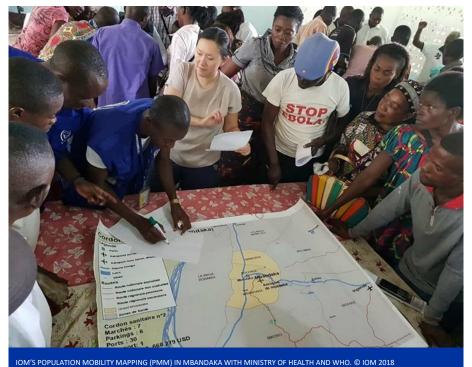


EBOLA RESPONSE BULLETIN

5 JUNE 2018



IOM'S RESPONSE FOCUS

- Population Mobility Mapping (PMM) at border-crossings and in the affected province
- Points of Entry (POE) surveillance (health screening)
- Infection Prevention and Control measures (hygiene promotion) at POE
- ♦ Risk communication at POE
- Cross-border coordination between DRC, Central African Republic (CAR) and Republic of the Congo (ROC)

IOM'S APPEAL: USD 4.5 MILLION

The Ebola Virus Disease outbreak in the Equateur Province, Democratic Republic of the Congo (DRC), has been declared a public health emergency. IOM, the UN Migration Agency, is working closely with the Congolese Ministry of Health (MoH) and WHO to contain the outbreak and address the needs of affected communities.

Population mobility, including cross-border movements, was identified as a significant risk for disease transmission in this outbreak, as the epicentre of the disease is well linked with heavily populated areas through land and by the Congo River. In order to mitigate transmission risk and control the outbreak, IOM, MoH and WHO conducted joint assessments at various points of entry (POE) to DRC's capital Kinshasa, to gauge the strength of the area's epidemiological surveillance system (photo below). IOM has supported the deployment of 16 epidemiologists, medical doctors, veterinarians, and hygiene specialists to key border areas to conduct POE surveillance, risk communication, infection prevention and control (IPC), as well as



IOM-SUPPORTED BORDER HEALTH STAFF IS PROMOTING HYGINE
MEASURES TO STOP EBOLA. © IOM 2018

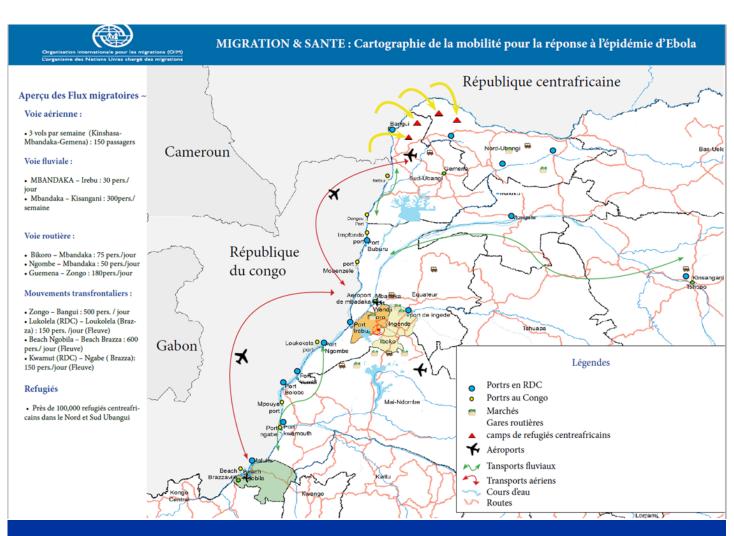


IOM'S VISIT IN A PORT IN MBANDAKA. IT IS FEARED THAT EBOLA MAY SPREAD THROUGH

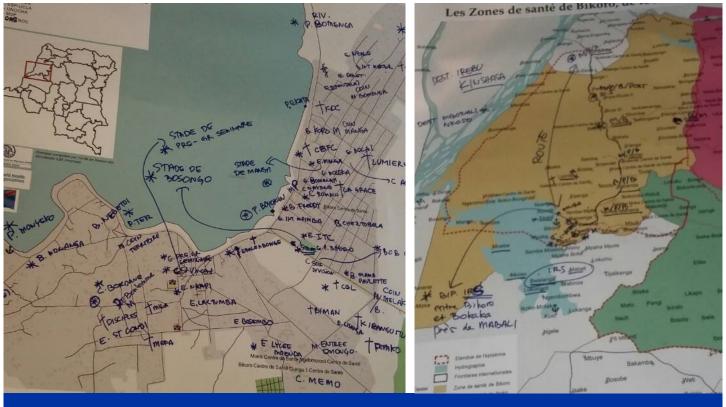
MAPPING TO GUIDE THE EBOLA RESPONSE

As of 27 May, four cases of Ebola were confirmed in Wangata area of Mbandaka, a city with a population of 1.2 million people. Mbandaka is connected by river routes to Kinshasa, as well as cities in CAR and ROC. It has fueled concerns that the disease could spread more widely.

In order to mitigate this risk, IOM, MoH and WHO jointly conducted **Population Mobility Mapping (PMM)** (top photo) in Mbandaka and Bikoro. Key informants in the communities participated in this exercise, to identify travel routes, POE and major transit/congregation sites (river & lake ports, markets, churches, bus & motorbike terminals, etc).



IOM'S PRELIMINARY MAPPING OF POPULATION MOBILITY FOR EBOLA RESPONSE (MAY 2018). IT SHOWS THE MOBILITY FLOWS (BY AIR, RIVER, ROAD) TO THE EBOLA-AFFECTED AREAS. © IOM 2018



IOM'S POPULATION MOBILITY MAPPING (PMM) OF BIKORO. THE CURRENT EBOLA OUTBREAK WAS FIRST DECLARED IN THIS NORTHWEST TOWN OF DRC. © IOM 2018

IOM'S EBOLA RESPONSE IN DR CONGO

LEVERAGING THE EXPERTISE IN MIGRATION TO GUIDE THE EBOLA RESPONSE

IOM'S PARTNERSHIP & IMMEDIATE RESPONSE

IOM works closely with the Ministry of Health, particularly with the National Programme of Hygiene at Borders (PNHF), to support their response efforts and coordination at Points of Entry (POE). IOM is supporting PNHF's surveillance activities at 30 sites (20 in Mbandaka, 3 in Bikoro, 2 Ntondo, 2 Iboko, 1 Ingenge, 1 Irebu) and 1 site in Lukolera of Mai Ndombe. The POE surveillance is conducted along with risk communication and hygiene promotion. IOM will soon provide on-site supervision and predeployment training to strengthen the POE surveillance capacity, and expand activities to Kinshasa and the areas along the Congo river in Mai Ndombe.

IOM is also conducting daily flow monitoring at 16 data collection sites in Mbandaka, Bikoro, Iboko, Ingenge and Lukolera, in order to understand the mobility volume and profiles of travelers, including internal and cross-border movements (to/from the Central African Republic and the Republic of the Congo).





IOM STRENGTHENS PREPAREDNESS

IOM will further assist cross border coordination with neighboring countries, including the Central African Republic and the Republic of the Congo, and strengthen the International Health Regulations (2005) core capacities and public health emergency preparedness, through **POE** capacity assessment, developing standard operating procedure (SOP) and carrying out simulation exercise for contingency planning.

IOM IS APPEALING TO DONORS ADDITIONAL USD 4.5 MILLION TO CONTINUE AND EXPAND ITS EBOLA RESPONSE.

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