ul style="list-style-type: none"> <li>Children have right to good care, health and education</li> <li>Women should be given their right by men</li> </ul>	<ul style="list-style-type: none"> <li>To be in peace and freedom to express opinion</li> </ul>	<ul style="list-style-type: none"> <li>Rights of every person has to be respected</li> </ul>
Enjoyment of perceived rights	<ul style="list-style-type: none"> <li>Women and children do not enjoy their rights</li> </ul>	<ul style="list-style-type: none"> <li>There is no enjoyment of rights</li> </ul>	<ul style="list-style-type: none"> <li>Rights are not obtained</li> </ul>	<ul style="list-style-type: none"> <li>No one is enjoying rights</li> </ul>	<ul style="list-style-type: none"> <li>Human rights are not observed at present</li> </ul>
Any awareness received on child rights	<ul style="list-style-type: none"> <li>Yes(Hargeis a)</li> <li>No (Erigavo)</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>	<ul style="list-style-type: none"> <li>Yes</li> </ul>
Sources of info/awareness received	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> <li>Public awareness</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>	<ul style="list-style-type: none"> <li>Radio</li> </ul>
Opinion on women and girls' right to enjoy HR	<ul style="list-style-type: none"> <li>It is good that boys and</li> </ul>	<ul style="list-style-type: none"> <li>It would be good to have equal</li> </ul>	<ul style="list-style-type: none"> <li>It would be good but</li> </ul>	<ul style="list-style-type: none"> <li>It would be if compatible with</li> </ul>	<ul style="list-style-type: none"> <li>It would be good</li> <li>According to</li> </ul>

equally	girls be equal	rights Women and children can have equal rights if men allow	Somali men will not allow it	religion	religion
Best channel to reach/aware people about rights	<ul style="list-style-type: none"> <li>▪ Mosque</li> <li>▪ Radio</li> <li>▪ Teashop</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Mosque</li> <li>▪ Teashop</li> <li>▪ Awareness raising</li> </ul>	<ul style="list-style-type: none"> <li>▪ Religious leader</li> <li>▪ Public awareness</li> <li>▪ Radio</li> <li>▪ Mosque</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Awareness</li> <li>▪ Teashop</li> <li>▪ Mosque</li> </ul>	<ul style="list-style-type: none"> <li>▪ Religious leader</li> <li>▪ Mosque</li> <li>▪ Public awareness</li> </ul>
<b>NW-Nomadic</b>					
Perception on child rights, women's rights, HR	<ul style="list-style-type: none"> <li>▪ Islam has given different rights to women, children, and men</li> </ul>	<ul style="list-style-type: none"> <li>▪ Everyone has rights which should be respected</li> <li>▪ Children should be given everything they require to grow</li> </ul>	<ul style="list-style-type: none"> <li>▪ Everyone has rights which he/she should enjoy</li> <li>▪ Children have right to brought up properly</li> </ul>	<ul style="list-style-type: none"> <li>▪ Islam has clear stand on human rights</li> <li>▪ Human rights consist respect to each other</li> </ul>	<ul style="list-style-type: none"> <li>▪ Islam has give certain right to everyone that should be respected</li> </ul>
Enjoyment of perceived rights	<ul style="list-style-type: none"> <li>▪ Yes</li> <li>▪ Do not know</li> </ul>	<ul style="list-style-type: none"> <li>▪ For children every parent tries</li> <li>▪ All are not enjoyed</li> </ul>	<ul style="list-style-type: none"> <li>▪ No rights are not enjoyed</li> </ul>	<ul style="list-style-type: none"> <li>▪ Yes (few)</li> <li>▪ No (many)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Those prescribed by religion is enjoyed</li> </ul>
Any awareness received on rights	<ul style="list-style-type: none"> <li>▪ Yes</li> </ul>	<ul style="list-style-type: none"> <li>▪ Yes</li> </ul>	<ul style="list-style-type: none"> <li>▪ Yes</li> </ul>	<ul style="list-style-type: none"> <li>▪ Yes</li> </ul>	<ul style="list-style-type: none"> <li>▪ Yes</li> </ul>
Sources of info/awareness received	<ul style="list-style-type: none"> <li>▪ Religion</li> </ul>	<ul style="list-style-type: none"> <li>▪ Religion</li> </ul>	<ul style="list-style-type: none"> <li>▪ Religion</li> <li>▪ Radio</li> <li>▪ Teacher</li> </ul>	<ul style="list-style-type: none"> <li>▪ Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Religion</li> </ul>
Opinion on women and girls' right to enjoy HR equally	<ul style="list-style-type: none"> <li>▪ Men and women are not equal</li> <li>▪ Women receive half of what men receive in inheritance</li> </ul>	<ul style="list-style-type: none"> <li>▪ Men and women are not made equal</li> <li>▪ They have separate rights</li> </ul>	<ul style="list-style-type: none"> <li>▪ Women and men have different rights</li> <li>▪ Women should learn their rights under religion then only we can talk</li> </ul>	<ul style="list-style-type: none"> <li>▪ All human have equal rights which should be respected and practiced</li> </ul>	<ul style="list-style-type: none"> <li>▪ Prescribed under religion is acceptable</li> </ul>
Best channel to reach/aware people about rights	<ul style="list-style-type: none"> <li>▪ Mosque</li> </ul>	<ul style="list-style-type: none"> <li>▪ Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>▪ Radio</li> <li>▪ Religious leader</li> </ul>	<ul style="list-style-type: none"> <li>▪ Mosque</li> <li>▪ Religious leader</li> <li>▪ Community meeting</li> </ul>	<ul style="list-style-type: none"> <li>▪ Religious leader</li> <li>▪ School</li> </ul>

