

SOMALI CULTURE AND HEALTH/DISABILITY PERCEPTIONS

- **Africa**

Africa: - is the second-largest of the seven continents on Earth (Asia is the largest continent). Africa is bounded by the Atlantic Ocean on the west, the Indian Ocean on the east, the Mediterranean Sea on the north, and the Red Sea on the northeast.

Africa covers 11,700,000 square miles (30,300,000 square kilometers).

Countries: There are about 53 countries in Africa (some countries are disputed). The biggest country in Africa is Sudan, which covers 967,500 square miles (2,505,816 square kilometers). The countries with the largest populations in Africa are Nigeria (107,000,000 people), Egypt (64,800,000 people), and Ethiopia (58,700,000 people).

- **Horn of Africa**

Horn of Africa countries are Somalia, Djibouti, Eritrea and Ethiopia. The population of these countries is about 78 million. The word horn is originated from the figure seven look like of the map of Somalia, which is located on the East of Africa. The culture and languages of those countries are different, and also socio-economic.

The difference between the Somali and Eritrea people.

When the civil war took place in Somalia at the end 1990, at the initial stage, the war was between the government troops and armed rebels. When the president ousted, the war changed into inter clan fighting.

The Somalis were fighting among themselves, a clan against clan, and each clan have their own armed militia and control certain territory of the country. The government structure collapsed and many people were either killed or maimed and others became refugees in the neighbour countries, Kenya, Ethiopia, Djibouti, Uganda, and Tanzania. In the refugee camps there is no adequate social infrastructure. Most of the children were either stayed at their refugee shelters or roamed and played in the dusty streets or open areas of the camps.

The Eritrea people were fighting against Ethiopian regimes in more than 30 years for impendence. During this period of war many families fled from the country and went to Sudan and Egypt and other countries. Even though they were refugees in these countries, their children got the opportunity to enrol schools and became familiar with education

system. The people from Eritrea before arriving in Australia, they lived in cities, where there was at least social infrastructure and other amenities.

- **Somalia**

Somalia is located in eastern/ horn of Africa, with a population of about 8.8 million bounded on the north by gulf of Aden, on the east and south by Indian ocean, on the south west by Kenya, on the west by Ethiopia, and on the north west by Djibouti. The total area 637,657 sq km. The capital city of Somalia is Mogadishu. Somalia was colonized by Italian on the south and British on the north.

Somalia became independent 1960. From 1960-1969 Somalia was run by the civilian government and from 1969-1990 under military rule.

Education in Somalia before civil war

Until civil war broke out in the early 1990s, education was free and compulsory for children between the ages of 6 and 14. The literacy rate increased from about 5 per cent in the early 1970's to 60 percent in the mid- 1980's following an intensive government-sponsored literacy campaign. In the mid-1980s elementary schools had about 274,600 pupils, general secondary schools had 65,200 students, and vocational and teacher-training institution 10,200.

- **Somalia and Somalis after the civil war**

As result of the war, the Somali government and also the social infrastructure are totally collapsed. The educational system has collapsed and most schools have been closed, including the Somali National University (1954) in Mogadishu, which previously had an enrolment of about 4,600.

Somalia has produced one of the greatest outflows of refugees between 1988 and 1995. Since the 1980s, when opposition groups began to rebel against the Mohamed Siad Barre regime more than one million Somalis were forced to flee their homeland.

During the period (1991-1995) more than 1 million refugees fled from the war and took refuge in the neighboring countries, mainly Kenya, Ethiopia, Djibouti and the republic of Yemen.

In Kenya alone, approximately 500,000 refugees swarmed in refugees' camps, and thousands were internally displaced within Somalia. Ten of thousands resettled in third countries, mainly in United States, Canada, Western Europe, Australia and New Zealand.

Even though, a Somali government is formed in August 2004, still there is no visible sign of national unity. Security conditions varied enormously in different regions of Somalia. Violence and general insecurity prevails in some areas of the country. The absence of the clear and strong central government in Somalia continues to impede efforts to find long-term solutions for Somali refugees.

- **Somalis in Australia/Victoria**

After living for several years in refugee camps in Kenya, Ethiopia and other African countries, some Somalis were admitted to Australia as refugees. Somalis are among the largest African communities in Victoria.

