



Photo: IOM/ Rika Tupaz 2021

Somalia

Country Fact Sheet 2025

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For further information on voluntary return and reintegration, please visit the information portal www.ReturningfromGermany.de, or contact your local return and reintegration office.

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1 Health Care

General information on health care

The public healthcare sector in Somalia is fragmented, under-resourced, relies heavily on international aid and NGOs, and faces significant shortages of qualified health professionals. Many public facilities, especially in rural areas, are non-functional or lack essential resources, making access to care difficult for much of the population.

The private healthcare sector is more active in urban centers, with private hospitals and clinics offering better quality services, but at a high cost that is unaffordable for most people. Regulation is limited, leading to variability in service quality, and most citizens remain uninsured, paying out-of-pocket for both public and private care. However, certain conditions (e.g., cancer) are not fully treatable in-country; patients often travel abroad if they can afford it.

Somalia does not have a formal public health insurance system. Healthcare expenses are predominantly paid out-of-pocket, with the public sector relying heavily on international aid and NGOs to deliver essential services. Many public health facilities, especially in rural areas, are non-functional or under-resourced, and there is a significant shortage of qualified health professionals.

Private health insurance is limited. A small number of Islamic insurance providers, such as Amanah Islamic Insurance and Takaful Insurance of Africa, offer basic medical coverage, including outpatient and specialist care. However, coverage is not comprehensive, and most people

still pay for health services out-of-pocket while majority of the citizens remain uninsured.

Availability of medical facilities and doctors

Medical facilities and healthcare professionals in Somalia are predominantly concentrated in urban centers, particularly in Mogadishu, where both public and private hospitals operate. However, access to these services remains limited and prohibitively expensive for a significant portion of the population. In rural areas, healthcare services are extremely scarce, with only a few functional clinics and a pronounced shortage of qualified medical personnel. Consequently, most individuals in these regions must rely on basic community health workers or mobile clinics. Overall, the quality and availability of healthcare services vary considerably across the country.

Admission to medical facilities

Since there is no public health insurance in Somalia and healthcare is paid out-of-pocket, patients have the freedom to choose their preferred facility—whether a primary health care center, a public hospital, or a private specialist hospital. To access medical care, individuals simply visit the facility of their choice, pay the service fee, and consult a doctor. For children under five, doctors may request a vaccination certificate, though its absence does not prevent access to health services.

1 Health Care

Availability and costs of medication

Medication availability in Somalia is highly variable, with essential drugs more accessible in urban centers like Mogadishu, while rural and conflict-affected areas frequently experience shortages and stock-outs; specialized treatments such as chemotherapy and some chronic disease medications are often unavailable. Most medicines must be purchased out-of-pocket at private pharmacies, as there is no public health insurance or universal coverage, and prices are unregulated—common medications like insulin, metformin, and amlodipine typically cost between \$4 and \$15 per box, but prices can vary widely by location and pharmacy. Regulatory oversight is improving with the establishment of the National Medicines Regulatory Authority, but

many pharmacies still operate without licenses, and patients remain responsible for all medication costs, making affordability and access persistent challenges.

Access for returnees

Registration procedure: Private and public medical treatments are available although most of the health care system in Somalia is private. General hospitals have longer waiting times due to high patient volumes and limited resources. Patients may wait several hours, especially in emergency departments.

Required documents: For medical treatment in public hospitals patients provide personal details (e.g., name, age, medical history). Patients can either walk in or schedule an appointment, depending on the facility's policies.



Photo: IOM/ Foresight film 2020

2 Labour Market

General information on labour market

Somalia's labor market is dominated by informal employment, agriculture, live-stock, and trade. Youth unemployment remains high. Especially among urban populations. The average monthly income ranges from USD 100 to USD 200, depending on sector and region. Here Somalia we have small construction, telecommunication, transport, and small-scale manufacturing.