### 5.9.1. Perception on child rights, women's rights, and human rights:

#### ▪ Elderly Women:

Most of the elderly women in the NE reported that they do not know much about human right. Some of them mentioned that to have water, health, and security is their human rights. Some others talked about child rights and mentioned that breast-feeding is part of the child's right. Most of the rural elderly women closure to their urban age mates reported not having much knowledge about human rights. Although some of them mentioned that it is important to care human rights and there must be freedom of expression. The nomadic elderly women discussed more about the child rights than their own rights. They reported that to get education, given care, and cure from killer disease are the basic rights of children.

In the CSZ most of the urban and rural elderly women mentioned that all human being should have equal rights; women and children are the vulnerable groups and need more protection; and education, health, and care are basic rights of children. However, nomadic elderly women mentioned that right is something to be considered but they could not explain their perception well.

In the NW most of the elderly women mentioned that every human being has different rights provided by the Islam that has to be respected. They stated that the Islam has given different rights to women, children and men and every Muslim should respect each other's rights.

**The discussion signifies compared to elderly women of the NE, elderly women in the CSZ are more aware about human rights. the elderly women are not very much aware of women's rights but they are concerned to the children's rights. Compared to other zones awareness of the elderly women in the NW is based on the teachings of the Islam, which instruct to respect each other's rights.**

▪ **Adult Women:**

In the NE most of the adult women in the urban areas reported that it would be good if every one can enjoy his/her rights. Some mentioned that rights start from the family and to be breast feed is the right of a child. The rural women with more assertive opinion mentioned that rights of human being should be respected specially, women and children's rights. If rights are missed there will be no life. The nomadic women opined that to safeguard children, women and all human being is the basic right and it is good to protect every body's rights.

In the CSZ, the urban and rural adult women expressed that human rights are not respected in Somalia. The Civil war has caused lot of abuses, looting, killing, and raping. At present even if the conflict situation is not as intensive as in the past but still women are being raped on the street by bandits. They strongly mentioned that to have food, shelter, security and peace, and freedom are the basic rights of every body that can be achieved when there is a state. However the nomadic women just mentioned it is good to hear.

In the NW most of the adult women reported that right of human being is important and should be respected. Children have rights to education, health, and protection, and they should be given everything required to grow healthy. While some others mentioned that they do not know even if they have rights and nobody cares for women and children's rights.

**The response indicates that compared to the elderly women, the adult women have more assertive perceptions on rights and are concerned for all human rights.**

▪ **Youth Girls:**

The young girls of the NE in all population settings expressed similar perception like the adult women, that all human rights, children and women's rights should be respected; and women's rights are those mentioned in the *Qur'an*. Some of the nomadic girls mentioned that all human rights should be protected but children and women's rights need more attention.

In the CSZ, the urban and rural girls have more clear perception about rights than the nomadic girls do. The urban and rural girls mentioned that every body should have the entitled rights, everybody has duty to respect rights of each other, and women and children's rights need more protection.

