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**THE EFFECT OF MUSLIM AID UK PRACTICES ON THE BASIC HEALTH SERVICE
DELIVERY IN KISMAYO DISTRICT-SOMALIA**

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ABSTRACT

The study investigated the effect of Muslim Aid UK practices on the basic health service delivery in Kismayo-Somalia. The objectives of the study were to assess the effect of child health care services provided by Muslim Aid UK on the basic health service delivery in Kismayo, to examine effect of maternal services provided by Muslim Aid UK on the basic health service delivery in Kismayo, and also to find out effect of immunization services provided by Muslim Aid UK on the basic health service delivery in Kismayo. The study adopted a correlation design and both quantitative and qualitative approaches were used. Samples of 175 respondents were got in touch with and all of them filled the questionnaires. Purposive and simple random sampling techniques were used. Questionnaires and interviews were used to collect data. Data was coded and analyzed using the Statistical Package for Social Sciences (SPSS). As regards the effect of Muslim Aid UK practices on the basic health service delivery in Kismayo, the findings generally revealed that child health care services are the stand alone predictors of basic health services in Kismayo. The relationship between the variables is 99.6%. The effect of child health care services provided by Muslim Aid UK on the basic health service delivery in Kismayo is 99.1% on the sample. When generalized to population, this effect is 99.1%. However, the significance of the child health care services provided by Muslim Aid UK on the basic health service delivery in Kismayo is very high at 100%. The other predictors of Muslim Aid UK activities that is maternal services and immunization services are excluded. Immunization services can only predict basic health service delivery when combined with child health care services. Recommendations of the study were that advocating for medium and long-term projects that address the child mortality rate in Kismayo district. Advocating for birth-spacing and promote family planning, promoting appropriate breast-feeding practices to the broader public, using all possible channels, exclusive breast feeding up to six month of age followed by appropriate complementary feeding. Improving service delivery of maternal and obstetric care, both primary and secondary levels. All children should be up-to-date in their immunization and any adult who never completed the initial series of immunization should do so before departure.