Finding employment

Finding employment in Somalia can be challenging due to the country's unique economic and so-cio-political context. However, certain job fields are more promising due to ongoing economic activities and development efforts.

1- Farming, livestock herding, agricultural extension services, agro-processing, and irrigation management. Average salary-200\$-500\$

2- Retail management, small business ownership, sales, logistics, and supply chain management. retail managers and logistics coordinators might earn between \$300 and \$600 per month. Small business owners' earnings can fluctuate widely based on business success.

3- IT support, network administration, software development, telecommunications, and digital service. Average salary- 400\$-1000\$ depending on the experience and role.

4- Medical practitioners, nurses, pharmacists, and health administrators. Doctors might earn between \$500 and \$1,200 per month, while nurses and pharmacists generally earn between \$300

and \$600 per month.

5- Taxi and Tuktuk Drivers earn \$250 to \$300 per month, through private companies

Unemployment assistance

Unemployment assistance in Somalia is currently limited and primarily reliant on informal support and humanitarian aid. There is no formal, nationwide unemployment benefits system.

Further education and training

Vocational centers in major towns (e.g., Mogadishu, Hargeisa, Garowe, Bosaso) offer short courses in tailoring, IT, mechanics, but most of the institutions are private.

Access for returnees

Eligibility and requirements: Required documents:

- ID or passport (sometimes none).
- CV
- Relevant certificates (degree, master's)
- TVIT certificate (such as carpentry, tailoring, home electric installation)

2 Labour Market



Photo: IOM Claudia Rossel 2022

3 Housing

General information on housing

Generally, private houses are available for rent and only accessible in the main cities. There is a massive rural-urban migration which exceeds the capacity of the current houses dedicated for renting. There are no public housing system. Accommodation facilities including hotels are available in main cities with higher fees.

Housing in Somalia varies widely by location. In urban areas, average rent for a one-bedroom apartment ranges from USD 100–150 per month. Utilities (electricity, water) can cost around USD 50–100 monthly. Housing demand is high in urban centers due to population growth and internal displacement.

Finding accommodation

Returnees can find housing through local brokers, social networks, or community elders. There are real estate companies that provide accommodation. National ID card and Passport is required. If the returnee wants to buy or rent a house, he must enter legal notary agreement with the real estate or landlord- in some cases, tenants will be asked to provide a guarantor. It is also quite common for landlords to request that tenants have to pay 2 to 3 months of advance payment of the rent.

Small apartment in the city: 300\$-600\$

Small apartment outside of the city: 150\$- 200\$

Temporary accommodation

There are hotels and apartments that provide accommodation services 24/7. There is no free shelter provided by government in Somalia. All the hotels and apartments are privately run, and the price depends on where it is located. Specifically, In Mogadishu we have a temporary shelter for returnees, but IOM pays service fees based on the number of beneficiaries accommodated. According to the current practice and based on availability of resources, returnees can stay in center maximum three night or until their tickets for onward transportation are available. Returnees with certain vulnerabilities including medical, psychosocial or are waiting for family tracing can stay in the center a little longer until their vulnerabilities are addressed. In other regions there is no temporary shelters available.

Shelters for returnees in Somalia can range from transitional and emergency shelters provided by NGOs and humanitarian organizations to community-based solutions and rental accommodations in local markets. While there are various forms of support available, challenges such as infrastructure limitations, security concerns, and economic constraints can impact the availability and quality of housing for returnees. International aid and government initiatives play crucial roles in addressing these needs and supporting returnees as they reintegrate into their communities.