Contrary the adult women the young girls of NW reported that the Islam has given separate rights for men, women, and children and everyone has to respect those rights. Children have right to good care, health and education, and women should be given their rights by men.

Discussion indicates that young girls in the NW have the perception that men are the holders of rights and they have to give it to women. This perception is misunderstood and limited by the Islamic rule to have dower, which men are supposed to fix at the time of marriage and women have right to ask for it if divorced.

▪ **Youth Boys:**

Most of the boys groups in the NE reported that everybody should have equal rights. Some of them mentioned that rights should be followed according to the religion.

In the CSZ, the young boys from the urban and rural areas reported that everybody should have equal rights. To have education, care, protection, and development are right of children and women should be respected not abused, their workload should be shared and reduced. But most of the nomadic boys mentioned they do not know anything about rights. Some of them said that *they are looking after the cattle day and nights so do not know what rights are.*

The young boys of the NW mentioned that rights are perceived from Islamic point of view that to be in peace and respect to each other is basis of rights. Some of the rural boys said that to have freedom to express opinion is the basic human rights. Some others mentioned that the Islam is the only religion, which has given rights to human being. It prescribes that child should be brought up properly and taken care of from birth to adolescence.

▪ **Male:**

Men in the NE mentioned that everyone has to have right, especially women and children because they are the vulnerable groups in the community.

Almost all of the men groups in the CSZ mentioned that to have rights is important, it is essential for every body to live in peace and harmony; and education, peace, and security are basic rights of people.

In the NW most of the men mentioned rights of women and children could not be overlooked, that should be taken care of. The Islam has better perception of rights and has prescribed separately for man, women, and children.

### **5.9.2. Enjoyment of perceived rights:**

▪ **Elderly Women:**

All of the elderly women in all zones reported that they are not enjoying their rights. It is because of the missing central government and consequence of the civil war. To resume the violated rights of people neutral government has to work hard. While others expressed they even do not know what rights they are missing. Many of them think that they are enjoying whatever is given by the religion.

▪ **Adult Women:**

When asked about how far they enjoy their perceived rights, almost all of the adult women in all zones reported that they do not enjoy their rights. They are allowed only for those rights, which are mentioned in the religion. Some others mentioned that they even do not know what human right is and what rights are missing and are not achieved but that is common for every body in Somalia. Some women in the CSZ mentioned about the vulnerability of women at present situation, that men and women both were uprooted and displaced due to the civil war but the sufferings of women are countless because of the clan conflict, banditry and war lords. Some of the urban and rural women in the NW also expressed similar opinion that rights are neglected and abused and there is no enjoyment of rights.

**The discussion suggests that despite the assertive opinion on rights people are far behind to achieve them.**

▪ **Youth Girls:**

Alike their mothers and grandmothers young girls in all zones mentioned that they are not enjoying their rights. Economic problem is the main hindrance to enjoy rights, a person can talk about rights if only s/he has enough for daily life. Some of the nomadic girls mentioned that they are not missing human rights except the lack of central government.

**The response indicates that young girls somehow believe that if the economic condition is improved along with the central authority governing the country they will be able to enjoy their rights. It also indicates the deep sense of insecurity in lack of law and order.**

▪ **Youth Boys:**

Young boys in the NE mentioned that only those rights mentioned in the religion are enjoyable. Some of them said that all rights are not enjoyable while others stated that rights are not divided but people cannot enjoy them in lack of capacity.

All of the young boys in the CSZ opined that there is no proper enjoyment of rights. At present situation no one can enjoy his or her rights.

In the NW most of the young boys opined that children's rights are taken care as far as possible but others' rights are not enjoyed or achieved. Some of the nomadic boys said that they think they are enjoying their rights given by the Islam.

▪ **Male:**

Men in the NE reported that human rights at present could not be enjoyed in lack of order and stability and the government.

All of the men groups in the CSZ opined accordingly that due to the civil war, war lords, clan conflict, and lack of government people's rights are enormously violated. There is no enjoyment of rights.

In the NW many men opined that rights are not enjoyed at present while others expressed that those rights prescribed under the Islam are enjoyed.