Africa has provided the lowest number of immigrants to this country. For this reason Africans are not clearly understood and has unfortunately led to poor understanding of the African immigrant social dynamics. Among these misconstrued African immigrants are Somalis.

Somalis in Victoria share many of the same problems as other immigrants, such as learning new language, finding work, adjusting to new environment and culture, and adapting to the Australian system. But they have also had to face many other cultural barriers and have not been confronted by other refugees, particularly non-Muslims.

Somalis in Victoria (Australia) face many problems, and among the major pressing problem include: - cultural shock, language barrier, housing, education, unemployment, immigration, adjustment into a new life, discrimination, unfamiliarity with the services available to them, and other unexpected social and cultural problems.

Education: - Education related difficulties are a topic brings up by Somali parents and intellectuals. In general, it was felt that Somali students are at disadvantage in an education system, which does not take their background into account when placement decisions.

- Some children receiving little or no schooling before their arrival in Australia.
- Child's date of birth is often approximated.
- Many parents are unable to offer the educational support to their children and youth need as they baffled by the Australia education system.
- Many students do not get support from their schools.
- Lack of education facilities/materials at home.
- Lack of back ground information to the school staff.
- Lack of parent involvement in the school activities, etc.

Discrimination

Many Somalis believed that when they arrive in Australia that they are not any more refugees, but now even though they became Australian citizens they still holding the same name "refugees" when they were in the refugee camps in Kenya or Ethiopia, and most the governmental and non-governmental agencies or institutions treat the Somalis as refugees, not as citizens of this country. Only the conditions of living area have changed. We believe that in Australia the living standard is very good and enjoy secure

environment, whereas the conditions of the refugee camps in Kenya or Ethiopia were inhabitable and less secure environment and unstable.

- **Somali culture**

Religion

Somalis almost universally can be categorized by their strong adherence to Islam, the Sunni sect in particular. Accordingly, the Islam religion shapes many aspects of Somali culture. For example, there is strict separation of the sexes, and women, including sometimes prepubescent girls, are expected to cover their bodies, including hair, when in public; facial veiling is uncommon in Australia

Handshakes are appropriate only between men or between women. The right hand is considered clean, and is used for eating, handshaking, and the like; children are taught early to use only their left hand for hygiene during toilet training. Muslims prefer to wash with poured water after a bowel movement. Ritual cleaning of the body or ablution, especially before prayers, is dictated by Islam

Birthdays are not particularly celebrated by Somalis, and it is not uncommon for people to not know the exact date of their birth. At the time of immigration, birthdays are typically rounded off to the nearest year, e.g. 1-1-98, 12-31-62, etc. Alternatively, the anniversary of family members' deaths are observed and celebrated.

Somali families are typically large; seven or eight children are considered ideal. Contraception, and similarly, abortion, is anathema to most Somalis, given the strong Muslim belief that pregnancy is a blessing from God and should not be interfered with. Even sexing of the fetus is not encouraged, as it is God's will and cannot be changed. Prenatal care is sought by refugee Somali women here, although there is a marked preference for female examiners and interpreters. Most women fear Caesarean section delivery, as it is thought that the surgery may impede subsequent pregnancies and render to postpartum mother infirm.

Gender role: - The father is considered as the head of the family and bread winner of the family, while the mother is the care taker of the children and responsible domestic affairs of the house. Female children play vital role in helping their mother in home related tasks.

Language

The Somali language has distinct regional variants. The two main variants are *Af Maay* (pronounced *af my*) and *Af Maxaa* (roughly pronounced *af mahaa*). Both are Cushitic,

with virtually all Somalis speaking at least one of these languages. Af Maay, also known as *Maay Maay*, serves as the lingua franca in southern Somalia as an agropastoral language while Af Maxaa is spoken throughout the rest of Somalia and in neighboring countries, including Kenya, where the refugee camps are located.

Both languages served as official languages until 1972 when the government determined that Af Maxaa would be the official written language in Somalia.

The constitution of the recently formed federal government states that both languages (Maay and Maxaa) are official Somalia languages.