3 Housing

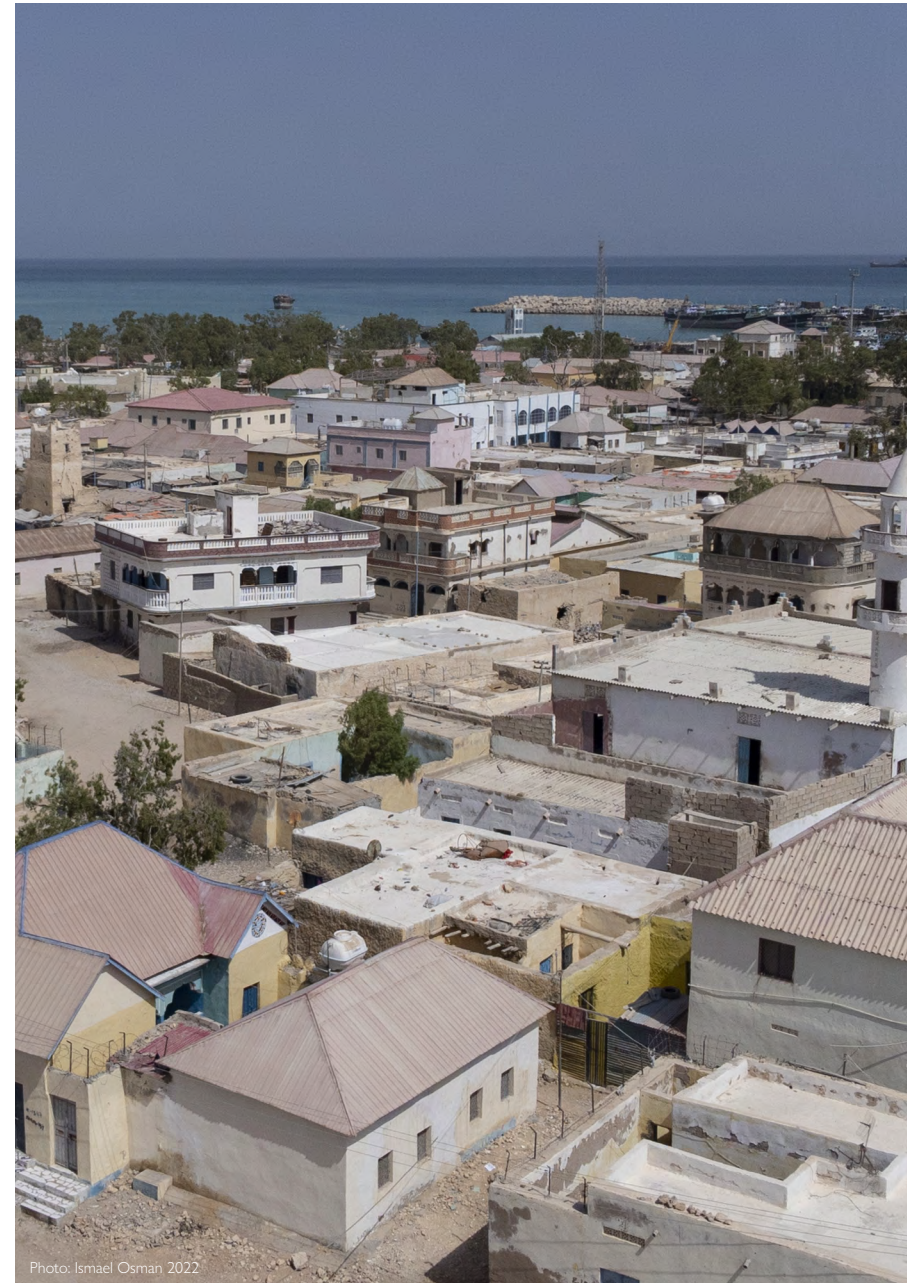


Photo: Ismael Osman 2022

4 Social Welfare

Social welfare system

Somalia does not have a formal national welfare system. Social support relies heavily on family networks.

Pension System

Somalia does not have a formal, nationwide pension system. There is no comprehensive public pension scheme covering all workers, which means that many individuals do not have access to structured retirement benefits.

Vulnerable groups

Women, IDPs, returnees, persons with disabilities, and minority clans are the most vulnerable. Support is provided by international organizations, and local NGOs offering cash aid, psychosocial support, and livelihood assistance.