**Discussion reveals that there is almost consensus that at present people are not enabled to enjoy their rights due to many reasons like lack of government, economic condition, ignorance and incapacity etc. However, generally it is perceived that rights under religion are enjoyable.**

### **5.9.3. Any awareness received on child rights:**

▪ **Elderly Women:**

In the NE most of the urban elderly women reported that they have not received any awareness on child rights. Only some of them mentioned they have heard about it. The elderly women in the rural and nomadic areas mentioned they received information from radio and religious leader talking about it. In the CSZ most of the elderly women responded positively that they have received awareness information on rights. Many of them reported that most of the information they have are related with childcare and role and duties of women under the religion.

In the NW most of the elderly women reported positively. However, most of their awareness information are based on religious teachings. Yet some of them mentioned that they received awareness messages about child rights.

▪ **Adult Women:**

All of the adult women in the NE reported positive that they are receiving the awareness information on child rights from different sources. In the CSZ also mostly the urban and rural women reported positive, however, the nomadic women reported negative.

Most of the adult women in the NW reported that they received awareness information on child rights is mostly based on the religion.

▪ **Youth Girls:**

The urban young girls in the NE reported that they have had received awareness information on child rights. Young girls of the CSZ reported mixed opinion. Many of the urban and rural girls have received the information, however, the nomadic girls have not received such information. Some of the urban girls mentioned that the Islam itself teaches to take care of children. Most of the young girls in the NW reported positively.

- **Youth Boys:**

Almost all of the boys groups in the NE and the NW responded positively that they have received awareness information.

Compared to girls, most of the urban and rural boys in the CSZ reported positive while nomadic boys mentioned they have not received any information on rights.

- **Male:**

Only the urban men groups reported positive while the rural and nomadic men reported that they have not received any awareness information. Some of them said that they have not received any information but they are aware that child needs care and protection.

Most of the men groups in the NW and the CSZ reported having received awareness information on child rights. Only some of the nomadic men in the CSZ responded negative.

#### **5.9.4. Sources of information/awareness received:**

- **Elderly Women:**

According to the elderly women of all zones radio, religion/religious leader, and the community leader were the sources from where they received information on rights issues.

- **Adult Women:**

All of the women groups in the NE reported that radio and fellow people are the sources of awareness information they are receiving. In the CSZ both urban and rural women mentioned religious leader, radio, and organizations as their sources of information. In the NW almost all of the women groups mentioned radio and religion as their sources of information.

- **Youth Girls:**

According to the young girls in urban area of the NE, radio, newspaper, and mosque were the sources for receiving information on rights. While nomadic girls mentioned community it self and the religious messages were their sources of information. In the CSZ, the urban and rural girls mentioned radio, religious leader, and religion as the sources of information on rights. Where as in the NW radio, religion, teacher, and public awareness were the sources of information for young girls.

- **Youth Boys:**

The urban boys in the NE mentioned radio, newspaper, and the mosque as their sources of information; the rural boys mentioned radio; and the nomadic boys mentioned religious message and the community as their sources of information.

Alike the female age mates the urban and rural boys of the CSZ also mentioned religion, religious leader, and radio as their sources of information. In the NW all of the boys groups mentioned radio, religion and religious leader as their sources of information.

- **Male:**

The urban men in the NE reported that religion talks about rights of people and now international agencies are talking a lot while rural men mentioned radio as their sources of information.

**Radio, religious leader, and teacher are the sources of information for men in the CSZ. Men in the NW also mentioned radio and religion as their sources of information.**

**The discussion explains that religion and religious teachings have direct impact on the perception of rights and are considered as one of the major source of information on rights. In fact many chapters of the Qura'n speaks about the rights and duties of men, women and children.**

### **5.9.5. Opinion on women and girls' right to enjoy human rights equally:**

#### **▪ Elderly Women:**

Most of the elderly women in the NE and the CSZ opined that women should have only those rights given by religion. Only some of them expressed that women and girls should be given equal rights as Islam gives rights to every body. The elderly women generally mentioned that the men and women are not made equal by religion, to accept equality among them is like being apart from the Allah. In the CSZ some of the elderly women mentioned that except the blood money (Diya) other rights should be equal.

In the NW, the urban and rural elderly women responded positively while nomadic elderly women expressed negatively that men and women are not made equal under religion as women receive only half of what men receive in inheritance.