- **Disability**

As a Somali, when we talk about disability, it clicks in our mind only **mobility disability**, although there are many types of disability, such as Hearing disability, intellectual disability, Learning disability, Vision disability, Psychiatric disability, and brain injury disability.

In Somalia there is no health institution or agency that is involved or provides services related to disability. In addition to this there is no modern or Western child care centres or kinder gardens. We do have similar institutions, but we don't nominate these names. Children at early stages of their age (2-3 yrs old) are placed in informal education institution, which is locally called **DUGSI**, means school, where children are taught how to read and write the Holy Koran, in an Arabic script. Such institution is usually owned and administered by private individuals. The moalim (teacher) of the dugsi or school is usually identifies if a child has speech difficulties or learning.

- **Culture and health/disability perceptions**

Causes and beliefs of disability:- heredity, food (liver), evil-eye, evil-word, visiting evil's shelters (rubbish disposal sites), etc.

Most of the Somalis do believe that disability is natural cause or heredity. Many Somalis also believe that when a child at his/her early stage of age eaten liver and this could result in speech difficulties or retardation of the speech of the child. An enormous number of people also consider that disability can be resulted from man who possesses and evil-eye/evil-word. When such person stares to a child, and there after this child could develop certain type of disease that eventually might turn onto a disability. Certain people deem that any person (child/adult) who passes the location where the rubbish is collected could be affected by a devil, and this person might become sick and then could become disabling.

Viewing disability:- Many people view disability as a blessing from Allah (God), punishment from Allah (God), and protection of the people, etc.

Many people believe that natural disability is a will of Allah (God) and should consider as a blessing and should be appreciated what ever Allah offered you.

On the other hand, some people believe that disability of a child is considered as a punishment from Allah (God) to a parent who committed a crime, such as adultery or

faithlessness a husband to his wife. Other people believe that disability of a person is a kind of a protection from Allah (God) to his community. It's considered that Allah made purposely disable (one eye or lame person) to such person, so that he/she won't or couldn't harm severely to his people.

Treatment/cure of disability:- Prayer, Koranic, herbal remedies and honey, fire burning, spiritual healing, etc.

Traditional Medical Practices: - There are traditional medical practitioners in Somalia, especially herbalists, bone-setters and religious practitioners. Herbal medicines (Habatu sowda) and honey are widely used in Somalia, especially for chest and abdominal symptoms; the herbal pharmacopoeia is vast, and some recipes are closely guarded by practitioners. Healers treat psychosomatic disorders, sexually transmitted diseases, respiratory and digestive diseases, and snake and other reptile bites. Another common practice is termed "fire-burning," where a special stick or a nail is burned and then applied to the skin. For example, a child with an abnormal head is burned at the front side of the head. Concepts involving spirits, such as "evil-eye," where excessive praise or attention can attract evil spirits to an infant or child, can be viewed as causing illness. Ritualized dancing is used mostly for psychosomatic disorders, and Koran cures as well. There is understanding about the communicability of some diseases, such as tuberculosis and leprosy, and isolation is sometimes performed.

Please be informed that most the traditional medical practices which are mentioned above are not practically exercised or performed in Australia.

- **Disability and the Somali community in Australia**

In Australia, most of the Somalis have less idea or not familiar with disability and services available to disable people or children, and therefore, we are not in a position to look for the services that we are not very familia with it.

Some members of the community consider or believe as **taboo** for intellectual and speech disability; therefore they are reluctant to speak this issue openly to other people, especially to outsiders.

- **Recommendations/Strategies to overcome these problems**

- **Conducting a community study for new arrivals in Australia**
- **Community education**
- **Support and building up family knowledge**
- **Reviewing the existing policies/office procedures**
- **Holding information sessions**
- **Providing reliable information to refugees / migrants before departure / after arrival in Australia.**
- **Deep understanding about the backgrounds of new arrivals.**
- **Reviewing education age policy for new arrivals.**
- **Employment of bilingual workers/ aid teachers.**

- **Encouragement for the community in participation in the development of public health plans.**
- **Introduction of family literacy programs to new emerging groups.**

- **Contacts of some African/Somali organizations and workers**
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