Photo: IOM Mary Qahre 2015

5 Education

General information on education

Somalia's education system is significantly impacted by the country's ongoing conflict, economic challenges, and infrastructure deficits. While there are efforts from the government, international organizations, and NGOs to improve the situation, access to quality education remains limited, particularly in rural and conflict-affected areas. Addressing these challenges requires continued support and innovative solutions to ensure that all children have the opportunity to receive an education.

School fee in the Hargeisa region

Hargeisa Educational level

Pre-school	
Child care	50 USD
Kindergarten	50 USD

Primary level (mandatory)	
Pre-school 1-2	30 USD
Primary school (6 years)	30 USD

Secondary level	
High School	30 USD or 50 USD

Higher education	
University	450 to 600 USD

School fee in Mogadishu, Garowe and Bossaso

Pre-school	
Child care	50 USD
Kindergarten	50 USD

Primary level (mandatory)	
Pre-school	30 USD
Primary school	20 USD
Secondary level	

High School	350 USD
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Higher education	
University	350 USD

Possibilities of technical / vocational trainings

Technical and vocational training opportunities are available through a mix of government initiatives, NGO programs, private training centres, and community-based efforts. While there are valuable training options in various technical fields, challenges related to infrastructure, funding, and industry linkages remain. Continued support and development are needed to expand and improve vocational training opportunities, ensuring they meet the needs of the local population and contribute to economic growth. Most vocational schools in Mogadishu, Bossaso, and Garowe charge 20 USD per month for each student. In Hargeisa, the fee for Vocational Training courses vary from 20 USD to 50 USD per month and according to the courses selected by returnees.

Possibilities and access to scholarships and grants

Scholarships and grants for education and vocational training in Somalia are limited but available through a variety of sources. International organisations such as Care International, Save the Children, MIIS, GIZ, and Relief International, along with several foreign countries, are supporting Somalia through scholarship opportunities facilitated by the Ministry of Education. These countries include Ethiopia and Egypt. The selection process for these scholarships is highly competitive, with the Ministry of Educa-

5 Education

tion responsible for the selection based on specific criteria.

Access for returnees

Registration procedure: Access to primary and secondary schools is generally better in urban areas compared to rural re-gions. Cities like Mogadishu, Hargeisa, and Bosaso have more schools and educational facilities, while rural and remote areas often have fewer schools and limited resource.

Mogadishu (Banadir)
Returnees are treated like other students in Somalia without any special requirements.

Garowe, Bossaso (Puntland)
Returnees are treated like other students in Somalia without any special requirements.

Hargeisa (Somaliland)
Both returnees and host community students are treated equally. No discrimination between students is observed



Photo: IOM Tadesse 2022

6 Children

General information on children

Children in Somalia face severe and overlapping challenges that threaten their survival and development. Malnutrition is widespread, with alarming rates of stunting among children under five, while neonatal mortality remains high due to inadequate healthcare services. Access to medical facilities and regular health check-ups is extremely limited, particularly in remote and nomadic communities.

Education opportunities are scarce, especially in rural areas, where early learning programs are lacking and school enrollment rates remain very low. Protection risks are pervasive, as children are exposed to family separation, killing, maiming, sexual and physical violence, and exploitative forms of child labor. Ongoing conflict and insecurity have displaced millions, leaving many children separated from their families and vulnerable to trafficking and exploitation, while some undertake dangerous journeys alone in search of safety and livelihoods. The combined impact of conflict, climate shocks, and chronic poverty has deepened vulnerability, with recurrent droughts and recent funding shortfalls worsening hunger and undermining the effectiveness of humanitarian assistance.