#### **▪ Adult Women:**

Most of the adult women of all zones, in contrast to their perceptions mentioned that they do not want anything confronting with the religion. They stated that equal right will be good for women but within the limitations of the religion. Only some of the urban women in the CSZ mentioned that, man and woman are born similarly, however, the sufferings of women are countless. It is important to have equal rights for both. Some of the rural women in the NW mentioned that women could have equal right if only men allow for it.

#### **▪ Youth Girls:**

In the NE the young girls expressed mixed opinion. Many of the urban and nomadic girls opined that women and girls should have equal rights like the boys. However, some of them opined that men and women are not equal because the Allah has not made them equal, therefore, women can not have equal rights, but girls must have equal education opportunity. (*Rural girls' opinion is missing*).

Likewise in the NW and the CSZ also most of the young girls opined that men and women are not made equal under religion and to have equal rights as men is religiously wrong. Only few of the urban girls opined that everybody should have equal rights. Some others viewed that girls have equal rights of education under the religion and if each and every girl takes that opportunity they will be able to enjoy all rights equally. Some of the rural girls in the NW mentioned to have equal rights would be good but Somali men would not allow it. Where as many nomadic girls of the NW said that, ***women first need to learn what rights are under the religion then only they can talk about it.***

#### **▪ Youth Boys:**

Almost all of the boys groups in all zones contradicting to their perception expressed that women should have all those rights allowed and accepted by the religion. Some of the urban boys in the NW even mentioned that women are misled if they ask for equal rights as men. Only

some of the urban boys in the CSZ and some of the nomadic boys in the NW opined that men and women are equal and should have equal rights.

▪ **Male:**

All men groups in all zones opined accordingly that women are not equal under religion, their rights are separate under the Islam, and should have what ever is allowed by the religion. Some men in the CSZ said that women should not seek what they can not get. Some of the rural men in the CSZ even mentioned that they do not believe that women have equal rights as men. Some of the nomadic men said that *God has given certain rights to women, which are acceptable but we are not going to give anything more than that.*

**The opinion of the target groups clearly indicates that human right is perceived as something confronting with the religion rather than an inherent entitlement of every human being. And there is a hidden intimidation to speak about human rights specially, equal right of women, fearing to be imbued in unwanted disputes. On the other hand, among the entire target groups women's right is perceived as the possession of men, which they have to give and allow for.**

### **5.9.5. Preferred channel to reach/aware people about rights:**

▪ **Elderly Women:**

In the NE, the urban and rural elderly women commonly preferred radio to disseminate awareness information on rights and suggested adding mosque, community meeting and public talks on the issue. The nomadic elderly women preferred religious leader and community mobilization as the best channels to aware people on rights issue. In the CSZ, the urban elderly women preferred religious leader, radio, and Quranic School; the rural elderly women preferred government, mobile microphone, and radio; and the nomadic elderly women preferred mosque, radio, and awareness raising.

In the NW, the urban elderly women preferred radio, religious leader, and awareness education; the rural elderly women preferred mosque, radio, and teashop; and the nomadic elderly women preferred mosque for awareness raising.

▪ **Adult Women:**

The adult women in the NE and CSZ preferred group awareness, religious leader and mass media as the best channel to aware people about rights. the adult in the NW preferred radio, religious leader, mosque, teashop and awareness raising campaign as best channel to aware people about rights.

▪ **Youth Girls:**

Both the urban and nomadic girls in the NE preferred the mosque commonly to aware people about rights. Radio and newspaper are some other channels preferred by the urban girls while the nomadic girls added religious leader and the women's meeting in their preference. (*Rural girls' response is missing*)

In the CSZ, the urban girls preferred radio, Human Rights Organization, and frequent awareness meeting; the rural girls preferred radio and awareness meeting; and the nomadic girls preferred radio, religious leader, and mobile microphone.

Most of the girls groups in the NW preferred radio, religious leader, teashop, and awareness of community as best channels to inform people about rights.

- **Youth Boys:**

Radio and the mosque are the commonly preferred channels by the boys groups in the NE, in which the urban boys added newspaper, the rural boys added Quranic School, and the nomadic boys added community meeting.

In the CSZ, radio is commonly preferred channel by all boys groups in which the urban boys included TV, awareness raising and religious leader; the rural and nomadic boys included community meeting and the mosque.

In the NW, the urban boys preferred radio, religious leader, and public awareness; the rural boys preferred radio, awareness, teashop, and mosque; and the nomadic boys preferred mosque, religious leader, and community meeting.

- **Male:**

In the NE, the urban men preferred radio, newspaper, and community meeting; the rural men preferred radio and religious meeting; and the nomadic men preferred radio and teacher to receive awareness information on rights.

Radio, mosque, and awareness raising are the preferred channel of the urban men in the CSZ to receive information on rights issues; the rural and nomadic men preferred religious leader, teacher, radio and public awareness.

In the NW most of the men groups preferred religious leader, radio, and awareness campaign as best channels.

**The discussion shows the parity of sources of information and preferred channels on rights issues. Almost all of the target groups preferred radio, religious leader, mosque, and awareness raising meeting to receive information on rights issues. The entire target groups emphasized on awareness raising on rights in reference to the Islam.**

- **Main findings:**

- Perception of human rights is not very clear among the target groups. Only some of the urban and very few of the rural target groups are aware of basic rights in all zones. The nomadic population has negligible concept of rights.
- Compared to the NE target groups of the CSZ and NW are more assertive and aware about the rights.
- The civil war and the consequences of the war have been considered as the reasons for derogated situation of human rights.
- Most of the women target groups in all zones are not aware of their rights and even do not know if any rights are missing.
- Compared to other target group adult women are more assertive on the equal rights of women.
- Contradicting to the perception of rights most of the target groups are in view that women are not made equal by religion and are eligible for only those rights, which are allowed and accepted by religion. And to look for equality and equal rights for women is something contradicting with the religion.
- Religion and religious leader are the basic sources of information on rights issues. Islamic teachings and instructions on rights and duties of men and women are the foundation of conceptualization of rights.
- Women and children are considered as the most vulnerable groups and in need of enhanced protection of their rights.
- Almost all of the target groups preferred radio, religious leader, mosque, and awareness raising meeting to receive information on rights issues.

## ▪ **Recommendations:**

- Awareness raising information needs to be enhanced across the country highlighting compatibility of universal human rights and the Islamic protection, where ever is possible.
- Package of information should focus to enhance women's self-esteem.
- Rural and nomadic population should be targeted with appropriate information on rights.
- Religious institutions should strengthened with capacity and information on rights and mobilized for awareness raising on rights. Religious leaders have major role in dispute settlement related to family matters, their understanding of basic principles of human rights can play an effective role on realization of women and children's rights.
- Mass media should be adequately used for awareness raising and advocating human rights.

## **5.10. Key Informants:**

### **5.10.1. Community leader:**

Around 20 community leaders from all three-population settings were interviewed across the country distributing two in each cluster depending on the availability.

According to interviewed community leaders they have many responsibilities regarding the welfare of their community. For instance, to look after the security of people and peace keeping, development and other social welfare issues like health, water, sanitation, environment, education and dispute settlements etc. Most of the leaders reported that they meet three to four time in average in a month in normal situation.

The interview reveals that despite their extended roles and responsibilities community leaders are not strengthened accordingly with adequate information useful to bring changes in the social behavior.

Most of the community leaders reported radio as their only source of information. Apart from radio, religion, religious gathering, mosque and occasional participation in seminar/ workshops help them to enhance their knowledge.

In rural and nomadic areas community leaders have even more responsibilities as the local authority, however, compared to the urban areas their access and capacity is much more limited. They have to rely so much on the radio broadcasting for information. For instance, most of the leaders reported being heard about HIV/AIDS, but their knowledge compared to the knowledge of other target groups is not different or extended. Further, most of the leaders reported that they have not discussed yet the issue in the community meeting, because they think that they do not have adequate knowledge on the issue as people would believe on the information given in the meeting. On the other hand, regarding the FGM almost all of the community leaders reported the same information that there is confusing stories all around about the Sunni and pharaonic types of circumcision. Most of the community leaders supported the continuation of circumcision accepting the shift from pharaonic to Sunni as a change.

Response of the community leaders corresponds with the discussion with the target groups on health problems. Most of the community leaders reported that malaria, measles, TB, malnutrition, anemia and STDs as the most common diseases. They also mentioned that people in rural and nomadic areas are more vulnerable in lack of access to medical services. People are dying because they cannot afford and reach even the nearest town on time. Many villages have only the structure of health center but the professionals and medicines are not available. Therefore, people have to succumb to traditional healers or religious healers whether or not beneficial for their health.