Organizations as UNICEF and Save the Children provide life-saving therapeutic food and medical care for malnourished children through health and stabilization centers, while also supporting immunization campaigns to protect against diseases such as polio and measles. In the area of child protection, efforts focus

on identifying and assisting unaccompanied and separated children, facilitating family reunification, and delivering community-based mental health and psychosocial support services for children affected by crises, alongside gender-based violence response initiatives. Additionally, they work with partners to ensure access to learning opportunities for children, particularly those displaced or living in remote areas, and provide support to prevent school closures caused by the ongoing crisis.



Photo: Ismail Haji 2022

7 Contacts

IOM Somalia (Main Office)
Contact: Ismail Abdinur Abdulkadir
Mobile Phone: +252 615577350
Email: iabdulkadir@iom.int
Free IOM hotline for returnees in Somalia: 3085

IOM Somaliland
Contact: Dayib Abdirahman ASKAR
Mobile Phone: +252 634444969
Email : daskar@iom.int
Free IOM hotline for returnees in Somalia/Somaliland: 3085

IOM Puntland
Contact: ABDI Bashir Abdirizak
Mobile Phone: +252 63 6522642
Email: baabdi@iom.int
Puntland/ Somalia: 3085

Ministry of Health, Somalia
Public health and disease prevention
Mogadishu, Somalia
Phone: +252 61 277 9000
EMail: info@moh.gov.so

Erdogan Hospital
Public Hospital Mogadishu (Capital)
Phone: +252 616977388

Somali Sudanese Specialized Hospital (SSSH) in Mogadishu
Private Hospital
Phone: +252 61 3233333

Hargeisa Group Hospital
Public Hospital in Hargeisa/ Somaliland
Phone: +252 2 523114

Bossaso General Hospital
Public hospital in Bossaso/ Puntland
Phone: +252 40123456

Garowe General Hospital
Public hospital in Garowe/ Puntland
Phone: +252 90680319

Relief International
Provides emergency medical care, health services, across various areas
+1 323 302 1180

Somali Red Crescent Society
Provides emergency medical services across various areas
Phone: +252 1 6328900

Médecins Sans Frontières (MSF) / Doctors Without Borders
Operates in multiple regions, including Mogadishu, Kismayo and rural areas
Phone: +252 1 287 654

African Development Solutions
Provides health services, including maternal and child health programs and emergency health interventions.
Phone: +252 1 254789

Somalia Real Estate Group
Housing in Mogadishu
Phone: +252 1 3467891

Hargeisa Real Estate Agency
Housing in Hargeisa,
Phone: +252 2 550 123

7 Contacts

National Rental
Housing in Hargeisa
Phone: + 252 63 4400865

Bosaaso Real Estate
Housing in Bosaso
Phone: +252 40 123 456

United Nations High Commissioner for Refugees (UNHCR)
Operates across Somalia -Mogadishu
Phone: +252 1 234 567

Mogadishu International School (primary and secondary)
Airport road Mogadishu
Phone: 61 7067850

Ubax International School
Hargeisa
Phone: 2 527700

Simad University
Mogadishu
Phone: 61 9924646

Puntland State University
Garowe
Phone: 907 778 204

University of Hargeisa
Hargiesa
Phone: 63 6265819

8 At a glance

Measures to be undertaken before return

- **Travel Document:** Have a valid Travel document (passport or laissez-passer)
- **Health:** Check medical condition
- **Contacts:** Provide contact details of Family/relative/Friends in Somalia
- **Reintegration:** Receive information on IOM Somalia contact details from his/her return counselor in case reintegration assistance is granted

Measures to be undertaken immediately upon arrival

- **Immigration:** Answer all questions and share respected documents in case he/she is questioned by immigration. (note: returnees traveling with a laissez-passer normally get questioned).
- **Transport:** Have asked family member to wait at the airport
- **Housing:** Be Provided temporary accommodation for returnee who need onward transportation (only when flight is booked with IOM).
- **IOM:** be assisted by IOM (in case reintegration is granted) for reintegration support (including in-kind payment), attend monitoring session with his consent to provide photos and other related information like returnees stories.



Photo: IOM Claudia Rosel 2024