In urban areas many community committees have women representation and some also have separate women committee to deal with women and children's issues and other social issues.

However, in most of the rural and nomadic areas women do not have any access to community meetings they are reached or informed through their husbands or messengers. Women rarely are called in the meetings, only if the specific decision has to be taken on women's issue. The response supports the findings of the study that men are one of the important channel for women to receive information and women have very limited access to information and decision making.

Security, health, water, and education are the most common issues that community leaders are concerned about. In nomadic areas except the Quranic learning, many children and youths are deprived of education and skill learning opportunity, therefore the leaders have helpless feeling in lack of resources, capacity, and knowledge support.

Regarding the girls education most of the community leaders feel that parents need to be mobilized, aware, and encouraged because due to economic crisis boys are preferred to send to the school. On the other hand, in nomadic areas non-existence of formal learning center is another drawback for encouragement of education.

Many community leaders reported that in lack of income generating activities, many youths in all settlements are wasting their time watching movies, which is helping to create an environment of frustration, anger, and violence in the society. (As reported by the video parlors youths mostly like the American and Japanese action movies).

Almost all of the community leaders suggested that radio, mobile microphone, mosque, teashop, and health post could be used for information dissemination. Non-of them recommended any channels of art forms like drama, dance, songs etc, or print media except newspaper by the negligible numbers. Messenger and local informer are the only sources used by community leaders to disseminate information in the rural and nomadic areas.

Most of the urban and rural community leaders did not see necessity of radio listening centers because Somalis have whole afternoon free to assemble in teashops or in Chat chewing places to hang around and listen radio. However, for youths a reading center or recreation center can provide lot of opportunities for learning and sharing creative information.

In essence community leaders are not targeted adequately in the educational and awareness information dissemination as an important stakeholder with extended responsibilities and strong decisive role in the community. Consequently, community leaders are not well equipped as well as are unable to provide concrete advice and guidance to their people despite the enormous faith of the people.

#### **5.10.2. Religious Leader:**

Around 20 religious leaders were interviewed across the country including all of the population settings.

Most of the religious leader informed that they are responsible to advice people on religious matter, treat the sick people, teach religion to people, look after the disputes of compensation, conflict resolution and peace, inheritance, marriage and divorce, and other family issues according to the Islamic law-Shari'a and the religion itself.

When asked about the follow up on their advice most of the religious leaders responded that they do not have any specific mechanism, however, after receiving the advice if the person does not come back for further inquiry it is believed that the advice has been implemented and did work. Sometimes people do come back to inform that advice was useful. Further, regular religious gathering also helps to follow up.

According to the religious leaders radio and newspaper are the most reliable channels to have information in urban areas. Many religious leaders of urban areas mentioned that apart from radio, audiocassettes of religious talk, speeches on religious interpretation from other countries, and books are also the major sources of their knowledge and information. Scholars from the Al-

Azhar university and other Arabian countries delivers their speech time to time, which are aired through radio and TV channel (Al-Zeria TV channel) or recorded in the audiocassettes. Above all the Holy Qura'n and the Hadith of the Prophet are the primary sources of information to deal with the problems of the people. Besides local Islamic learning centers and discussions of local Islamic scholars are also used.

In urban areas religious leaders use radio, newspaper, and religious gatherings to reach people while the rural and nomadic areas mosque, religious gathering or community meetings are the channels to disseminate information. In rural and nomadic areas local messenger also plays a major role to disseminate local information to people.

Most of the religious leaders accepted that apart from religion other important issues related with social welfare and permitted by the religion could be discussed in the mosque specially in Friday lectures and most of them are already doing so. However, in rural and nomadic areas only few of the religious leaders reported positively and mentioned that they organize separate gathering to discuss other issues, notwithstanding the high appreciation and faith of people on the information given from the mosque.

According to the religious leaders radio, newspaper, mobile microphone, mosque, and gatherings are the most suitable channels to communicate information for the betterment of people.

The response reveals that religious leaders have enormous responsibilities of justice, law enforcement, health and religious teachings under which apart from healing the sickness of people they are the entity to deal with the rights of people through religion and the Islamic law. Many times religious leaders are the most difficult entity to convince on necessary change ought to bring in the society, yet their powerful and confided hold in the society need to be used to mobilize people for positive behavior change.

The study has emphasized that religious leaders if well informed, aware and mobilized could strongly convince and help people to enhance their knowledge and to bring changes in negative attitude and behavior.

### **5.11.3. Local NGO/CBOs:**

Total 25 local NGOs and CBOs were interviewed across the country. See Annex... for names, contact person and location.

According to the interviewed local NGOs and CBOs they have been covering varieties of agenda and activities. From health to education, awareness raising to capacity building, income generation to empowerment, sanitation to environment, issues of women and children, farmers, and other vulnerable groups to security and peace are covered under their mandate and activities.

Most of them are established after 1991 and are supported by INGOs. Very few have self-resources to sustain. Most of them are under resource both by human and financial. Many are based at urban areas and their reach and access to rural and nomadic areas are too limited. Those, which are community based, have limited activities due to limited capacity and resources.

Radio, INGOs, Civil society, workshop participation, and network with other organizations and with Somalis in Diaspora are the sources of their information. Very few have own channels to disseminate information to the people. Those who have capacity are using newsletter, posters, awareness campaign, and local newspaper to inform/aware people. Others are using local radio, mobile microphone, mosque, and religious leader also.

Some which are based in urban areas responded that they produce reading materials on role of women in social development, entertaining educational programs and other social/ cultural issues like FGM etc., with the help of INGOs. However, the dissemination is very limited.

Messages related with health and sanitation, mother and child health, security and peace, encouragement to drop the gun and hold the pen, and educational and awareness raising are the type of messages and information mostly disseminated by the local NGOs.

Radio, mobile microphone, seminar, public meetings are the suggested channels to reach the people. Some others have suggested that both audio and visual channels need to be strengthened and utilized. Negligible number of NGOs mentioned traditional art forms like drama, and dance etc., because of the cost, skill, and access to the target groups.

The interview makes it clear that, despite their gigantic numbers, local NGOs, have not reached yet to the community and household with intensive educational and awareness messages addressing the practices in need of change.

Realizing the close connection of NGOs with the community, NGOs need support with package of appropriate information, capacity to produce appropriate information for their target groups, and support for the wide dissemination of the information. However, it cannot be denied that many of them have yet to gain confidence of the target groups and the community.

#### **5.11.4. Mass Media:**

##### **□ Radio:**

Total four local radios were interviewed which are; Radio- Hargeisa, Voice of People-CSZ, Radio-Benadir, and Radio-Baidoa,

According to them international news agencies and channels are being used for news purpose. All of the interviewed radios reported that they do cover many social, cultural, and religious issues. Most of them have weekly programs for women and children covering health, education, rights, female circumcision etc., as well as they do cover the local events. Correspondents in the region, NGOs, civil society and individual scholars are the sources of information on various social, cultural and development issues.

Most of them claimed 80 to 90 percent of the population as their audience in their respective regions.

##### **□ Newspaper:**

Total seven local newspapers were interviewed, two in the NE (Kaaha Bari and Sahan), two in the NW (Jamuuriya and Maandeeq), and three in the CSZ (Equator Star, Panorama, and Qaran Press). Among the interviewed newspapers except two newspapers of the NW others were weekly. Around 1000 to 1500 copies are published which never came back unsold.

All of the newspapers reported that they cover social, cultural, religious, sports etc., apart from news and current affairs. Most of them have space for women and children's issues. Health, education, female circumcision, HIV/AIDs, and human rights are the issues generally covered. Some of them have column for reader's views, which provides the newspaper an opportunity to assess the popularity of the message and information.

Most of the newspapers viewed that mass media can better perform the awareness raising if the journalist and reporter are well trained and the collaboration and networking with the national and international agencies working for Somalia is strengthened.

##### **□ Video parlors:**

Around 20 video parlors were interviewed across the country including rural and nomadic areas. Around 50 to 100 people watch their programs daily and the parlors operates around six hours daily from afternoon to late evening round the week, and their audience range from seven years old to fifty years old.

According to the video parlors youths and men from 15 to 35 age groups like American and Japanese action movies, and sports channels from satellite programs. While children and female viewers like Indian movies of love stories, which are dubbed in Somali language and songs.

Most of the parlors are interested to show educational videos if made available. Some of them even mentioned that sometime students come to their parlor with such videocassette and request to show them.

When asked about the reasons for wide popularity of the parlors most of them mentioned that it is the cheapest and only means of entertainment.

